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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: North Reading

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 08/24/2015.

**Mandatory One-Year Compliance Date:** **08/24/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 2 | Required and optional assessments | Partially Implemented |
| SE 4 | Reports of assessment results | Partially Implemented |
| SE 6 | Determination of transition services | 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 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 41 | Age span requirements | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 6 | Availability of in-school programs for pregnant students | Partially Implemented |
| CR 7B | Structured learning time | Partially Implemented |
| CR 7C | Early release of high school seniors | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 15 | Non-discriminatory administration of scholarships, prizes and awards | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |

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

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that the district does not consistently complete educational assessments, including a history of the student's educational progress in the general curriculum and teacher assessment that addresses attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults. | | | |
| **Description of Corrective Action:**  A training was completed by Dr. Margaret Reed on April 29th and June 3rd. This training covered IEP development and content, required and optional assessment, transition services, least restrictive environment, as well as developing the N1 and N2.  The Special Education Department will update the manual to specify the staff responsible for the required Educational Assessment forms A &B. The Special Education Department will train staff at the building level on the new procedure during the months Of October and November. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The district has previously uploaded the agenda and sign in sheets for Dr. Reed's training.  Additionally, the district will submit sign in sheets and agendas for the procedure training by 1/1/16. | | | |
| **Description of Internal Monitoring Procedures:**  The district will complete file reviews on five files per building following this training, and submit findings. The file reviews will be completed between 2-1-16-4-1-16. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district's internal monitoring process must be ongoing, rather than for a one-year period. | | | |
| **Department Order of Corrective Action:**  Develop an internal review and tracking system to ensure completion of educational assessments, including the history of the student's educational progress in the general curriculum (Educational Assessment A) and teacher assessment that addresses attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults (Educational Assessment B). The tracking system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  Provide the completed assessments for students identified on the Student Records Issues Worksheet by December 14, 2015.  Provide a narrative description of the updated procedures related to the completion of Educational Assessment A and B forms along with evidence of staff training on these procedures, which will include but not be limited to a training agenda, signed attendance sheets and copies of the materials presented. Please submit this to the Department on or before by December 14, 2015.  Submit a description of the internal tracking system, including the date of the system's implementation and the staff responsible for the oversight by December 14, 2015.  Submit the results of an administrative review of three student records with eligibility determinations for each Team Chair to ensure that district consistently completes educational assessments, including a history of the student's educational progress in the general curriculum and teacher assessment that addresses attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department by April 11, 2016.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s):**  12/14/2015  04/11/2016 | | | |

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| **Criterion & Topic:**  SE 4 Reports of assessment results | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records demonstrated that assessment summaries do not always include the procedures employed, the evaluator's diagnostic impressions of the student, a description of the student's needs in educationally relevant and common terms, or explicit means of meeting these needs. | | | |
| **Description of Corrective Action:**  The district will conduct a training to review the current required elements of an assessment report, update the procedure in the manual and train all special education staff on what district reports should include for narrative explanations.  A root cause analysis will be completed on this SE as it is a duplicate finding. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The District will submit the agenda and sign-in sheet for this training by 1/1/16.  The root cause analysis will be completed and uploaded by 4-1-16. | | | |
| **Description of Internal Monitoring Procedures:**  The district will conduct five file reviews per building following the training to ensure assessment summaries developed after the training include diagnostic impressions, or define in detail and in educationally relevant and common terms, the student's needs, offering explicit means of meeting those needs. The district will provide a summary of findings for those reviews. The file reviews will occur between 2-1-16-4-1-16. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 4 Reports of assessment results | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district's internal monitoring process must be ongoing, rather than for a one-year period. | | | |
| **Department Order of Corrective Action:**  Develop an internal review and tracking system to ensure that assessment summaries always include the procedures employed, the evaluator's diagnostic impressions of the student, a description of the student's needs in educationally relevant and common terms, or explicit means of meeting these needs. The tracking system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  Conduct a root cause analysis to determine why assessment summaries do not always include the procedures employed, the evaluator's diagnostic impressions of the student, a description of the student's needs in educationally relevant and common terms, or explicit means of meeting these needs. Submit a narrative description of the results of the root cause analysis and the corrective actions taken by the district by December 14, 2015.  Submit a description of the internal tracking system, including the date of the system's implementation and the staff responsible for the oversight by December 14, 2015.  Submit the results of an administrative review of three assessment summaries from each level (elementary, middle and secondary) to determine that procedures employed, the evaluator's diagnostic impressions of the student, a description of the student's needs in educationally relevant and common terms, or explicit means of meeting these needs are included in the report. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by April 11, 2016.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s):**  12/14/2015  04/11/2016 | | | |

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| **Criterion & Topic:**  SE 6 Determination of transition services | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that Transition Planning Forms (TPF) are not always updated annually. Record review also demonstrated that TPFs are not consistently completed, with sections such as post-secondary vision and disability related needs left blank. | | | |
| **Description of Corrective Action:**  A training was completed by Dr. Margaret Reed on April 29th and June 3rd. This training covered IEP development and content, required and optional assessment, transition services, least restrictive environment, as well as developing the N1 and N2.  A root cause analysis will be completed as this is a duplicate finding. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel Services | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The district has previously uploaded the agenda and sign in sheets for Dr. Reed's training.  The root cause analysis will be completed and uploaded by 4-1-16. | | | |
| **Description of Internal Monitoring Procedures:**  The district will complete file reviews on five files per building and submit findings. The file reviews will be completed between 2-1-16-4-1-16. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 6 Determination of transition services | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district's internal monitoring process must be ongoing, rather than for a one-year period. | | | |
| **Department Order of Corrective Action:**  Develop an internal review and tracking system to ensure the completion and annual review of Transition Planning Forms including post-secondary vision and disability related needs. The tracking system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  Submit the results of the root cause analysis conducted to determine completion and revision of Transition Planning Forms, as well as the district's corrective actions to be taken by December 14, 2015.  Submit a description of the internal tracking system, including the date of the system's implementation and the staff responsible for the oversight by December 14, 2015.  Submit the results of an administrative review of four middle school student records and four high school student records for the completion of the Transition Planning Form including post-secondary vision and disability related needs, as well as the annual review for the TPF. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by April 11, 2016.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
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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 staff interviews indicated that, at least one year prior to the student reaching 18 years of age, the district does not consistently inform the student and parents of the transfer of educational decision-making rights from the parent/guardian to the student upon his or her 18th birthday. In addition, the district does not consistently obtain consent from 18-year old students with shared or sole decision-making rights to continue the student's special education program. | | | |
| **Description of Corrective Action:**  The district will provide training to the team chair and special education teachers at the middle/high school level on the transfer of rights at age of majority as well as student participation and consent at the age of majority, by 1/1/16. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The district will upload sign in sheets, as well as the training agenda by 1-1-16. | | | |
| **Description of Internal Monitoring Procedures:**  The district will conduct file reviews at the middle/high school level between 02/01/16-4/01/16 and provide a summary of findings. | | | |
| 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:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district's internal monitoring process must be ongoing, rather than for a one-year period. | | | |
| **Department Order of Corrective Action:**  Develop an internal review and tracking system to ensure that (1) at least one year prior to the student reaching 18 years of age, the district consistently informs the student and parents of the transfer of educational decision-making rights from the parent/guardian to the student upon his or her 18th birthday and (2) obtaining consent from 18-year old students with shared or sole decision-making rights to continue the student's special education program. The tracking system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  Provide the completed consent to current IEPs for students identified on the Student Records Issues Worksheet by December 14, 2015.  Provide training to relevant high school staff regarding the age of majority. Review the age of majority Administrative Advisory at http://www.doe.mass.edu/sped/advisories/11\_1.html. Submit the training agenda and signed attendance sheet as evidence of high school staff training regarding the notification of parents and students one year prior to the student reaching age 18 of the transfer of educational decision-making to the student upon attainment of age of majority. Also include in the training the district's responsibility to secure consent from the student with sole or shared decision-making for continued IEP services by December 14, 2015.  Submit a description of the internal tracking system, including the date of the system's implementation and the staff responsible for the oversight by December 14, 2015.  Subsequent to the training on age of majority, submit the results of an administrative review of five student records for age of majority (1) at least one year prior to the student reaching 18 years of age, the district informs the student and parents of the transfer of educational decision-making rights from the parent/guardian to the student upon his or her 18th birthday and (2) obtaining consent from 18-year old students with shared or sole decision-making rights to continue the student's special education program. Indicate the number of records reviewed at each high school, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department by April 11, 2016.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
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| **Criterion & Topic:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that within 45 school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, high school and middle school IEP Teams do not consistently convene to determine whether the student is eligible for special education and provide to the parent either a proposed IEP and proposed placement or a written explanation of the finding of no eligibility. | | | |
| **Description of Corrective Action:**  The district will conduct a training for all special education teachers, general education teachers, and related service providers on the 45 day time frame following receipt of the parents written request to an initial or three year reevaluation meeting. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The district will upload sign in sheets and the agenda for the training by 1/1/16. | | | |
| **Description of Internal Monitoring Procedures:**  The district will complete five file reviews per building and submit findings. The file reviews will be completed between 2-1-16-4-1-16. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district's internal monitoring process must be ongoing, rather than for a one-year period. | | | |
| **Department Order of Corrective Action:**  Develop an internal review and tracking system to ensure that 45 school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, high school and middle school IEP Teams consistently convene to determine whether the student is eligible for special education and provide to the parent either a proposed IEP and proposed placement or a written explanation of the finding of no eligibility. The tracking system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  Provide a narrative description of the updated procedures related to the 45 school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, high school and middle school IEP Teams consistently convene to determine whether the student is eligible for special education and provide to the parent either a proposed IEP and proposed placement or a written explanation of the finding of no eligibility. Also provide evidence of high school and middle school staff training on these procedures, which will include but not be limited to a training agenda, signed attendance sheets and copies of the materials presented. Please submit this to the Department on or before by December 14, 2015.  Submit a description of the internal oversight and tracking system that identifies the person(s) responsible for oversight of the timelines by December 14, 2015.  Subsequent to the training, please conduct an administrative review of middle school and high school student records for eligibility timelines. Select a sample of 5 student records from the middle school and 5 student records from the high school with the most recent IEP activity either an initial evaluation to determine eligibility, or a reevaluation. Review the records to determine whether the 45 day timeline has been met. Submit the number of student records reviewed, the number of records that complied with the requirements and for any record found in continued noncompliance, determine the root cause(s) of the noncompliance and provide the district's plan to remedy the identified noncompliance with this criterion by April 11, 2016.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department onsite upon request: a) List of student names, building names and grade levels of the records reviewed: b) the date of the review: c) Name(s) of the person(s) who conducted the review, their role(s) and their signature(s). | | | |
| **Progress Report Due Date(s):**  12/14/2015  04/11/2016 | | | |

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| **Criterion & Topic:**  SE 13 Progress Reports and content | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of middle school records indicated that the district does not consistently provide progress reports to parents as frequently as non-disabled parents receive report cards. Student records at the middle school and high school also indicated that not all progress reports include written information on the student's progress toward the annual goals in the IEP. | | | |
| **Description of Corrective Action:**  The special education department will provide a training to middle and high school special education teachers on the required frequency as well as appropriate content required for progress reports.  A root cause analysis will be completed as this is a duplicate finding. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel Services | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The district will upload sign in sheets and agendas for the training by 1/1/16  The root cause analysis will be completed and uploaded by 4-1-16. | | | |
| **Description of Internal Monitoring Procedures:**  The district will complete five file reviews per buildings and submit findings. The file reviews will be conducted between 2-1-16-4-1-16. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 13 Progress Reports and content | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district's internal monitoring process must be ongoing, rather than for a one-year period. | | | |
| **Department Order of Corrective Action:**  Develop an internal review and tracking system to ensure that (1) middle school progress reports are provided to parents as frequently as non-disabled parents receive report cards and that (2) middle school and high school progress reports include written information on the student's progress toward the annual goals in the IEP. The tracking system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  Provide a narrative summary of the root cause analyses for (1) frequency of progress reports at the middle school and (2) content of progress reports focuses on IEP goals for the middle school and high school students. Describe the corrective actions the district will take to address the noncompliance for progress reports by December 14, 2015.  Submit a description of the internal tracking system, including the date of the system's implementation and the staff responsible for the oversight by December 14, 2015.  Submit the results of an administrative review of 5 middle school and 5 high school student records for progress reports provided to parents as frequently as non-disabled parents receive report cards and written information on the student's progress toward the annual goals in the IEP. Indicate the number of records reviewed at the middle school and high school, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department by April 11, 2016.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s):**  12/14/2015  04/11/2016 | | | |

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| **Criterion & Topic:**  SE 18A IEP development and content | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that IEP Teams do not consistently or accurately address all elements of the IEP; this includes missing vision statements, goals without benchmarks, and inconsistencies between goals and service delivery grids. | | | |
| **Description of Corrective Action:**  A training was completed by Dr. Margaret Reed on April 29th and June 3rd. This training covered IEP development and content, required and optional assessment, transition services, least restrictive environment, as well as developing the N1 and N2. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel Services | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The district has previously uploaded the agenda and sign in sheets for this training. | | | |
| **Description of Internal Monitoring Procedures:**  The district will complete five file reviews per building and submit findings. The file reviews will be completed between 2-1-26-4-1-16. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district's internal monitoring process must be ongoing, rather than for a one-year period. | | | |
| **Department Order of Corrective Action:**  Develop an internal review and tracking system to ensure that IEP Teams consistently and accurately address all elements of the IEP, including vision statements, goals with benchmarks, and maintain consistency between goals and service delivery grids. The tracking system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  Provide completed IEPs for the students noted on the Student Record Issues Worksheet by December 14, 2015.  Provide a narrative description of the updated procedures related to the completion of IEPs along with evidence of staff training on these procedures, which will include but not be limited to a training agenda, signed attendance sheets and copies of the materials presented. Please submit this to the Department on or before by December 14, 2015.  Submit a description of the internal tracking system, including the date of the system's implementation and the staff responsible for the oversight by December 14, 2015.  Submit the results of an administrative review of three student records for each Team Chair to ensure that IEPs are fully completed. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department by April 11, 2016.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the IEP Teams do not consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | | |
| **Description of Corrective Action:**  A training was completed by Dr. Margaret Reed on April 29th and June 3rd. This training covered IEP development and content, required and optional assessment, transition services, least restrictive environment, as well as developing the N1 and N2.  A root cause analysis will be completed as this is a duplicate finding. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel Services | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The district has previously uploaded the agenda and sign in sheets for this training.  The root cause analysis will be completed and uploaded by 4-1-16. | | | |
| **Description of Internal Monitoring Procedures:**  The district will complete five file reviews per building and submit findings. The file reviews will be completed between 2-1-16-4-1-16. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district's internal monitoring process must be ongoing, rather than for a one-year period. | | | |
| **Department Order of Corrective Action:**  Develop an internal review and tracking system to ensure that the IEP Teams consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment with the use of supplementary aids and services, could not be achieved satisfactorily. The tracking system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  Conduct a root cause analysis to determine why the nonparticipation justification statements do not consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment and provide a narrative description of the corrective actions the district will take by December 14, 2015.  Submit a description of the internal tracking system, including the date of the system's implementation and the staff responsible for the oversight by December 14, 2015.  Submit the results of an internal review of five IEPs from each building for nonparticipation justification statements. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by April 11, 2016.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s):**  12/14/2015  04/11/2016 | | | |

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

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the Notices of Proposed School District Action (N1) do not consistently provide a description of each evaluation procedure, test, record, or report the district used as a basis for the proposed or refused action; and a description of any factors relevant to the district's proposal or refusal. | | | |
| **Description of Corrective Action:**  A training was completed by Dr. Margaret Reed on April 29th and June 3rd. This training covered IEP development and content, required and optional assessment, transition services, least restrictive environment, as well as developing the N1 and N2. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel Services | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The district has previously uploaded the agenda and sign in sheets for this training. | | | |
| **Description of Internal Monitoring Procedures:**  The district will complete five file reviews per building and submit findings. The file reviews will take place between 2-1-16-4-1-16. | | | |
| 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:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district's internal monitoring process must be ongoing, rather than for a one-year period. | | | |
| **Department Order of Corrective Action:**  Develop an internal review and tracking system to ensure completion of the Notices of Proposed School District Action (N1) with a description of each evaluation procedure, test, record, or report the district used as a basis for the proposed or refused action and a description of any factors relevant to the district's proposal or refusal. The tracking system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  Provide a narrative description of the updated procedures related to the completion of Notices of Proposed School District Action (N1) along with evidence of staff training on these procedures, which will include but not be limited to a training agenda, signed attendance sheets and copies of the materials presented. Please submit this to the Department on or before by December 14, 2015.  Submit a description of the internal tracking system, including the date of the system's implementation and the staff responsible for the oversight by December 14, 2015.  Submit the results of an administrative review of three student records from each level (preschool, elementary, middle, high and out-of-district) to ensure that the district consistently completes Notices of Proposed School District Action (N1). Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department by April 11, 2016.    \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s):**  12/14/2015  04/11/2016 | | | |

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

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| **Criterion & Topic:**  SE 41 Age span requirements | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews demonstrated that the ages of the youngest and oldest students in the high school's special education instructional groups differ by more than 48 months for Life Skills, D Block and Academic Support, D Block. Document review and interviews verified that the district did not submit a written request for approval of a wider age range to the Department in cases where the district believes a request is justified. | | | |
| **Description of Corrective Action:**  The special education department will review the instructional groups for Life Skills D block and Academic Support, D Block as it pertains to the age of students. | | | |
| **Title/Role(s) of Responsible Persons:**  Cynthia Conant, Director of Pupil Personnel Services | | **Expected Date of Completion:**  06/15/2016 | |
| **Evidence of Completion of the Corrective Action:**  The district will upload current class rosters including student date of birth for Life Skills and Academic Support. | | | |
| **Description of Internal Monitoring Procedures:**  The district will explore the option of applying filters, that will alert the user of an age violation, to the current student information system used for scheduling of students. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 41 Age span requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  Submit the age span data for instructional groupings of classes with only IEP students at the high school using the Instructional Groupings Sheet from the WBMS document library by December 14, 2015.  Submit a detailed description of the internal tracking system for oversight of student age span, including the date of the system's implementation and the staff responsible for the oversight by December 14, 2015. | | | |
| **Progress Report Due Date(s):**  12/14/2015 | | | |

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

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| **Criterion & Topic:**  CR 3 Access to a full range of education programs | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that although the district describes how it ensures equal access to a full range of education programs for all students, regardless of race, color, sex, religion, national origin, sexual orientation, disability, or homelessness, this policy does not address the protected category of gender identity. | | | |
| **Description of Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Patrick C. Daly | | **Expected Date of Completion:**  10/01/2015 | |
| **Evidence of Completion of the Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Description of Internal Monitoring Procedures:**  We will regularly monitor any changes to regulations that would require additional updates. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district did not include the method to disseminate updated procedures for the inclusion of gender identity as a protected category for equal access. | | | |
| **Department Order of Corrective Action:**  Develop procedures to disseminate and train staff on gender identity as a protected category for equal access. | | | |
| **Required Elements of Progress Report(s):**  Provide evidence of dissemination and training for staff on the updated nondiscrimination statement with the added category of gender identity, including a training agenda, signed attendance sheets and copies of the materials presented by December 14, 2015. | | | |
| **Progress Report Due Date(s):**  12/14/2015 | | | |

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

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| **Criterion & Topic:**  CR 6 Availability of in-school programs for pregnant students | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that students who are pregnant and wish to remain in school or who return to school after the birth of their baby must first obtain the certification of a physician, which is not required for other physical or emotional conditions requiring the attention of a physician. | | | |
| **Description of Corrective Action:**  Documents were updated to no longer indicate that students who are pregnant and wish to remain in school or who return to school after the birth of their baby must first obtain the certification of a physician, which is not required for other physical or emotional conditions requiring the attention of a physician. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Patrick C. Daly | | **Expected Date of Completion:**  10/01/2015 | |
| **Evidence of Completion of the Corrective Action:**  Updated documents. | | | |
| **Description of Internal Monitoring Procedures:**  We will regularly monitor any changes to regulations that would require additional updates. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 6 Availability of in-school programs for pregnant students | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district did not include the method to disseminate updated procedures for pregnant students at the middle school and high school. | | | |
| **Department Order of Corrective Action:**  Develop a method to disseminate the updated procedure for pregnant students to staff at the middle school and high school. | | | |
| **Required Elements of Progress Report(s):**  Provide evidence of dissemination and training for middle school and high school staff on the revised procedures for pregnant students, including a training agenda, signed attendance sheets and copies of the materials presented by December 14, 2015. | | | |
| **Progress Report Due Date(s):**  12/14/2015 | | | |

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

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| **Criterion & Topic:**  CR 7B Structured learning time | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that only high school freshmen and sophomores are required to take physical education. | | | |
| **Description of Corrective Action:**  The Program of Studies indicates that students, beginning in the 2015-16 school year with the class of 2017 will be required to meet this requirement by choosing from a variety of pathways. In addition we have developed a system of measuring student compliance with this requirement. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Patrick C. Daly | | **Expected Date of Completion:**  10/01/2015 | |
| **Evidence of Completion of the Corrective Action:**  Program of Studies, Process forms and online tool for ensuring compliance.  Beginning with the 2015 ? 2016 school year, all high school students in the class of 2017 and in subsequent classes must participate in a physical education program each year of high school.  Freshman and Sophomore Requirements: Students in grades 9 and 10 are required to successfully complete the ‘Health/Physical Education’ course in each of the respective school years.  Junior and Senior Requirements: Junior and senior students have a variety of options by which they may complete the physical education program requirement.  To fulfill the requirement for physical education in the junior and senior years, all students must select one of the following options each year:  Elect to take the ‘Fitness in the 21st Century’ course at North Reading High School.  Play on an inter-scholastic team at North Reading High School for at least one season. The respective athletic coach is responsible for completing the required form for the student. Documentation reflecting full completion of the sports season must be provided to the student’s guidance counselor by the student using the requisite form.  Please note that the requirement of an ‘Athletic User Fee’ applies.  Participate in a school-based intramural weight training and conditioning program at North Reading High school. A North Reading High School weight room supervisor will verify participation and attendance. The time commitment must be a minimum of forty (40) total hours in the given school year. At the conclusion of the forty (40) hour requirement, the student must provide his/her guidance counselor with written documentation of completion of the intramural weight training and conditioning program using the requisite form.  72 Participate in a fitness/exercise program at an off-campus fitness/exercise facility at personal expense. This may include weight training, general fitness, dance, yoga, skating, gymnastics, karate, judo, or other similar activity. The time commitment must be a minimum of forty (40) total hours. At the conclusion of the forty (40) hour requirement, the student must provide his/her guidance counselor with written documentation of completion of the fitness/exercise program using the requisite form. | | | |
| **Description of Internal Monitoring Procedures:**  We have developed a form that students will complete to indicate how they will meet the requirement. We will then follow up with the coaches and providers to ensure that the students have completed the requirement. If they have not they will need to meet the requirement in an alternative way to meet the requirement.  We will regularly monitor any changes to regulations that would require additional updates. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 7B Structured learning time | **Corrective Action Plan Status:** Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  Provide evidence of training including agendas, materials presented and signed attendance sheets for coaches and guidance counselors on completion of the form(s) for alternatives to meet the requirement for physical education and for the verification of the 40 hours of physical activity by April 11, 2016.  Please note that state law does not require a minimum/maximum hours of PE per year, only that it is taken by every student, k-12, annually. Health & wellness courses may also substitute/supplement PE. | | | |
| **Progress Report Due Date(s):**  04/11/2016 | | | |

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

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| **Criterion & Topic:**  CR 7C Early release of high school seniors | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that seniors are released more than 12 school days before the regular scheduled closing date of the high school. | | | |
| **Description of Corrective Action:**  The 2015-16 school calendar indicates that seniors are not released more than 12 days before the regular scheduled closing date of the high school. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Patrick C. Daly | | **Expected Date of Completion:**  10/01/2015 | |
| **Evidence of Completion of the Corrective Action:**  2015-16 School Calendar | | | |
| **Description of Internal Monitoring Procedures:**  We will adhere to this regulation each year when designing the school calendar. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 7C Early release of high school seniors | **Corrective Action Plan Status:** Approved  **Status Date:** 10/19/2015  **Correction Status:** Corrected | | |
| **Basis for Decision:**  The district provided the 2015-2016 calendar with seniors receiving 11 days early release from the last day of school for all other high school students. This calendar was provided with the comments to the Draft. | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):** | | | |
| **Progress Report Due Date(s):** | | | |

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

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| **Criterion & Topic:**  CR 8 Accessibility of extracurricular activities | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district's policy to ensure equal access to extracurricular activities for all students, regardless of race, sex, color, religion, national origin, sexual orientation, disability, or homelessness, does not address the protected category of gender identity. | | | |
| **Description of Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Patrick C. Daly | | **Expected Date of Completion:**  10/01/2015 | |
| **Evidence of Completion of the Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Description of Internal Monitoring Procedures:**  We will regularly monitor any changes to regulations that would require additional updates. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district did not include the method to disseminate updated procedures for the inclusion of gender identity as a protected category to ensure equal access to extracurricular activities. | | | |
| **Department Order of Corrective Action:**  Develop a training and dissemination method for the updated procedures for equal access to extracurricular activities with the protected class of gender identity included. | | | |
| **Required Elements of Progress Report(s):**  Provide evidence of dissemination and training for staff on the updated extracurricular activities with the added category of gender identity, including a training agenda, signed attendance sheets and copies of the materials presented by December 14, 2015. | | | |
| **Progress Report Due Date(s):**  12/14/2015 | | | |

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

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| **Criterion & Topic:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents regarding non-discriminatory administration of scholarships, prizes and awards confirmed that gender identity as a protected category is not addressed. | | | |
| **Description of Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Patrick C. Daly | | **Expected Date of Completion:**  10/01/2015 | |
| **Evidence of Completion of the Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Description of Internal Monitoring Procedures:**  We will regularly monitor any changes to regulations that would require additional updates. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district did not include the method to disseminate updated procedures for the inclusion of gender identity as a protected category for non-discriminatory administration of scholarships, prizes and awards. | | | |
| **Department Order of Corrective Action:**  Develop procedures to disseminate and train staff on gender identity as a protected category for non-discriminatory administration of scholarships, prizes and awards. | | | |
| **Required Elements of Progress Report(s):**  Provide evidence of dissemination and training for staff on the updated procedures for the administration of scholarships, prizes and awards with the added category of gender identity, including a training agenda, signed attendance sheets and copies of the training materials presented by December 14, 2015.. | | | |
| **Progress Report Due Date(s):**  12/14/2015 | | | |

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

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| **Criterion & Topic:**  CR 21 Staff training regarding civil rights responsibilities | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that the district's staff training regarding civil rights responsibilities does not address gender identity as a protected category. | | | |
| **Description of Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Patrick C. Daly | | **Expected Date of Completion:**  10/01/2015 | |
| **Evidence of Completion of the Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Description of Internal Monitoring Procedures:**  We will regularly monitor any changes to regulations that would require additional updates. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  Provide evidence of training on civil rights responsibilities for all protected categories, including gender identity, that includes but is not limited to a training agenda, signed attendance sheet and copies of the materials presented. Please submit this to the Department by December 14, 2015. | | | |
| **Progress Report Due Date(s):**  12/14/2015 | | | |

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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 while individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, religion, national origin and sexual orientation, this process does not address gender identity as a protected category. | | | |
| **Description of Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Patrick C. Daly | | **Expected Date of Completion:**  10/01/2015 | |
| **Evidence of Completion of the Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Description of Internal Monitoring Procedures:**  We will regularly monitor any changes to regulations that would require additional updates. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district updated the nondiscrimination statement in the individual teacher survey for curriculum review, The district added 'gender identity' to the curriculum survey, however evidence that each teacher has completed the survey for the 2014-2015 school year was not provided. | | | |
| **Department Order of Corrective Action:**  Disseminate the individual teacher curriculum survey and track the completion of the survey for all teachers. | | | |
| **Required Elements of Progress Report(s):**  Provide a summary report that each teacher has completed the curriculum survey and is aware of the addition of the protected category for gender identity by April 11, 2016. | | | |
| **Progress Report Due Date(s):**  04/11/2016 | | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that while the district formally evaluates all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities, this process does not address gender identity as a protected category. | | | |
| **Description of Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Patrick C. Daly | | **Expected Date of Completion:**  10/01/2015 | |
| **Evidence of Completion of the Corrective Action:**  Documents were updated to include the protected category of gender identity. | | | |
| **Description of Internal Monitoring Procedures:**  We will regularly monitor any changes to regulations that would require additional updates. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district did not include the method to disseminate updated procedures for the inclusion of gender identity as a protected category for the evaluation of equal access for K-12. | | | |
| **Department Order of Corrective Action:**  Develop procedures for the equal access evaluation K-12 that include the protected category of gender identity. | | | |
| **Required Elements of Progress Report(s):**  Provide evidence that the district evaluation for equal access ensures that all students, regardless of race, color, sex, religion, national origin, limited English proficiency, sexual orientation, gender identity, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities by April 11, 2016. | | | |
| **Progress Report Due Date(s):**  04/11/2016 | | | |