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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: Westborough

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 08/18/2015.

**Mandatory One-Year Compliance Date:** **08/17/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 6 | Determination of transition services | Partially Implemented |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |

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

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| **Criterion & Topic:**  SE 6 Determination of transition services | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of student records indicated that students are not consistently invited to Team meetings beginning at age 14, nor encouraged to attend part or all of Team meetings at which transition services are discussed or proposed. | | |
| **Description of Corrective Action:**  A district protocol was developed in September 2015 in response to the District's Corrective Action Plan based on the findings of the 2014-2105 CPR. Specifically, the protocol and annual timeline document focuses on Criterion SE 6 & 8 and includes specific expectations and guidelines for ensuring that the student/parent is notified when the student is age 13 that she/he will be formally invited to the Annual IEP Meeting at age 14. This procedure formally places the parent and student on notice at age 13 that the district’s expectation is full participation of the student in the transition planning process at age 14. First, SPED Coordinators will be required to utilize the district's web-based IEP system (eSPED) to monitor and identify students who are age 13 on an annual basis. Second, SPED Coordinators will be required to notify the parents and students at age 13 in writing that the student will be invited to attend the IEP Meeting at age 14. Third, formal training will be provided to the respective SPED Coordinators in September on an annual basis to review the protocol and timeline documents inclusive of Criterion for SE 6 & SE 8, as provided by the Director of Student Services with a subsequent sign-off sheet for attendees. | | |
| **Title/Role(s) of Responsible Persons:**  Sherrie Stevens, Director of Student Services | | **Expected Date of Completion:**  06/15/2016 |
| **Evidence of Completion of the Corrective Action:**  The district will have evidence that this procedure has been communicated to SPED Coordinators as evidenced in their annual training with the Director of Student Services and included in the SPED Coordinators' Google Folder, inclusive of SE6 & SE 8 Criterion as set forth by the DESE. A PowerPoint has been developed for the purpose of the transition training with SPED Coordinators and a sign-off sheet that the SPED Coordinator provided as evidence for the purpose of annual record keeping on the SE 6 & 8 criterion. | | |
| **Description of Internal Monitoring Procedures:**  An internal monitoring system will be put in place during the 2015-2106 school year and beyond to cross reference IEP Meeting Notices and Attendance Sheets by the respective SPED Coordinators (3) at the Gibbons Middle, High, and Out-of-District SPED Coordinators on a quarterly basis. Additionally, the Director of Student Services will review five (5) records randomly representative of each of the schools/categories identified to verify that the student both attended and signed-in as part of the IEP TEAM Meeting process at age 14+. The Director of Student Services will provide ongoing communication and feedback to the SPED Coordinators to verify the procedure is being followed and implemented in accordance with DESE criterion as outlined in SE 6 & 8. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 6 Determination of transition services | **Corrective Action Plan Status:** Approved  **Status Date:** 09/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  See http://www.doe.mass.edu/sped/cspd/transition.pps before conducting corrective actions.  By January 19, 2016, conduct training for appropriate special education staff on the requirements of determination of Transition Services, specifically to ensure that students are consistently invited to Team meetings beginning at age 14, and encouraged to attend part or all of Team meetings at which transition services are discussed or proposed. Submit evidence of training such as: an agenda, training materials, and signed attendance sheets with name(s)/role(s) of attendees. Also submit a narrative description of planned periodic reviews with names/roles of the designated persons conducting internal oversight and tracking to ensure that students are consistently invited to Team meetings beginning at age 14, and encouraged to attend part or all of Team meetings at which transition services are discussed or proposed.  By April 24, 2016 submit the results of an administrative review of a sample of student records for students 14 years of age and older after all corrective actions have been implemented to ensure students are invited and encouraged to attend part or all of Team meetings at which transition services are discussed or proposed. 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 note that 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, grade level and age for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their role(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  01/19/2016  04/24/2016 | | |

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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:**  See SE 6. | | |
| **Description of Corrective Action:**  A district protocol was developed in September 2015 in response to the District's Corrective Action Plan based on the findings of the 2014-2105 CPR. Specifically, the protocol and annual timeline document focuses on Criterion SE 6 & 8 and includes specific expectations and guidelines for ensuring that the student/parent is notified when the student is age 13 that she/he will be formally invited to the Annual IEP Meeting at age 14. This procedure formally places the parent and student on notice at age 13 that the district’s expectation is full participation of the student in the transition planning process at age 14. First, SPED Coordinators will be required to utilize the district's web-based IEP system (eSPED) to monitor and identify students who are age 13 on an annual basis. Second, SPED Coordinators will be required to notify the parents and students at age 13 in writing that the student will be invited to attend the IEP Meeting at age 14. Third, formal training will be provided to the respective SPED Coordinators in September on an annual basis to review the protocol and timeline documents inclusive of Criterion for SE 6 & SE 8, as provided by the Director of Student Services with a subsequent sign-off sheet for attendees. | | |
| **Title/Role(s) of Responsible Persons:**  Sherrie Stevens, Dir. of Student Services | | **Expected Date of Completion:**  06/15/2016 |
| **Evidence of Completion of the Corrective Action:**  The district will have evidence that this procedure has been communicated to SPED Coordinators as evidenced in their annual training with the Director of Student Services and included in the SPED Coordinators' Google Folder, inclusive of SE6 & SE 8 Criterion as set forth by the DESE. A PowerPoint has been developed for the purpose of the transition training with SPED Coordinators and a sign-off sheet that the SPED Coordinator provided as evidence for the purpose of annual record keeping on the SE 6 & 8 criterion. | | |
| **Description of Internal Monitoring Procedures:**    An internal monitoring system will be put in place during the 2015-2106 school year and beyond to cross reference IEP Meeting Notices and Attendance Sheets by the respective SPED Coordinators (3) at the Gibbons Middle, High, and Out-of-District SPED Coordinators. Additionally, the Director of Student Services will review five (5) records at random for each of the schools/categories identified to verify that the student both attended and signed-in as part of the IEP TEAM Meeting process at age 14+. The Director of Student Services will provide ongoing communication and feedback to the SPED Coordinators to verify the procedure is being followed and implemented in accordance with DESE criterion as outlined in SE 6 & 8. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Approved  **Status Date:** 09/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  See SE 6. | | |
| **Progress Report Due Date(s):**  01/19/2016  04/24/2016 | | |

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

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that the district does not consistently provide the parent with two (2) copies of the proposed IEP and proposed placement along with the required Notice of Proposed School District Action (N1) form. | | |
| **Description of Corrective Action:**  The Westborough Public Schools, Director of Student Services, along with the building-based Special Education Coordinators have identified consistent language that is articulated in the N1 cover letter to ensure that the parent receives 2 copies of the proposed IEP and district proposed placement, along with the Notice of Procedural Safeguard. | | |
| **Title/Role(s) of Responsible Persons:**  Sherrie Stevens, Director of Student Services | | **Expected Date of Completion:**  06/15/2016 |
| **Evidence of Completion of the Corrective Action:**  A uniform statement was constructed in the N1 by SPED Coordinators, effective with the start of the 2015-2016 school year to inform parents that they are being provided with 2 copies of their child's IEP. Additionally, the Notice of Procedural Safeguards is checked off under "Other" on the N1 and contained in the paperwork packet that is sent to the parent. | | |
| **Description of Internal Monitoring Procedures:**  Ongoing monitoring at the building level by the SPED Coordinators and Secretaries, along with a quarterly review of student records at the Central Office level to ensure that N1 letters consistently contain the same language and emphasize that 2 copies of the IEP are being provided and intended for the parent to keep in concert with the provision of the Notice of Procedural Safeguards. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date:** 09/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 19, 2016, submit a narrative description of the revised procedures related to providing parents with two (2) copies of the proposed IEP and proposed placement along with the required notice (N1). Also submit a description of the internal oversight and tracking system and identify the person(s) responsible for the oversight, including the date of the system's implementation.  By April 24, 2016, submit the results of an internal review of a sample of student records across all buildings/ levels subsequent to the implementation of all corrective actions to ensure consistent provision to the parent of two (2) copies of the proposed IEP and proposed placement along with the required Notice of Proposed School District Action (N1) form. Include the number of records reviewed, the number of records in compliance, and for any records not in compliance, determine the root cause of the non-compliance and the district's plan to remedy the non-compliance.  \*Please note that when monitoring the district must maintain the following documentation and make it available upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and signature(s). | | |
| **Progress Report Due Date(s):**  01/19/2016  04/24/2016 | | |

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

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Onsite observations and staff interviews revealed that at Hastings Elementary School, speech and language services are provided in an office located within the library. At Westborough High School, the STRIDE program is also located in an office within the library. These rooms both have large glass walls so that when students receive instructional services, they are observed while other general education students are using the library, thus creating visual distraction and stigmatization. | | | |
| **Description of Corrective Action:**  The Westborough Public Schools, Director of Student Services, has reviewed DESE's findings with regard to the Hastings Elementary School space and provision of speech language services, in a modular classroom attached to the building as well as the classroom located off of the library at Westborough High School that supports the Life Skills program. | | | |
| **Title/Role(s) of Responsible Persons:**  Sherrie Stevens, Director of Student Services | | **Expected Date of Completion:**  06/16/2016 | |
| **Evidence of Completion of the Corrective Action:**  The Westborough School District is working with an architectural firm and in the final stages of conducting a demographic study to both inform and recommend potential solutions to the town and the school community about future building renovation or building plans based on the district's increasing demographics. At the Hastings Elementary School, Specialists are re-assessing the need to pull students out of the classroom for SLP services, with consideration for a more integrated "in-classroom" approach to treatment. Adopting an integrated service modality will allow students to remain in the classroom, staff to receive specialized training by specialists, and create greater opportunities for student to generalize skills. At WHS a thorough observation and analysis of the positioning of the Life Skills classroom ensued. Communication with the WHS administration revealed that general education students receive small group instruction and tutorials in the library space and adjacent rooms and computer labs that mirror the space of the Life Skills Classroom. The students in the Life Skills classroom are fully embraced by the WHS community and are fully included in classrooms during both special and elective classes. Therefore, the flow of students through the WHS library is dynamic and continuous and comprised of general and special education students who receive and experience instruction in a consistent manner and without visual distraction. | | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Services in conjunction with the Superintendent and Assistant Superintendent, along with both the Hastings Elementary School and Westborough High School administration will continue to monitor how students receive instructional services with a lens toward full integration through quarterly building walk-through, classroom observations, and conversations with staff. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 09/24/2015  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The districts proposed corrective actions at the Hastings Elementary School do not articulate how visual distractions and stigmatization will be eliminated for those students who require pullout services for speech and language. At the high school, the district has articulated how the STRIDE program is placed in a central location to facilitate inclusion. Additionally, student schedules are designed to reduce stigmatization by maximizing student inclusion in general education during both special and elective classes. The district's proposed corrective actions at the high school do not articulate how visual distractions in the STRIDE program's instructional spaces will be eliminated. | | | |
| **Department Order of Corrective Action:**  The district must provide evidence that both speech and language instructional spaces outside the general education setting at the Hastings Elementary School and instructional spaces used by the STRIDE program at the high school are free of visual distractions and stigmatization. Evidence may include: floor plans, student schedules, and photos of instructional spaces. ESE will verify corrective actions with an onsite visit to these schools. | | | |
| **Required Elements of Progress Report(s):**  By January 19, 2016, submit a floor plan for Hastings Elementary School indicating where speech and language services are held and student schedules, with locations of service, for each student receiving speech and language service outside the general education setting, ensuring that these instructional spaces are free of visual distractions and stigmatization. Additionally, submit plans for remedies of instructional spaces used by the STRIDE program at the high school to ensure that they are free of visual distractions and stigmatization.  By April 24, 2016 a representative of the Department will visit the district to review cited facilities and verify completion of corrective actions. | | | |
| **Progress Report Due Date(s):**  01/19/2016  04/24/2016 | | | |

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Staff interviews and document review indicated that online report cards at the middle school and high school levels are not translated into the major languages of parents with limited English skills, as indicated on the Home Language Survey. | | |
| **Description of Corrective Action:**  Report cards will be translated by November 2016. | | |
| **Title/Role(s) of Responsible Persons:**  Daniel Mayer, Assistant Superintendent | | **Expected Date of Completion:**  11/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Translated report cards. | | |
| **Description of Internal Monitoring Procedures:**  Translated report cards. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 09/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district did not provide a description of procedures to ensure that online report cards at the middle school and high school are translated into the major languages of parents with limited English skills, as indicated on the Home Language Survey and a system of oral interpretation to assist parents with limited English skills. The district did not describe an internal monitoring process to ensure implementation of translations, as indicated. | | |
| **Department Order of Corrective Action:**  Develop procedures to ensure that online report cards at the middle school and high school levels are translated into the major languages of parents with limited English skills, as indicated on the Home Language Survey. Submit evidence of dissemination of these procedures to the middle school and high school principals. Also submit a narrative description of the district's oversight and tracking system to document translations of online report cards at the middle and high schools. | | |
| **Required Elements of Progress Report(s):**    By January 19, 2016, please submit evidence of newly developed procedures to ensure that online report cards at the middle school and high school levels are translated into the major languages of parents with limited English skills, and a system of oral interpretation to assist parents with limited English skills, as indicated on the Home Language Survey. Submit evidence of dissemination of these procedures to middle and high school principals and their designated staff. Also submit a narrative description of the district's oversight and tracking system with name(s)/role(s) of staff designated to document translations of report cards at the middle and high school.  By April 24, 2016, submit samples of translated report cards and tracking log(s) for translations | | |
| **Progress Report Due Date(s):**  01/19/2016  04/24/2016 | | |

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

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| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Staff interviews indicated that the district does not always conduct training on the use of physical restraint consistent with regulatory requirements for employees hired after the school year begins, within a month of their employment. | | |
| **Description of Corrective Action:**  The Westborough Public Schools reviewed its current practice on training staff on an ongoing basis on the use of physical restraint. | | |
| **Title/Role(s) of Responsible Persons:**  Sherrie Stevens, Director of Student Services | | **Expected Date of Completion:**  06/15/2016 |
| **Evidence of Completion of the Corrective Action:**  In accordance with the new regulatory requirements on physical restraint, the Westborough Public Schools has revised its mandatory training PowerPoint and staff sign-off to ensure that all staff receive training consistent with the start of the school year. Additionally, WPS has implemented a new procedure that all new staff hired throughout the school year must review and complete the mandated training requirement, including the use of physical restraint within the first 30 days of their employment. | | |
| **Description of Internal Monitoring Procedures:**  Principals in conjunction with Central Office Human Resource staff will be required to provide new staff with access to the mandated training PowerPoint, complete the required sign off, and submit the evidence to the Human Resource Office. Principals will be responsible for keeping an ongoing spreadsheet to track the 30 day timeline and provide evidence that the procedure is being implemented. A quarterly review of the document will be conducted by the Director of Student Services to ensure that the regulation is in compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved  **Status Date:** 09/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Please refer to following Technical Assistance Advisories before development of corrective actions:  QUESTION AND ANSWER GUIDE RELATED TO IMPLEMENTATION OF 603 CMR 46.00 http://www.doe.mass.edu/sped/advisories/QuestionAnswerGuide-603CMR.pdf  Technical Assistance Advisory SPED 2016-1:  Time-out and Seclusion  http://www.doe.mass.edu/sped/advisories/2016-1ta.html  By January 19, submit a description of procedures, inclusive of an internal monitoring and tracking system, to ensure that the district always conducts training on the use of physical restraint consistent with regulatory requirements for employees hired after the school year begins, within a month of their employment. Additionally, provide evidence of dissemination of these procedures to appropriate staff responsible for ensuring that these trainings occur and name(s)/role(s) pf person(s) responsible for tracking of new hires.  By April 24, 2016 submit the results of the quarterly administrative document review as described in the internal monitoring system for employees hired after the school year begins, within a month of their employment. | | |
| **Progress Report Due Date(s):**  01/19/2016  04/24/2016 | | |

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

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| **Criterion & Topic:**  CR 23 Comparability of facilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  See SE 55. | | |
| **Description of Corrective Action:**  See response to SE 55 | | |
| **Title/Role(s) of Responsible Persons:**  See response to SE 55 | | **Expected Date of Completion:**  06/16/2016 |
| **Evidence of Completion of the Corrective Action:**  See response to SE 55 | | |
| **Description of Internal Monitoring Procedures:**  See response to SE 55 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 23 Comparability of facilities | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 09/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  See SE 55. | | |
| **Department Order of Corrective Action:**  See SE 55. | | |
| **Required Elements of Progress Report(s):**  See SE 55. | | |
| **Progress Report Due Date(s):**  04/24/2016  06/06/2016 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that there is no formal process for the district to evaluate all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. | | |
| **Description of Corrective Action:**  Formalize the communication and documentation of the work of the district Curriculum Coordinators to inform all staff of the review process. Formalize the communication and the documentation of the review process completed by the coordinators ensuring equal access for all. | | |
| **Title/Role(s) of Responsible Persons:**  Daniel Mayer, Assistant Superintendent | | **Expected Date of Completion:**  06/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence of the documentation of the protocols and processes used by the district that ensures equal access for all students. | | |
| **Description of Internal Monitoring Procedures:**  By 1/30/16 we will submit a copy of our newly developed evaluation procedures for ensuring that all students have equal access to all programs, including documentation of all results and recommendations for improvement based upon evaluation results. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 09/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 19, 2016, please submit a copy of the district's newly developed evaluation procedures for ensuring that all students have equal access to all programs.  By April 24, 2016, submit a completed self-evaluation. Submit results of the evaluation inclusive of recommendations, if any, for improvement based upon evaluation results. | | |
| **Progress Report Due Date(s):**  01/19/2016  04/24/2016 | | |

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

District: Westborough Public Schools

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Maeve Hitzenbuhler, ELE Coordinator, Westborough Public Schools

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: October 22, 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:** *A review of student records and staff interviews revealed that the district Parent Notification letter does not include information of their right to apply for a waiver in a language they can understand.* | | | |
| **Narrative Description of Corrective Action:** During our first ELL full staff meeting, k-12, August 27, 2015, all teaching faculty were given the Parent Notification letter off of the DESE web site that clearly delineates the right of parents to apply for a waiver. This form is now used for all parent notifications and has been translated into all of the first languages of our parent communities. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Maeve Hitzenbuhler | | **Expected Date of Completion for Each Corrective Action Activity:** August 27, 2015 | |
| **Evidence of Completion of the Corrective Action:** The corrective letters have been posted to our ELL Google drive so that all ELL teachers, grades k-12 may access that letter in the parent first language. | | | |
| **Description of Internal Monitoring Procedures:** English Language Education Coordinator worked in all six of the district buildings for oversight of the use of the correct Parent Notification letter prior to mailing said letters home. | | | |
| 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):**  By **December 18, 2015,** please provide samples of the letter(s), including district first language translated letters, used by the district to ensure that the Parent Notification letter includes information of the right to apply for a waiver in a language they can understand.  Submit the results of an administrative record review, subsequent to all corrective actions, of a sample of ELL student records across all building levels to ensure that student files contain evidence that parents are informed of waiver procedures in the Parent Notification letter in the language indicated on their Home Language Survey. Include the **school**/grade level/ ELL level of the student and the number of records reviewed; the number of records in compliance; for any records not in compliance, determine the root cause(s) of the noncompliance and the district’s plan to remedy the identified non-compliance. Please provide the results of the student record review to ESE by  **March 18, 2016.**  **\*Please note that 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 level for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s).** | | | |
| **Progress Report Due Date(s): December 18, 2015 March 18, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 5** **Program Placement and Structure** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:** *A review of the documentation submitted by the district indicated that there are inconsistencies in the level of ESL instruction provided to ELLs regardless of the students’ proficiency levels. For instance, some of the students at proficiency levels 1 and 2 receive as few as 40 minutes of ESL instruction three times a week while some other Level 1 and Level 2 students receive 180 minutes of ESL instruction and some Level 4 students are provided 110 minutes of ESL instruction per day and additional 40 minutes three times a week. Moreover, some of the ELLs who are also eligible for Special Education services are not provided ESL services, but only consultation. Therefore, the ESL instruction and language support that ELLs receive are not always consistent with their needs and the district* *does not provide all ELLs at the same proficiency levels with equal access to ESL services and the same learning opportunities.* | | | |
| **Narrative Description of Corrective Action:** English Language Education Coordinator met with the following groups to review the August 2015 DESE guidance regarding the number of minutes of direct ESL instruction for our ELL populations: principals, k-12, general education teachers at faculty meetings, k-12 and during our August 27, 2015 first ESL department meeting k-12. The ELE coordinator has reviewed each of our district’s student schedules to ensure that we are meeting the new mandate of minutes for levels 1-5. As new students enter the district, this same oversight is in place. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Maeve Hitzenbuhler | | **Expected Date of Completion for Each Corrective Action Activity:** August 27, 2015 and ongoing throughout the school year. | |
| **Evidence of Completion of the Corrective Action:** Student Schedules | | | |
| **Description of Internal Monitoring Procedures:** Meetings with each lead ESL teacher for each of the districts six buildings, to review student schools based on initial MODEL/WAPT levels and spring 2015 ACCESS scores. | | | |
| 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:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  Please complete district information in the attached spreadsheet labeled ELL List by school for each ELL student in the district. | | | |
| **Progress Report Due Date(s): March 18, 2016** | | | |

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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:**  *See ELE 18.* | | | |
| **Narrative Description of Corrective Action:** The district is using the sample Parent Notification letter on the DESE website translated into each of the first languages of our parent communities. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Maeve Hitzenbuhler | | **Expected Date of Completion for Each Corrective Action Activity:** Ongoing for each child who enters our school district. | |
| **Evidence of Completion of the Corrective Action:** Parent Notification letter and translations are on our google docs for easy accessibility. | | | |
| **Description of Internal Monitoring Procedures:** Review of Parent Notification completion prior to letter being sent home, six buildings in the district. | | | |
| 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:** *See ELE 18.* | | | |
| **Required Elements of Progress Report(s):** *See ELE 18.* | | | |
| **Progress Report Due Date(s): December 18, 2015 March 18, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 14** **Licensure Requirements** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:** *District documentation and a review of ELAR indicated that not all district ESL teachers that provide students with ESL instruction hold an ESL license or a current waiver issued by the Massachusetts Department of Elementary and Secondary Education.* | | | |
| **Narrative Description of Corrective Action:** Each of the district’s ten ELL teachers holds an ESL license. Of the district’s eight tutors, the majority of who are fully licensed or are working toward licensure. Our ELL teachers are responsible for planning and delivery of instruction for our ELL student population. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Assistant Superintendent | | **Expected Date of Completion for Each Corrective Action Activity:** Ongoing | |
| **Evidence of Completion of the Corrective Action:** Tutors taking licensure testing and course work | | | |
| **Description of Internal Monitoring Procedures:** We monitor licensure every six months. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 14**  **Licensure Requirements** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:**  The district should develop a detailed plan to ensure every teacher or other educational staff member who teaches ELL students holds an appropriate license for the subject matter they teach or a current waiver issued by the Massachusetts Department of Elementary and Secondary Education. The action described in the district’s proposal does not provide sufficient information regarding the plan the district will follow should the educators who are working licensure do not earn their ESL license. | | | |
| **Department Order of Corrective Action:** Develop and implement a detailed monitoring plan for ensuring ESL staff licensure. | | | |
| **Required Elements of Progress Report(s):**   * Please provide evidence of the licensure of the current ELL teachers/tutors providing ESL instruction to ELLs by the progress report due date. * Provide a copy of the 2015-16 ESL teacher schedule(s) for all grade levels district wide.All schedules should include the following for each block of time: a. Names of the ELL students; b. Grade level for each student; c. English proficiency level for each student. * Provide a report of the program director’s monitoring of the teachers’ progress toward certification throughout the 2015-2016 school year until licensure is secured, a copy of any job posting and application information that may remain on file in the event the currently uncertified teacher(s) fails to acquire proper certification by Summer 2016. | | | |
| **Progress Report Due Date(s): March 18, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 18** **Records of ELL Students** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:** *A review of student records revealed that ELL records do not consistently include results of identification and proficiency tests and evaluations; copies of parent notification letters; progress reports, in the native language, if necessary; report cards, in the native language, if necessary; and a log of access to protect confidentiality.* | | | |
| **Narrative Description of Corrective Action:** During our first meeting ESL staff meeting of the year and during our November meeting, all ESL teachers and tutors were asked to review DESE’s “ELE Program Folder Checklist” form. We discussed each component of the file and our teachers understand that it is their responsibility to make sure the student folders are corrected. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Maeve Hitzenbuhler | | **Expected Date of Completion for Each Corrective Action Activity:** Immediately, August, 2015 and throughout the school year. | |
| **Evidence of Completion of the Corrective Action:** Periodic and frequent folder review. | | | |
| Description of Internal Monitoring Procedures: Periodic review of folders in each of the district’s six buildings. Procedure for creating new students entering our district with the “ELE Program Folder Checklist” stapled to the front of the cum file. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 18** **Records of ELL Students** | **Status of Corrective Action:**  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):**  By **December 18, 2015,** please provide a sample of the “ELE Program Folder Checklist” used by the district to ensure that ELL records include results of identification and proficiency tests and evaluations; copies of parent notification letters; progress reports, in the native language, if necessary; report cards, in the native language, if necessary; and a copy of the individual student log of access to protect confidentiality**.**  By **March 18, 2016** subsequent to all corrective actions, submit the results of an administrative review of a sample of student records from all levels/schools for evidence that ELL records include results of identification and proficiency tests and evaluations; copies of parent notification letters; progress reports, in the native language, if necessary; report cards, in the native language, if necessary; and a log of access to protect confidentiality.  **\*Please note that 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 level for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s).** | | | |
| **Progress Report Due Date(s): December 18, 2015 March 18, 2016** | | | |