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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: Norwood

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 04/29/2015.

**Mandatory One-Year Compliance Date:** **04/29/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 14 | Review and revision of IEPs | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 56 | Special education programs and services are evaluated | Not Implemented |
| CR 7B | Structured learning time | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |

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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 indicated that upon receipt of a parent's written consent to an initial evaluation or re-evaluation, the district is not always determining whether the student is eligible for special education and providing the parent with either a proposed IEP and placement or a finding of no eligibility within 45 school working days. |
| **Description of Corrective Action:** Consents for initial and re-evaluations will be date stamped and tracked to initiate the process to determine student eligibility and placement prior to the 45th day. Consents will be recorded by the IEP facilitator in the district's special education software application. Reports will be generated to the team chair and administration. The team chair will coordinate with parents and liaisons to meet prior to the 45th day. Spread sheets will be developed to track all evaluations by the due date. |
| **Title/Role(s) of Responsible Persons:**Paula Alexander, Director of Student Services /Suzanne Gervais, Special Education Coordinator | **Expected Date of Completion:**12/04/2015 |
| **Evidence of Completion of the Corrective Action:**Tracking forms developed by IEP facilitators and corresponding Team Chair Calendar Schedule. |
| **Description of Internal Monitoring Procedures:** Reports submitted to special education administration on a monthly basis. |
| 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:** 06/09/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district's plan does not include training for Team chairpersons on the requirement for determining eligibility and providing the proposed IEP and placement or finding of no eligibility within 45 days of receiving written consent. |
| **Department Order of Corrective Action:**Provide training for Team chairpersons on the timelines of determination of eligibility and provision of documentation to the parent. |
| **Required Elements of Progress Report(s):** By September 14, 2015, submit evidence of training conducted by the Director of Student Services for Team chairpersons and any other appropriate staff members on the requirement for determining eligibility and providing the proposed IEP and placement or finding of no eligibility within 45 days of receiving written consent. Include a copy of a detailed agenda, specific training materials used and signed participant attendance sheets, including the role of all participants.Following implementation of the district's revised tracking system and training, conduct an internal review of the district's tracking data at each level (preschool, elementary, middle school, high school). Report the number of records reviewed, the number in compliance and for any records out of compliance, indicate the specific corrective action taken to remedy the non-compliance. Submit this information by December 18, 2015.\*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s). |
| **Progress Report Due Date(s):** 09/14/201512/18/2015 |

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| **Criterion & Topic:** SE 14 Review and revision of IEPs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that IEP Team meetings are not always held annually, on or before the expiration date of the current IEP. |
| **Description of Corrective Action:** All team chairs and liaisons will coordinate at weekly intake meetings dates and times for all upcoming annual reviews. Dates will be confirmed with IEP facilitator in the special education software program. Parent schedules will be considered in this process as well as student availability based on state-wide testing dates. |
| **Title/Role(s) of Responsible Persons:**Paula Alexander, Director of Student Services Suzanne Gervais, Special Education Coordinator | **Expected Date of Completion:**11/06/2015 |
| **Evidence of Completion of the Corrective Action:**A master report will be generated the first week of the new school year capturing student IEP end dates. This report will be provided to the Team Chairs to schedule the annual IEP meetings accordingly. |
| **Description of Internal Monitoring Procedures:** Reports will be generated quarterly for review by the administrative team, as well as team chairs. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 14 Review and revision of IEPs | **Corrective Action Plan Status:** Partially Approved **Status Date:** 06/09/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district's plan does not include training for Team chairpersons on the requirement for conducting an IEP Team meeting prior to the expiration date of the current IEP. |
| **Department Order of Corrective Action:**Provide training for Team chairpersons on the requirement for conducting an IEP Team meeting prior to the expiration date of the current IEP. |
| **Required Elements of Progress Report(s):** By September 14, 2015, submit evidence of training conducted by the Director of Student Services for Team chairpersons and any other appropriate staff members on the requirements for conducting an IEP Team meeting prior to the expiration date of the current IEP. Include a copy of a detailed agenda, specific training materials used and signed participant attendance sheets including the role of all participants.Following implementation of the district's revised procedures for tracking annual review timelines and training, conduct an internal review of the district's tracking data at each level (preschool, elementary, middle school, high school). Report the number of records reviewed, the number in compliance and for any records out of compliance, indicate the specific corrective action taken to remedy the non-compliance. Submit this information by December 18, 2015.\*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s). |
| **Progress Report Due Date(s):** 09/14/201512/18/2015 |

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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 if a student is removed from the general education classroom at any time, the IEP Non-participation Justification statement does not always state why the removal is considered critical to the student's program and the basis for the Team's 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:** All special education staff will attend an in-service on IEP Development on 9/1/2015. Follow ups will be conducted by administration at monthly staff meetings. |
| **Title/Role(s) of Responsible Persons:**Paula Alexander, Director of Student Services,Suzanne Gervais, Special Education Coordinator | **Expected Date of Completion:**12/04/2015 |
| **Evidence of Completion of the Corrective Action:**Sign in sheet and agenda for the 9/1/15 in-service and documentation from monthly staff meetings. |
| **Description of Internal Monitoring Procedures:** Team chairs will carefully review IEP's written by school liaisons with emphasis on the Non-participation Justification statement and provide feedback to liaison and administration. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved **Status Date:** 06/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 14, 2015, submit evidence of training conducted by the Director of Student Services for special education staff on developing Non-participation Justification statements that indicate why the removal is considered critical to the student's program and the basis for the Team's conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Include a copy of the detailed agenda, specific training materials used and signed participant attendance sheets including their role in the district.By December 18, 2015, submit a report of the results of an internal review of a random sample of student records, conducted following the staff training, to ensure consistency and continued compliance for appropriate completion of IEP Non-participation Justification statements. Report the number of student records reviewed, the number of records in compliance, and for any records not in compliance, determine the root cause(s) of the non-compliance and provide the district's plan to remedy the non-compliance.\*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of the student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, their role(s), and signature(s). |
| **Progress Report Due Date(s):** 09/14/201512/18/2015 |

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| **Criterion & Topic:** SE 56 Special education programs and services are evaluated | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documentation and interviews indicated that the district does not regularly evaluate its special education programs and services. |
| **Description of Corrective Action:** The Student Services Department will develop a survey to be posted on Survey Monkey which will address program evaluation and services. This survey will be distributed to parents and special education staff, which will be the target audience, at the beginning of the 2015-2016 school year. Data will be collected and shared with administration. There will be a follow up survey and the end of the school year. |
| **Title/Role(s) of Responsible Persons:**Paula Alexander, Director of Student Services,Suzanne Gervais, Special Education Coordinator | **Expected Date of Completion:**12/04/2015 |
| **Evidence of Completion of the Corrective Action:**Report and tabulation of survey results will be shared with administration, staff and the parent advisory council in November 2015 and May 2016. |
| **Description of Internal Monitoring Procedures:** Report and tabulation of survey results will be shared with administration, staff and the parent advisory council in November 2015 and May 2016. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 56 Special education programs and services are evaluated | **Corrective Action Plan Status:** Approved **Status Date:** 06/09/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 14, 2015, submit a description of the district's proposed evaluation plan that includes what the survey will address, the timeline for implementation and the staff responsible.By December 18, 2015, submit a copy of the special education program evaluation that includes an analysis of the survey data, a summary of the results, and an action plan for any recommendations based on the results. |
| **Progress Report Due Date(s):** 09/14/201512/18/2015 |

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| **Criterion & Topic:** CR 7B Structured learning time | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documentation and interviews indicated that physical education is not required in all four years of high school. Specifically, physical education is not a requirement for students in grades 11 and 12, and not all of the students in these grades take it as an elective. |
| **Description of Corrective Action:** At the start of the new school year 2015-16, all students will be scheduled to participate in physical education in grades 9-12. |
| **Title/Role(s) of Responsible Persons:**Alexander Wyeth, Assistant Superintendent, and Jonathan Bourn, Norwood High School Principal | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**There is a published plan for our new High School Wellness Program beginning in September of 2015. |
| **Description of Internal Monitoring Procedures:** This new Wellness requirement will be monitored by the high school principal, the high school guidance department, and the Assistant Superintendent annually as students' schedules are created by the guidance department. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 7B Structured learning time | **Corrective Action Plan Status:** Approved **Status Date:** 06/03/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 14, 2015, submit a description from the 2015-2016 Norwood High School Program of Studies and Wellness Program that includes a statement that physical education is now a requirement for students all four years of high school. |
| **Progress Report Due Date(s):** 09/14/2015 |

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| **Criterion & Topic:** CR 10A Student handbooks and codes of conduct | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documentation indicated that the code of conduct as set forth in the Coakley Middle School Student Handbook does not include appropriate procedures for the discipline of students with special needs and students with Section 504 Accommodation Plans. In addition, the non-discrimination policy does not specifically affirm the school's non-tolerance for harassment and discrimination based on race, color, national origin, sex, gender identity, religion, or sexual orientation, or include procedures for accepting, investigating and resolving complaints alleging discrimination or harassment, and the disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred. |
| **Description of Corrective Action:** The middle school principal will be revising and updating the middle school’s student handbook in June 2015 that will include the appropriate procedures for the discipline of students with special needs and students with Section 504 Accommodation Plans, and the non-discrimination policy will specifically affirm the school's non-tolerance for harassment and discrimination based on race, color, national origin, sex, gender identity, religion, or sexual orientation, and will include procedures for accepting, investigating and resolving complaints alleging discrimination or harassment, and the disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred. |
| **Title/Role(s) of Responsible Persons:**Alexander Wyeth, Assistant Superintendent, and Jackie Mann, Coakley Middle School Principal. | **Expected Date of Completion:**09/01/2015 |
| **Evidence of Completion of the Corrective Action:**A copy of the new Coakley Middle School Handbook and relevant sections that have been added to address this criterion. |
| **Description of Internal Monitoring Procedures:** The middle school principal and the assistant superintendent will review the student handbook annually to make sure all civil rights laws are complied with prior to publication. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved **Status Date:** 06/03/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**   |
| **Department Order of Corrective Action:**  |
| **Required Elements of Progress Report(s):** By September 14, 2015, submit a copy of the revised Coakley Middle School Handbook that includes procedures for the discipline of students with special needs and students with Section 504 Accommodation Plans, a non-discrimination policy affirming the school's non-tolerance for harassment and discrimination based on race, color, national origin, sex, gender identity, religion, or sexual orientation, and procedures for accepting, investigating and resolving complaints alleging discrimination or harassment, and the disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred. |
| **Progress Report Due Date(s):** 09/14/2015 |