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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: Sunderland

CPR Onsite Year: 2014-2015

Program Area: Special Education

All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report dated 03/19/2015.

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

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | 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 24 | Curriculum review | Partially Implemented |

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

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| **Criterion & Topic:**  SE 8 IEP Team composition and attendance | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicated that the district does not consistently document, in writing, the parent's agreement to excuse a Team member because the member's area of the curriculum or related services is not being modified or discussed. Additionally, the district does not consistently document the parent's agreement to excuse a required Team member's participation, and ensure that the excused member provides written input into the development of the IEP to the parent and the IEP Team prior to the meeting. | | |
| **Description of Corrective Action:**  The District will review and update its procedure for documenting the parents’ agreement to excuse a team member. and a training will beheld for all special education liaisons and related service providers. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director- Karen Ferrandino  Principal- Ben Barshefsky | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Copy of updated procedure.  Agenda and sign n sheet for training. | | |
| **Description of Internal Monitoring Procedures:**  Prior to sending out IEP to parents meeting, attendance, sign in sheets, and excusable forms will be reviewed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **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):**  Provide a copy of the district's updated procedure for documenting parent agreement to excuse a Team member, and procedure for required Team members who are excused to provide written input into the development of the IEP to the parent and the IEP Team prior to the meeting. Provide evidence of training on those procedures to all relevant staff, including copies of the agenda, sign in sheets and any materials used by October 15, 2015.  Provide a detailed description of the district's monitoring and oversight system identifying the responsible personnel by role by October 15, 2015.  Conduct a review of records of IEP Team meetings held subsequent to training and implementation, to ensure written agreement to excuse Team members, and to ensure required Team members provide written input if excused. Report the number of records reviewed and the number found to be in compliance. For any noncompliance conduct a root cause analysis and describe the district's plan to remedy noncompliance by January 29, 2016.  \*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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/15/2015  01/29/2016 | | |

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

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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:**  Student record reviews and interviews revealed that the district does not consistently, within forty-five (45) school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, 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:**  Procedure for completing evaluation after receipt of the parent's written consent to an initial evaluation or a re-evaluation will be reviewed with all special education liaisons and related service providers | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director - Karen Ferrandino | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Copy of procedures  Copy of training agenda and sign in sheet | | |
| **Description of Internal Monitoring Procedures:**  Twice a year for initials and rev-evaluations records will be reviewed to ensure that within forty-five (45) school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, the TEAM determines whether the student is eligible for special education, and provides to the parent either a proposed IEP and proposed placement or a written explanation of the finding of no eligibility. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | **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):**  Provide a copy of the updated procedure ensuring that a proposed IEP or a written finding of no eligibility is provided within 45 school days of the written receipt of consent to evaluate, and evidence that relevant staff  have been trained on the new procedure, including agenda, signed attendance logs and any materials used in the training by October 15, 2015.  Provide a detailed description of the district's monitoring and oversight system identifying the responsible personnel by role, October 15, 2015.  Submit the results of a review of student records for initial or re-evaluation Team meetings after training of appropriate staff and implementation of the revised procedures were put into place, to ensure eligibility was determined within the required timeline. Report the number of records reviewed, and the number found to be in compliance. For any remaining non-compliance, report the results of a root cause analysis and describe the district's plan to remedy the non-compliance by January 29, 2016.  \*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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/15/2015  01/29/2016 | | |

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

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record reviews and interviews indicated that Nonparticipation Justification statements in the IEP are not specific to the student, and do not consistently state why removal from the general education classroom is considered critical to the student's program and the basis for its conclusion that education in the least restrictive environment with the use of supplementary aides and services could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  Procedures for completing the Nonparticipation justification of the IEP will be reviewed with all faculty members. The drop down menu in special education data base will be removed as an option to completing the nonparticipation justification. This action will require that each non participation justification will be individualized and include how the nature or severity of the student's disability limits his or her participation in the regular education setting, or how the student's disability limits his or her participation in the regular education setting, or how the student's education could not be achieved with the use of supplemental aides and services. | | |
| **Title/Role(s) of Responsible Persons:**  Karen Ferrandino- Special Education Director  Ben Barshefsky - Principal | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Copy of procedure for completing participation justification section of the IEP. Staff sign in and agenda from a training to the nonparticipation justification section of the IEP. | | |
| **Description of Internal Monitoring Procedures:**  Each IEP will be reviewed by the principal and special education office to ensure that the nonparticipation justification is specific to the student, and consistently states why removal from the general education classroom is considered critical to the student's program and the basis for its conclusion that education in the least restrictive environment with the use of supplementary aides and services could not be achieved satisfactorily. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **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):**  Provide evidence that relevant staff have been trained on the procedure for completing the Nonparticipation Justification section of the IEP, including agenda, signed attendance logs and any materials used in the training along with a detailed description of the district's monitoring and oversight system identifying the responsible personnel by role by October 15, 2015.  Submit the results of a review of student records in which IEPs were developed or reviewed after training in and implementation of the new procedure, to ensure that the Nonparticipation Justification statement is specific to the student. Report the number of records reviewed, and the number found to be in compliance. For any remaining non-compliance, report the results of a root cause analysis and describe the district's plan to remedy the noncompliance by January 29, 2016.  \*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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/15/2015  01/29/2016 | | |

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

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews indicated that Sunderland Public Schools has not established its own Parent Advisory Council (PAC), but participates as a member of the larger Frontier Regional School District Union 38 PAC. The district has not applied to the Department for a waiver to implement their PAC in this manner. | | |
| **Description of Corrective Action:**  Frontier Regional School District and Union #38 school Districts share central office administrators and staff and functions as 1 school district in many ways. Parents of the 5 schools within the District prefer to have 1 PAC. The District provides a PAC coordinator to assist parents in scheduling events, sharing concerns, and coordinating parents request for information and trainings. The District was found out of compliance because there is 1 PAC for the 5 schools/districts in the union. | | |
| **Title/Role(s) of Responsible Persons:**  Karen Ferrandino- Special Education Director | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  District will complete PQA Compliance Waiver pursuant to 603 CMR 28.05 to recognize the regional PAC. | | |
| **Description of Internal Monitoring Procedures:**  Approved waiver | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 06/03/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district must submit a copy of the letter from the Department approving a waiver for the 2015-2016 school year specific to the regulation requiring the district to establish a parent advisory council on special education by October 15, 2015.  Please see the Administrative Advisory SPED 2015-1: Special Education Parent Advisory Councils, Acceptable Alternatives and Use of Social Media: http://www.doe.mass.edu/sped/advisories/2015-1r.html | | |
| **Progress Report Due Date(s):**  10/15/2015 | | |

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

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| **Criterion & Topic:**  SE 54 Professional development | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not provide professional development to transportation providers before they begin transporting any special education student receiving special transportation, on his or her needs and appropriate methods of meeting those needs. | | |
| **Description of Corrective Action:**  Procedures will be developed for providing professional development to transportation providers before they begin transporting any special education student receiving special transportation, on his or her needs and appropriate methods of meeting those needs. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education - Karen Ferrandino  Principal- Ben Barshefsky | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Copy of procedure  Agreement from bus company that they were informed of students needs and appropriate method as of meeting the needs. | | |
| **Description of Internal Monitoring Procedures:**  Special Education director will contact bus companies 2xs a year to determine/ensure that if they have received professional development on students’ needs and appropriate methods of meeting those needs. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **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):**  Provide a description of the newly developed procedures for providing professional development to transportation providers before they begin transporting any special education student on his or her individual needs and appropriate methods of meeting those needs by October 15, 2015. | | |
| **Progress Report Due Date(s):**  10/15/2015 | | |

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

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review, interviews and student record review indicated that information provided to English language learners and their parents is not always translated when translation has been requested in the Home Language Survey. | | |
| **Description of Corrective Action:**  Procedures for translating documents for parents who have requested in the Home Language Survey that information from the school be translated into their home language. | | |
| **Title/Role(s) of Responsible Persons:**  Principal - Ben Barshefsky  Louise law - ELL Director | | **Expected Date of Completion:**  03/19/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of procedure  copy of translated materials | | |
| **Description of Internal Monitoring Procedures:**  2xs annually Principal will review Home Language Surveys to determine who requested information in home a language and will review materials that have been translated. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **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):**  Provide a copy of the district's newly developed procedures for translating documents for parents who have requested in the Home Language Survey that information from the school be translated into their home language, and evidence that appropriate staff have been trained on the procedures by October 15, 2015.  Provide a detailed description of the district's monitoring and oversight system identifying the responsible personnel by role by October 15, 2015.  Provide copies of translated documents provided to students and their parents after the implementation of the procedures, along with a list of such documents and the students to whom they were provided by January 29, 2016. | | |
| **Progress Report Due Date(s):**  10/15/2015  01/29/2016 | | |

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

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that student handbook and codes of conduct don't reference M.G.L. c. 76, s. 5 and don't contain a nondiscrimination policy consistent with M.G.L. c. 76, s. 5, 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:**  Student code of conduct will be updated to reference M.G.L. c. 76, s. 5 and contain a nondiscrimination policy consistent with M.G.L. c. 76, s. 5, 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. | | |
| **Title/Role(s) of Responsible Persons:**  Principal - Ben Barshefsky  Superintendent - Marti Barrett | | **Expected Date of Completion:**  03/19/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of student code of conduct containing reference to M.G.L., s. 5 | | |
| **Description of Internal Monitoring Procedures:**  Code of conduct will be reviewed annually prior to being sent to students and families to ensure that M.G.L., s. 5 is referenced. | | |
| 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):**  Provide a copy of the district's student code of conduct updated to reference M.G.L. c. 76, s. 5 and containing a nondiscrimination policy consistent with M.G.L. c. 76, s. 5, 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 along with a description of how the handbook was disseminated to students, parents and staff by October 15, 2015. | | |
| **Progress Report Due Date(s):**  10/15/2015 | | |

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

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews revealed that statements used to publicize the district are missing the protected category of gender identity and the district does not designate the name(s), office address(es), and phone number(s) of the person(s) responsible to coordinate compliance under Title IX and Section 504. | | |
| **Description of Corrective Action:**  Statements used t publicize the District will be updated to include the protected category of gender identity and the name(s), office address(es), and phone number(s) of the person(s) responsible to coordinate compliance under Title IX and Section 504. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent of Schools- Marti Barrett  Principal - Ben Barshefsky | | **Expected Date of Completion:**  03/19/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of statements used to publicize the District.  Copy of Districts display of name(s), office address(es), and phone number(s) of the person(s) responsible to coordinate compliance under Title IX and Section 504. | | |
| **Description of Internal Monitoring Procedures:**  Twice annually Principal will review publications to ensure the protected category of gender identity is included. Annually Principal will ensure that the name(s), office address(es), and phone number(s) of the person(s) responsible to coordinate compliance under Title IX and Section 504 are available. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **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):**  Provide copies of updated statements used to publicize the district that include the protected category gender identity and the name(s), office address(es), and phone number(s) of the person(s) responsible to coordinate compliance under Title IX and Section 504 by October 15, 2015. | | |
| **Progress Report Due Date(s):**  10/15/2015 | | |

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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:**  Document review and interviews revealed no evidence of a procedure in place to ensure counseling, testing and counseling materials are free from bias and stereotypes on the basis of race, color, sex, gender identity, religion, national origin, sexual orientation, disability, and homelessness or to ensure that all counselors communicate effectively with English language learners and provide such students with the opportunity to receive guidance and counseling in a language they understand. | | |
| **Description of Corrective Action:**  The school will develop procedures to ensure counseling, testing and counseling materials are free from bias and stereotypes on the basis of race, color, sex, gender identity, religion, national origin, sexual orientation, disability, and homelessness and to ensure that all counselors communicate effectively with English language learners and provide such students with the opportunity to receive guidance and counseling in a language they understand. | | |
| **Title/Role(s) of Responsible Persons:**  Principal - Ben Barshefsky  Psychologist and counselor - Vicki Palmer | | **Expected Date of Completion:**  03/19/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of procedures | | |
| **Description of Internal Monitoring Procedures:**  Principal will annually review procedures | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 14 Counseling and counseling materials free from bias and stereotypes | **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):**  Provide a copy of the new procedure developed to ensure counseling, testing and counseling materials are free from bias and stereotypes on the basis of race, color, sex, gender identity, religion, national origin, sexual orientation, disability, and homelessness and to ensure that all counselors communicate effectively with English language learners and provide such students with the opportunity to receive guidance and counseling in a language they understand along with a description of how this was shared with relevant staff by October 15, 2015.  Provide a detailed description of the district's monitoring and oversight system identifying the responsible personnel by role by October 15, 2015. | | |
| **Progress Report Due Date(s):**  10/15/2015 | | |

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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:**  Document review and interview indicated that the district has a policy in place for teacher groups to  review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation, but the policy has not been extended to include the requirement for review by individual teachers. | | |
| **Description of Corrective Action:**  Procedures will be established to ensure that individual teachers in the district review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin, sexual orientation, and that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such material. A training for all staff will take place to review the established procedures. | | |
| **Title/Role(s) of Responsible Persons:**  Principal - Ben Barshefsky  Curriculum Director - Louise Law | | **Expected Date of Completion:**  03/19/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of Procedures  Agenda and sign in sheet for training | | |
| **Description of Internal Monitoring Procedures:**  Annually the principal will review faculty meeting agendas to ensure that teachers are reminded of their individual responsibility to review all educational material. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **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):**  Provide a copy of the newly established procedure to ensure that individual teachers in the district review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin, sexual orientation, and that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such material, along with evidence of training for staff including agenda and sign in sheet by October 15, 2015.  Provide a detailed description of the district's monitoring and oversight system identifying the responsible personnel by role by October 15, 2015. | | |
| **Progress Report Due Date(s):**  10/15/2015 | | |

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

District: Sunderland Public Schools

Corrective Action Plan Review

Program Area: English Learner Education

Prepared by: Louise Law, Director of ELE

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

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

**Mandatory One-Year Compliance Date: November 16, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 4 Waiver Procedures | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *Student record review and document review indicated that in the initial parent notification letter, the district provides parents with information about the right to “opt out” of an ELE program, but does not provide information about the parents’ right to apply for a waiver.* | | | |
| **Narrative Description of Corrective Action:** The district director of ELE will ensure that parents of ELL students will receive appropriate information and documentation regarding their right to apply for a waiver. Documentation of that information will be stored in ELE student records. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** District Director of ELE | | **Expected Date of Completion for Each Corrective Action Activity: January, 2016** | |
| **Evidence of Completion of the Corrective Action:**  Documentation of parents’ notification of the right to apply for a waiver from the district ELL program will be maintained in student records | | | |
| **Description of Internal Monitoring Procedures:**  District Director of ELE will monitor and review ELE student records on a quarterly basis. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 4 Waiver Procedures | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  Provide a copy of the parent notification letter that includes information regarding the parents’ right to apply for a waiver along with a copy of the waiver form and copies of any completed waiver forms **by September 15, 2015.**  Please see the template for the parent notification form at [www.doe.mass.edu/ell/resources.html](http://www.doe.mass.edu/ell/resources.html) . | | | |
| **Progress Report Due Date(s): September 15, 2015** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 5 Program placement and structure | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *District documentation does not include “SEI Program Description Forms” and the ELL student roster (District Form 3) that clarify the nature of the ESL services districts provide to ELLs at different proficiency levels. Therefore, there is no indication that ESL services provided by the district reflect a sound educational approach recognized as a legitimate educational strategy to teach ELL students English language skills in the four language domains: speaking, listening, reading and writing. Please see the “Transitional Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners August 2013”document as found at* [*http://www.doe.mass.edu/ell/guidance\_laws.html*](http://www.doe.mass.edu/ell/guidance_laws.html).  *The documentation submitted by the district does not include an ESL curriculum; therefore, there is no evidence showing that the district had an ESL curriculum used for direct ESL instruction at the time of the review. See the Department’s WIDA ELD Standards update from at* [*http://www.doe.mass.edu/ell/wida.html*](http://www.doe.mass.edu/ell/wida.html) | | | |
| **Narrative Description of Corrective Action:**  The district will create program description forms for the SEI program to clarify the nature of ESL services provided to ELL’s at different proficiency levels. The program description will include an explanation of the education approach that will be used to teach ELL students English language skills in the four language domains: speaking, listening, reading, and writing.  District ESL teachers will work collaboratively during June, 2015 to create a clearly articulated curriculum map describing the district ESL curriculum based on the WIDA standards. The curriculum maps will be entered into the district online curriculum mapping system and reviewed by the district Director of ELE. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  District Director of ELE in collaboration with the district ESL teachers. | | **Expected Date of Completion for Each Corrective Action Activity:**  January, 2016 | |
| **Evidence of Completion of the Corrective Action:**  Student records will contain appropriate documentation including the program description identifying services provided to students at each English proficiency level. The ELL student roster will identify ESL services each student received during a school year.  The district ESL curriculum will be clearly identified and articulated on the district online curriculum mapping program. | | | |
| **Description of Internal Monitoring Procedures:** The district director of ELE will review student records on a semi-annual basis to ensure that appropriate documentation of parent notification of program related information for ELL students is maintained.  The district director of ELE will monitor and review the district ESL curriculum using the district online curriculum mapping program. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 5 Program placement and structure | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** *SEI Program Description Forms* help the Department understand of what the school’s and the district’s plan to provide direct ESL and sheltered content instruction to the ELL students. The document needs to be completed as a part of the Coordinated Program Review (CPR). The district does not need to work on this form to remedy the concern mentioned in the Department’s finding for ELE 5. | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**   1. Please provide a detailed plan that shows that the district is providing sufficient ESL instruction to ensure the rapid acquisition of English to all ELL students in SY 2015-16. Please see the Department's Transitional Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners found at <http://www.doe.mass.edu/ell/TransitionalGuidance.pdf> for assistance. 2. Please complete district information in the attached spreadsheet labeled ELL List by school for each ELL student in the district. 3. Submit a plan that includes information about a process for reviewing or developing ESL curriculum that integrates WIDA ELD standards. a plan for WIDA implementation including information such as WIDA training opportunities for the district staff, responsible district staff, meeting dates, minutes and signing sheets and timelines for implementation. | | | |
| **Progress Report Due Date(s): September 15, 2015** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 10 Parent notification | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *Student record review and document review indicated that although the district provides an initial and an annual parent notification letter to students who have been identified as English language learners, the letter does not contain information about the right to apply for a waiver and is not consistently translated into the language of the home when translation has been requested.* | | | |
| **Narrative Description of Corrective Action:**  The district will ensure that the district initial and annual parent notification letter to students identified as ELL’s will contain appropriate information about the right to apply for a waiver. These letters will be translated into the language of the home when translation has been requested. | | | |
| **Title/Role of Person(s) Responsible for Implementation: ELE** The district Director of ELE | | **Expected Date of Completion for Each Corrective Action Activity January, 2016** | |
| **Evidence of Completion of the Corrective Action:**  Students’ records will containrevised initial and annual parent notification letters with information about the right to apply for a waiver translated into the language of the home as requested. | | | |
| **Description of Internal Monitoring Procedures**:The district Director of ELE, in collaboration with district ESL teachers, will monitor ELL student recordsand review them semi-annually to ensure that appropriate documentation is submitted and maintained | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 10 Parent notification | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  Provide a copy of the parent notification letter containing all the required information:   1. The reasons for identification of the student as ELL; 2. The child’s level of English proficiency; 3. Program placement and/or the method of instruction used in the program; 4. How the program will meet the educational strengths and needs of the student; 5. How the program will specifically help the child learn English; 6. The specific exit requirements; 7. The parent’s right to apply for a waiver, or to decline to enroll their child in the program; and 8. If the student has additional educational needs that require special education services how the Title III program will meet the objectives of the Individualized Education Program (IEP) by **September 15, 2015.**   Please see the template for the parent notification form at [www.doe.mass.edu/ell/resources.html](http://www.doe.mass.edu/ell/resources.html) .  Submit a list of students whose parents have requested translations, along with copies of the translated parent notification letters that have been provided to parents in the 2015-2016 school year **by January 15, 2016.** | | | |
| **Progress Report Due Date(s): September 15, 2015; January 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 11 Equal access to academic programs and services | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *Document review, interviews, and student record review indicated that information provided to English language learners and their parents is not always translated when translation has been requested in the Home Language Survey.* | | | |
| **Narrative Description of Corrective Action:** The district will ensure that information provided to ELL students and their parents is translated when translation has been requested. In April 2015, district ESL teachers created a form, translated into the six most common languages spoken by ELL families, to be distributed with all parent communication from the school, both online and in paper. This form notifies families that translation or help understanding of any document going home will be provided by the school on request. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** District director of ELE in collaboration with school principals and district ESL teachers. | | **Expected Date of Completion for Each Corrective Action Activity:**  October, 2015 | |
| **Evidence of Completion of the Corrective Action**: A copy of the district form offering translation and student records will indicate translation services provided with evidence of distribution to families of ELL students. | | | |
| **Description of Internal Monitoring Procedures:**  District principals, ESL teachers, secretaries, and the district Director of ELE will monitor school communication to ensure that appropriate translation is provided to ELL students and families as requested | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 11 Equal access to academic programs and services | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Students whose parents requested translations on the Home Language Survey must be provided with translations of required documents such as report cards, progress reports and related *academic* notifications that are provided to other students because they have requested it already on the Home Language Survey. Providing these families with a form for requesting translation for these types of documents would not correct the district’s non-compliance for this criterion. | | | |
| **Department Order of Corrective Action:** The district must develop a procedure to ensure that translations of academic documents (report cards, progress reports, announcements of upcoming standardized testing, student handbook etc.) are provided in a timely manner to the parents of those students who have made the request in the Home Language Survey without requiring the parent to request translation each time. | | | |
| **Required Elements of Progress Report(s):**  Provide a copy of the newly developed procedure to ensure that parents who requested translation on the Home Language Survey receive translations of all important academic notifications consistently along with a description of how this was shared with relevant staff by **September 15, 2015.**  Provide a detailed description of the internal monitoring procedure to ensure that translated academic information is being provided, including responsible staff by name or role by **September 15, 2015.**  Submit a list of those students whose parents requested translations on the Home Language Survey along with a list of translations provided in the 2015-2016 school year to those students and their parents and sample copies of translations **by January 15, 2016.** | | | |
| **Progress Report Due Date(s): September 15, 2015; January 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 12 Equal access to nonacademic and extracurricular programs | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *Document review, interviews, and student record review indicated that information provided to English language learners and their parents is not always translated when translation has been requested in the Home Language Survey.* | | | |
| **Narrative Description of Corrective Action:** The district will ensure that information provided to ELL students and their parents is translated when translation has been requested. In April 2015,the district created a form, translated into the six most common languages spoken by ELL families, to be distributed with all parent communication from the school, both online and in paper. This form notifies families that translation or help understanding of any document going home will be provided by the school on request. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** District director of ELE in collaboration with school principals and district ESL teachers. | | **Expected Date of Completion for Each Corrective Action Activity:**  October, 2015 | |
| **Evidence of Completion of the Corrective Action:** A copy of the district form offering translation, and evidence of translated documents maintained in student records will indicate appropriate translation services provided | | | |
| **Description of Internal Monitoring Procedure:** District principals, ESL teachers, secretaries, and the district Director of ELE will monitor school communication to ensure that appropriate translation is provided to ELL students and families as requested | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 12 Equal access to nonacademic and extracurricular programs | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the new district formtranslated into the six most common languages spoken by ELL families, to be distributed to all ELL students, and with all parent communication from the school, both online and in paper notifying families that translation or help understanding any non-academic documents going home will be provided by the school on request **by September 15, 2015.**  Provide sample copies of translations provided to ELL families and students who requested translation of nonacademic documents along with a comprehensive list of such translations made so far in the 2015-2016 school year **by January 15, 2016.** | | | |
| **Progress Report Due Date(s): September 15, 2015; January 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 17 Program evaluation | | | **Rating:** Not implemented |
| **Department CPR Finding:**  *Documentation submitted by the district does not include any evidence showing that the district conducts periodic evaluations of the effectiveness of the district’s ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the educational program.* | | | |
| **Narrative Description of Corrective Action:** The district will design and document a process for conducting periodic evaluations of the effectiveness of the district’s ELE program. The district director of ELE will work with district ESL teachers and school principals to identify the data and procedures that will be used to conduct this evaluation. | | | |
| **Title/Role of Person(s) Responsible for** Implementation: District Director of ELE | | **Expected Date of Completion for Each Corrective Action Activity:**  April, 2016 | |
| **Evidence of Completion of the Corrective Action**: A written procedure for evaluation of the district ELE program and evidence of completion of an initial round of program evaluation conducted by the district during the 2015/16 school year. | | | |
| **Description of Internal Monitoring Procedures:** The district Director of ELE will monitor the evaluation process and ensure that appropriate documentation of completed evaluations are maintained | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 17 Program evaluation | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  As of SY 2015-16 districts are required to use the program evaluation form provided to the districts on the Department’s website. Please see <http://www.doe.mass.edu/ell/ProgramEvaluation.pdf> . Please complete the form to evaluate the effectiveness of the district’s ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the district’s educational program. Where the district documents that the program is not effective, it must take the steps to make appropriate program adjustments or changes that are responsive to the outcomes of the program evaluation. | | | |
| **Progress Report Due Date(s): September 15, 2015** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 18 Records of LEP students | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *Student record review, interviews and document review indicated that student files do not consistently include all the required elements.* | | | |
| **Narrative Description of Corrective Action:** The district administrative team, school secretarial staff, and ESL teachers will review the documentation required for ELE student records. Training in appropriate ESL record keeping was provided to district personnel this spring by district ESL teachers. The district ESL teachers will review student records in June 2015 and in October 2015, under the direction of the district ELE director, to ensure that all required elements, including home language surveys, parent notification letters, and student schedule documents are submitted and appropriately maintained | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Director of ELE | | **Expected Date of Completion for Each Corrective Action Activity:**  October, 2015 | |
| **Evidence of Completion of the Corrective Action:** Student records of ELL students | | | |
| **Description of Internal Monitoring Procedures:** The district Director of ELE will review student records of ELL students on a semi-annual basis to ensure appropriate documentation is maintained. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 18 Records of LEP students | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  Provide evidence (agenda, sign-in sheet, materials) that appropriate staff has been trained on record keeping requirements for ELL students by **September 15, 2015**.  Submit the results of an administrative review of ELL student records to determine if all required documentation is included :   1. Home language survey 2. Results of identification and proficiency tests and evaluations 3. ACCESS for ELLs 4. MCAs, PARCC or other tests chosen by the Board of Education and the district 5. Information about students’ previous school experiences 6. Copies of parent notification letters 7. Progress reports, in the native language, if necessary 8. Report cards, in the native language, if necessary 9. Evidence of follow-up monitoring, if applicable 10. Documentation of parent’s consent to “opt-out” of ELL education, if applicable 11. Waiver documentation, if applicable   Include the number of records reviewed, the number in compliance, the number not in compliance and the district’s plan to address the continued noncompliance, if any, by **January 15, 2016.**  **\*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, with their role(s) and signature(s).** | | | |
| **Progress Report Due Date(s): September 15, 2015; January 15, 2016** | | | |