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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: Worcester

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 11/02/2015.

**Mandatory One-Year Compliance Date:** **11/02/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 2 | Required and optional assessments | Partially Implemented |
| SE 3A | Special requirements for students on the autism spectrum | Partially Implemented |
| SE 4 | Reports of assessment results | Partially Implemented |
| 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 12 | Frequency of re-evaluation | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 26 | Parent participation in meetings | Partially Implemented |
| SE 29 | Communications are in English and primary language of home | Partially Implemented |
| SE 34 | Continuum of alternative services and placements | Partially Implemented |
| SE 40 | Instructional grouping requirements for students aged five and older | Partially Implemented |
| SE 41 | Age span requirements | Partially Implemented |
| SE 45 | Procedures for suspension up to 10 days and after 10 days: General requirements | Partially Implemented |
| SE 54 | Professional development | 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 7C | Early release of high school seniors | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 14 | Counseling and counseling materials free from bias and stereotypes | Partially Implemented |
| CR 15 | Non-discriminatory administration of scholarships, prizes and awards | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 18 | Responsibilities of the school principal | Partially Implemented |
| CR 20 | Staff training on confidentiality of student records | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | 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 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records demonstrated that the district does not consistently conduct all assessments consented to by the parent, specifically achievement, home, and psychological assessments. Record review also indicated that the district does not always provide all required assessments, including a history of the student's educational progress in the general curriculum and observations of the student in his/her classroom environment. | | |
| **Description of Corrective Action:**  -Memorandum to be sent to all District personnel reminding them of the necessity of including Educational Assessment Part A - Educational History.  -Update electronic "Student Snapshot" to reflect all of the questions from the recommended Educational Assessment Part A.  -Training to be developed and delivered for all District staff responsible for Evaluations (ETCs, Special Education Teachers, and Child Study staff) regarding evaluations. | | |
| **Title/Role(s) of Responsible Persons:**  Mary Montaque, Quadrant Manager  Kay Seale, Manager of Special Education | | **Expected Date of Completion:**  02/28/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of memorandum sent  Sample updated "Student Snapshot"  Sign in sheets, agendas, materials for trainings with all evaluators | | |
| **Description of Internal Monitoring Procedures:**  Quarterly Folder review of 20 student folders to check for compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Although the district has proposed corrective actions for completion of a history of the student's educational progress in the general curriculum, the district has not addressed ensuring the completion of all consented-to assessments and required observations of students in their classroom environments for a determination of SLD. | | |
| **Department Order of Corrective Action:**  Submit evidence of training to relevant special education staff on the requirement to complete all consented-to assessments and required assessments, including observations for SLD students. | | |
| **Required Elements of Progress Report(s):**  Submit the district's memorandum to all district personnel and the updated electronic Student Snapshot to ensure that all required information from the recommended Educational Assessment Part A is included on or before March 14, 2016.  Submit evidence of training on the requirement to complete all consented-to assessments, required observations for SLD students, and required history of student's educational progress in the general curriculum to evaluators, ETCs, Special Education Teachers, and Child Study staff.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records with initial evaluations and re-evaluations conducted subsequent to the implementation of all corrective actions for evidence that all consented-to and required evaluations, including the student history and observations for SLD students, are completed. The sample must represent a cross-section of the district's schools, grade levels, placements, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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

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| **Criterion & Topic:**  SE 3A Special requirements for students on the autism spectrum | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that for students on the autism spectrum, IEP Teams do not consistently consider and specifically address the verbal and nonverbal communication needs of the student; the need to develop social interaction skills and proficiencies; the needs resulting from the student's unusual responses to sensory experiences; the needs resulting from resistance to environmental change or change in daily routines; the needs resulting from engagement in repetitive activities and stereotyped movements; the need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from autism spectrum disorder; and other needs resulting from the student's disability that impact progress in the general curriculum, including social and emotional development. | | |
| **Description of Corrective Action:**  -Development and delivery of review materials for ETCs responsible for overseeing the Team process  -Development and Delivery of Professional Development module for all special education teachers and related service providers responsible for writing IEPs | | |
| **Title/Role(s) of Responsible Persons:**  Kathleen Desmarais, Assistant Director  Tanya O'Connell, Department Head for ETCs | | **Expected Date of Completion:**  01/31/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in sheets, -  -Agendas, and training materials for Professional Development for all ETCs, special education teachers, and related service providers  -Checklist required for all team meetings | | |
| **Description of Internal Monitoring Procedures:**  Quarterly review of 20 folders to verify that Teams are addressing these seven questions specific to students on the Autism spectrum on each student's IEP. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3A Special requirements for students on the autism spectrum | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Prior to developing the district's corrective actions, review the Department's guidance on IEP development for students on the autism spectrum (ASD) at http://www.doe.mass.edu/sped/advisories/07\_1ta.html.  For students Marcell Amill, Griffin Bagley, and David Panarelli identified by the Department, ensure that the Team is reconvened to address all 7 areas of IEP development required for students with ASD. For each student, submit N3, N3A, Team summary, N1, along with all revised pages from IEP demonstrating autism considerations.  Submit evidence of training on the 7 areas of IEP development for students with ASD to ETCs responsible for overseeing the Team process. Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  If there is a PowerPoint or training materials for the Professional Development module for other special education staff, submit copies/examples of the materials.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of records for 15-20 ASD students with IEPs developed subsequent to the implementation of all corrective actions for evidence that all 7 areas of need are documented in IEPs. The sample must represent a cross-section of the district's schools, grade levels, and placements.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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

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| **Criterion & Topic:**  SE 4 Reports of assessment results | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records demonstrated that assessment summaries do not always include the procedures employed, the evaluator's diagnostic impressions of the student, a description of the student's needs in educationally relevant and common terms, or explicit means of meeting these needs. In addition, a review of student records indicated that the summaries of assessments are not consistently available to the parent two days in advance of the Team discussion. | | |
| **Description of Corrective Action:**  -Development and delivery of Professional Development for all evaluators (teachers, related service providers, school adjustment counselors, school psychologists) regarding the specific content of assessments, including the evaluator's diagnostic impression, description of students' needs in educationally relevant and common terms, and explicit means of meeting those needs.  -Development and distribution of a manual pertaining to assessments, including the necessary procedures to be employed.  -Summaries of assessments will consistently be made available to the parent two days in advance of the Team discussion.  -Development of a rubric for use during periodic monitoring for compliance | | |
| **Title/Role(s) of Responsible Persons:**  Bertha-Elena Rojas, Manager of ELL and SSS  Susan Farrell, Assistant Director for Special Projects | | **Expected Date of Completion:**  04/30/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in sheets, agendas, and training materials from professional development for all district evaluators  - Copy of procedural manual | | |
| **Description of Internal Monitoring Procedures:**  -Quarterly review of 20 folders using rubric to verify compliance with content of assessment summaries and provision of reports two days in advance of the Team meeting. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 4 Reports of assessment results | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training on the requirement to ensure that assessment summaries consistently include the procedures employed, the evaluator's diagnostic impressions of the student, a description of the student's needs in educationally relevant and common terms, or explicit means of meeting these needs to all evaluators (teachers, related service providers, school adjustment counselors, school psychologists).  Additionally, submit a description of how the district will ensure that assessment summaries are consistently available for parents two days in advance of the Team meeting.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records with initial evaluations and re-evaluations conducted subsequent to the implementation of all corrective actions for evidence that all assessment summaries contain required information and are available two days for the parent two days prior to the IEP Team meeting. The sample must represent a cross-section of the district's schools, grade levels, placements, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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| **Criterion & Topic:**  SE 8 IEP Team composition and attendance | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that although the district obtains a parent's written permission to excuse a required Team member's participation, the excused Team member does not consistently provide written input in advance of the meeting to the parent and IEP Team for development of the IEP. | | |
| **Description of Corrective Action:**  -Develop and deliver professional development for Principals regarding the requirement for prior written input from a Team member in order to be excused from participation  -Provide suggested format for input at the elementary, middle, and high school level  -Review this requirement with Evaluation Team Chairs | | |
| **Title/Role(s) of Responsible Persons:**  Kay Seale, Manager of Special Education Services  Mary Meade-Montaque, Quadrant Manager | | **Expected Date of Completion:**  02/28/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in and agenda from training with Principals  -Suggested formats for prior written input  -Sign in and agenda from review with ETCs | | |
| **Description of Internal Monitoring Procedures:**  Quarterly review of 20 folders | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training to principals and ETCs to ensure that required Team members who are excused provide written input in advance of the meeting to the parent and IEP Team for development of the IEP.  Submit the proposed format for providing written information from excused Team members.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records with annual reviews conducted subsequent to the implementation of all corrective actions for evidence that excused required Team members consistently provide written input in advance of the meeting to the parent and IEP Team for development of the IEP. The sample must represent a cross-section of the district's schools, grade levels, placements, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
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| **Criterion & Topic:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that within 45 school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, IEP Teams do not consistently convene to determine whether the student is eligible for special education and provide to the parent either a proposed IEP and proposed placement or a written explanation of the finding of no eligibility. | | |
| **Description of Corrective Action:**  -Conduct review of timelines with Evaluation Team Chairpersons (by January 31, 2016)  -Development of procedural manual to include evaluation timelines (by May 31, 2016) | | |
| **Title/Role(s) of Responsible Persons:**  Kathleen Desmarais, Assistant Director  Tanya O'Connell, Dept Head for ETCs | | **Expected Date of Completion:**  05/31/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in sheet, meeting agenda, and materials for Evaluation Team Chair training  -Procedural manual | | |
| **Description of Internal Monitoring Procedures:**  Monthly data review for compliance time lines | | |
| 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:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training to ETCs on the requirement that Teams must convene within 45 school working days of receipt of parent written consent. Include in the district's training how staff will document re-scheduling of Team meetings at parent request.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records with initial and re-evaluations conducted subsequent to the implementation of all corrective actions for evidence that IEP Team meetings are convened within 45 school working days after receipt of the parent's written consent. The sample must represent a cross-section of the district's schools, grade levels, placements, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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| **Criterion & Topic:**  SE 12 Frequency of re-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the district does not consistently conduct re-evaluations every three years. | | |
| **Description of Corrective Action:**  -Conduct review of required time lines with Evaluation Team Chairs  -Development of procedural manual to include the regulatory time lines  -Conduct review of current IEP system for consideration of building internal safe guards for compliance | | |
| **Title/Role(s) of Responsible Persons:**  Kathleen Desmarais, Assistant Director  Tanya O'Connell, Dept Head for ETCs | | **Expected Date of Completion:**  01/31/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in sheet, agenda, and materials for training with Evaluation Team Chairs  -Procedural manual  -Recommendations from review of current IEP system | | |
| **Description of Internal Monitoring Procedures:**  Monthly data reports for compliance | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 12 Frequency of re-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training to ETCs on the requirement that a full re-evaluation is conducted every three years unless the parent and district agree that it is unnecessary.  Include district's consideration of developing internal safeguards for compliance with re-evaluations.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records with re-evaluations conducted subsequent to the implementation of all corrective actions for evidence that the re-evaluation was conducted within the 3-year window or the record contained evidence of the district/parent agreement to forego the re-evaluation. The sample must represent a cross-section of the district's schools, grade levels, placements, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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| **Criterion & Topic:**  SE 13 Progress Reports and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that not all progress reports include written information on the student's progress toward the annual goals in the IEP. | | |
| **Description of Corrective Action:**  - Development and delivery of professional development for all special education teachers and related service providers regarding required content for progress reports  - Training for Principals regarding required content for progress reports | | |
| **Title/Role(s) of Responsible Persons:**  Kay Seale, Manager of SPED  Mary Meade-Montaque, Quad Manager  Al Ganem, Manager of PD | | **Expected Date of Completion:**  06/09/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in sheets, agendas, and training materials for trainings for all special education teachers and related service providers  -Sign in sheets, agendas, and training materials for principals | | |
| **Description of Internal Monitoring Procedures:**  Quarterly review of 20 folders | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 13 Progress Reports and content | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training on the requirement to include written information on the student's progress toward the annual goals in the IEP in student progress reports to all special education teachers, related service providers, and principals.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records with progress reporting issued subsequent to the implementation of all corrective actions for evidence that progress reports include written information on the student's progress toward the annual goals in the IEP. The sample must represent a cross-section of the district's schools, grade levels, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
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| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that IEP Teams do not consistently or accurately address all elements of the IEP; this includes blank Present Level of Educational Performance B (PLEP B) for students with communication and behavior needs and inconsistencies between goals and service delivery grids. Student records, documents, and staff interviews also demonstrated that when students are identified with a disability on the autism spectrum or have a disability that affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing, IEP Teams do not always specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing in the IEP. | | |
| **Description of Corrective Action:**  -Develop and deliver professional development to all special education teachers and related service providers regarding the content of IEPs to ensure all elements of the IEP are addressed  -Revise the Worcester Public Schools IEP writing guide to enable special education staff to address the specific content of IEPs | | |
| **Title/Role(s) of Responsible Persons:**  Kathleen Desmarais, Assistant Director  Tanya O'Connell, Dept Head for ETCs | | **Expected Date of Completion:**  06/20/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in sheets, agendas, and training materials for professional development for all special education staff  -Revised IEP writing guide | | |
| **Description of Internal Monitoring Procedures:**  Quarterly review of 20 folders to verify that all elements of an IEP are addressed | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Prior to developing the district's staff training on IEP development of anti-bullying considerations, review the Department's guidance at http://www.doe.mass.edu/bullying/considerations-bully.html.  For students Armaldo Marte Mendez, Neisha Arevalo, Marcell Amill, Griffin Bagley, and David Panarelli identified by the Department, ensure that the Team is reconvened to identify skills and proficiencies needed to address bullying, harassment and teasing (BHT) in the IEP. Submit N3, N3A, Team summary, N1, and revised pages from IEP demonstrating BHT considerations.  Submit evidence of training to all special education teachers and related service providers to ensure all elements of the IEP are addressed, along with signed attendance sheets, agendas, and examples of training materials.  Additionally, submit evidence of training to Team Evaluation Coordinators and other relevant special education staff on the requirement to address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing in student IEPs for applicable populations and students with ASD, along with signed attendance sheets, agendas, and examples of training materials.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of records for 15 ASD students with IEPs developed subsequent to the implementation of all corrective actions for evidence that 1) all elements of the IEP are completed; and 2) skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing are addressed. The sample must represent a cross-section of the district's schools, grade levels, and placements.  Conduct a second internal review of records for 15 students whose disabilities impact social skills and/or whose disability makes him/her vulnerable to bullying with IEPs developed subsequent to the implementation of all corrective actions for evidence that 1) all elements of the IEP are completed; and 2) skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing are addressed. The sample must represent a cross-section of the district's schools, grade levels, placements, and student disabilities.  Submit a detailed analysis of each review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the IEP Teams do not consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  -Conduct root cause analysis to gain a better understanding of the patterns behind removal of students from the general education classroom  -Utilize findings from root cause analysis to develop and deliver appropriate professional development to school based teams  -District development of a Multi-Tiered System of Support (MTSS) will include the development of a comprehensive DCAP to further assist school | | |
| **Title/Role(s) of Responsible Persons:**  Kay Seale, Manager of Special Education Services  Mary Montaque, Quadrant Manager | | **Expected Date of Completion:**  10/31/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in from working group conducting root cause analysis  -Summary report of the findings from work group  -Sign in sheets from MTSS meetings  -Draft of DCAP document  -Sign in sheets, agendas, training materials from professional development provided to school based teams | | |
| **Description of Internal Monitoring Procedures:**  -Quarterly sampling of IEPs to analyze justification statements  -Monitoring of data to ensure placement of students in Least Restrictive Settings | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training to ETCs and other relevant special education staff on the requirement that Teams consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily.  Submit district's root cause analysis to provide the district with a better understanding of the patterns behind removal of students from the general education classroom.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records with IEP development conducted subsequent to the implementation of all corrective actions for evidence that IEP Team consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. The sample must represent a cross-section of the district's schools, placements, grade levels, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the Notices of Proposed School District Action (N1) do not consistently provide a description of each evaluation procedure, test, record, or report the district used as a basis for the proposed or refused action, or a description of any factors relevant to the district's proposal or refusal. | | |
| **Description of Corrective Action:**  -Development and delivery of training module for ETCs regarding content of N1s (cover letters)  -Ongoing opportunities for ETCs to participate in professional development through the Accept Collaborative Evaluation Team Chair trainings, including training regarding content of N1s (cover letters) | | |
| **Title/Role(s) of Responsible Persons:**  Kathleen Desmarais, Assistant Director  Tanya O'Connell, Dept Head for ETCs | | **Expected Date of Completion:**  06/09/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in sheets, agendas, and training materials for trainings for ETCs  -Agenda and training materials from ACCEPT training module and list of participating WPS ETCs | | |
| **Description of Internal Monitoring Procedures:**  Quarterly review of 20 folders | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training to ETCs on the requirement that written notices contain all required information, including a description of each evaluation procedure, test, record, or report the district used as a basis for the proposed or refused action, or a description of any factors relevant to the district's proposal or refusal.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records with initial evaluations and re-evaluations conducted subsequent to the implementation of all corrective actions for evidence that written notices include a description of each evaluation procedure, test, record, or report the district used as a basis for the proposed or refused action, or a description of any factors relevant to the district's proposal or refusal. The sample must represent a cross-section of the district's schools, grade levels, placements, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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

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| **Criterion & Topic:**  SE 26 Parent participation in meetings | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the district does not document multiple attempts to obtain parents' participation in IEP Team meetings. | | |
| **Description of Corrective Action:**  -Develop and deliver training for all special education secretaries, ETCs, and teacher liaisons regarding documentation of parent communication regarding IEP team meetings  -Evaluate currently available tools, if any, for maintaining communication logs within the IEP system | | |
| **Title/Role(s) of Responsible Persons:**  Kathleen Desmarais, Assistant Director of Special Education | | **Expected Date of Completion:**  03/31/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in sheets, agendas, and training materials for special education staff  -Results/ recommendations from review of currently available systems for documentation of communication with parents | | |
| **Description of Internal Monitoring Procedures:**  Quarterly review o 20 records | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 26 Parent participation in meetings | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training for all special education secretaries, ETCs, and teacher liaisons on documenting parent communication regarding scheduling and attendance at IEP team meetings. Include a description and examples (if applicable) of how the district will document communication with parents.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of records for 25 students with IEPs developed subsequent to the implementation of all corrective actions for evidence that the district's efforts to obtain parent participation are documented in the record. The sample must represent a cross-section of the district's schools, grade levels, and placements.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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

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| **Criterion & Topic:**  SE 29 Communications are in English and primary language of home | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that the district does not consistently translate documents for parents who speak low incidence languages. Interviews also indicated that interpretation at IEP Team meetings is not consistently provided by individuals familiar with special education procedures, programs and services; according to staff members, families and friends are sometimes relied on to act as interpreters. | | |
| **Description of Corrective Action:**  -Identify resources to assist the District to meet the standard  -Develop and deliver professional development to all staff (translators/ interpreters) regarding procedures for provision of interpreting and translation service.  - In making every effort to comply with the mandates of the Department of Justice, all WPS documents are translated into the 7 major languages.  In school year 2013-2014, 2534 translations were conducted in 23 different languages.  In school year 2014-2015, 3026 translations were conducted in 25 different languages.  This year to date, 1705 translations have been conducted in 19 different languages.  -Translation support in low incidence languages may be requested by accessing the Team On Line portal of the Worcester Public Schools. | | |
| **Title/Role(s) of Responsible Persons:**  Mary Montaque, Quadrant Manager  Kay Seale, Manager, Special Education | | **Expected Date of Completion:**  10/31/2016 |
| **Evidence of Completion of the Corrective Action:**  -Report of resources available  -Sign in sheets, agendas, and training materials for professional development | | |
| **Description of Internal Monitoring Procedures:**  Periodic review of folders for students with low incidence languages | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 29 Communications are in English and primary language of home | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a list of resources the district has identified to ensure that low incidence language families receive translated documents and interpreters as indicated by the family.  Provide a link or description of the Team Online portal of the Worcester Public Schools where translations are accessible.  Submit evidence of training to special education staff and translators/interpreters on the requirement to provide translations and interpreters to low incidence language families. The training materials must include a clear description of procedures and resources to ensure that translations/interpretation consistently occur. Please emphasize that family members and friends cannot provide interpretation services in lieu of trained professional interpreters.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation, frequency of the internal reviews, and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records of students whose families speak low incidence languages with IEP development conducted subsequent to the implementation of all corrective actions for evidence that translations and interpreters were provided as needed. The sample must represent a cross-section of the district's schools, grade levels, placements, languages, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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

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| **Criterion & Topic:**  SE 34 Continuum of alternative services and placements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records, documents, and staff interviews indicated that at all grade levels, only students placed in the Structured Therapeutic Education Program (STEP) receive school adjustment counseling. According to interviews with Team chairpersons and other special education staff members, IEP Teams may not develop IEPs with counseling as a direct service for students with social/emotional and behavioral needs who are not in the STEP program. | | |
| **Description of Corrective Action:**  -Special education and child study staff will collaborate to develop guidelines for provision of counseling as a direct service for students with social, emotional, and behavioral needs.  -Training will be provided to all Child Study staff, Evaluation Team Chairs, and school based IEP Team members regarding the continuum of counseling services  -Analysis of our service delivery for students requiring counseling following provision of training | | |
| **Title/Role(s) of Responsible Persons:**  Manager of Special Education  Manager of ELL and SSS | | **Expected Date of Completion:**  10/31/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign sheets from meetings from collaborative work group  -Guidelines produced from collaborative work group  -Sign in sheets, agendas, and materials from trainings for Child Study staff, ETCs, and school based IEP Teams  -Data and summary report from analysis of service delivery for counseling | | |
| **Description of Internal Monitoring Procedures:**  -Quarterly review of 20 IEPs  -Review of this criterion during monthly meetings with ETCs and Child Study staff. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 34 Continuum of alternative services and placements | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit district's developed guidelines on provision of counseling as a direct service for students with social, emotional, and behavioral needs.  Submit district's root cause analysis on service delivery for students requiring counseling.  Submit evidence of training to child study staff, Evaluation Team Chairs, and school-based IEP Team members regarding the continuum of counseling services for students with social, emotional, and behavioral needs who are not placed in the district's STEP program.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Conduct an internal review of approximately 25 records of students with behavioral needs (not in STEP) with IEPs developed subsequent to the implementation of all corrective actions for evidence that IEP Teams identify counseling services as a related service where it is deemed necessary by the Team. The sample must represent a cross-section of the district's schools, placements, grade levels, and student disabilities.  Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  The record review is due June 17, 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, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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

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| **Criterion & Topic:**  SE 40 Instructional grouping requirements for students aged five and older | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that two sections of Study Skills at Burncoat High School exceed the maximum number of students to special education staff. Document review and interviews demonstrated that the district has not provided written notification to the Department or the parents of all group members of the decision to increase the instructional group size and the reasons for such decision. | | |
| **Description of Corrective Action:**  -Development and delivery of review training for Secondary Special Education Department Heads, Principals, and Guidance Counselors regarding instructional grouping requirements, to include training on procedures for requests for waivers when warranted  -Analysis of availability of data to support maintenance of compliant instructional group sizes as well as staff to student ratios in special education instructional groups | | |
| **Title/Role(s) of Responsible Persons:**  Kay Seale, Special Education Manager  Mary Montaque, Quadrant Manager | | **Expected Date of Completion:**  02/28/2016 |
| **Evidence of Completion of the Corrective Action:**  -Sign in sheets, agendas, and training materials from trainings with Secondary Department Heads, Principals, and Guidance Counselors  -Summary of analysis of available systems to provide data to support schools in maintaining compliant group sizes | | |
| **Description of Internal Monitoring Procedures:**  -Quarterly review of compliance across all schools  -Monthly meetings with Secondary Special Education Department Heads to include review of this criterion | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 40 Instructional grouping requirements for students aged five and older | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  On or before March 14, 2016, submit the following:  Current instructional grouping data for the two sections of Study Skills at Burncoat High School;  The date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight;  Evidence of training to relevant special education staff on age span requirements for special education instructional groupings, including the process of submitting a written request for approval of a wider age range to the Department.  Evidence will include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

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| **Criterion & Topic:**  SE 41 Age span requirements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents demonstrated that the ages of the youngest and oldest students in the following special education instructional groups differ by more than 48 months:  School Course Burncoat High School Life Skills Burncoat High School Study Skills North High School Algebra I North High School Health North High School Study Skills South High School Human Anatomy South High School Six periods of Study Skills South High School Career Ed Plan South High School English IV Technical High School Two periods of Life Skills Claremont Academy High School World History II  Document review and interviews verified that the district has not submitted a written request for approval of a wider age range to the Department in cases where the district believes a request is justified. | | |
| **Description of Corrective Action:**  -Targeted Professional Development regarding the Age Span regulation for all District personnel involved in scheduling students - Principals, Guidance Counselors, Secondary Special Education Department Heads  -Analysis of availability of data to support maintenance of compliant instructional age groupings | | |
| **Title/Role(s) of Responsible Persons:**  Mary Montaque, Quadrant Manager  Kay Seale, Manager of Special Education and Intervention Services | | **Expected Date of Completion:**  02/28/2016 |
| **Evidence of Completion of the Corrective Action:**  - Sign in sheets, agendas, and training materials for Professional Development  -Summary of analysis of available systems to provide data to support schools in maintaining compliant age groupings | | |
| **Description of Internal Monitoring Procedures:**  -Quarterly compliance review for all special education instructional groupings  -Review of this criterion at monthly Secondary Special Education Department Head Meetings | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 41 Age span requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  On or before March 14, 2016, submit current age span data for the following courses: 1) Burncoat High School Life Skills; 2) Burncoat High School Study Skills; 3) North High School Algebra I; 4) North High School Health; 5) North High School Study Skills; 6) South High School Human Anatomy; 7) South High School Six periods of Study Skills; 8) South High School Career Ed Plan; 9) South High School English IV; 10) Technical High School two periods of Life Skills; and 11) Claremont Academy High School World History II.  Submit the date of the internal tracking system's implementation and the name/role of the designated staff responsible for internal review oversight on or before March 14, 2016.  Submit evidence of training to relevant special education staff on age span requirements for special education instructional groupings, including the process of submitting a written request for approval of a wider age range to the Department.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

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| **Criterion & Topic:**  SE 45 Procedures for suspension up to 10 days and after 10 days: General requirements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that the written notice of procedural safeguards is not consistently provided to parents of high school students who are suspended 10 or more days. | | |
| **Description of Corrective Action:**  Training was provided by Special Education Administration to all of the Evaluation Team Chair Persons regarding the need to provide an additional copy of the PNPS to parents when a student is suspended 10 or more cumulative days in a school year. | | |
| **Title/Role(s) of Responsible Persons:**  Kathleen Desmarais, Assistant Director, Special Education  Tanya O'Connell, Dept Head for ETCs | | **Expected Date of Completion:**  08/26/2015 |
| **Evidence of Completion of the Corrective Action:**  Sign in sheet and agenda from ETC meeting August 26, 2015. | | |
| **Description of Internal Monitoring Procedures:**  Review of folders for evidence in N1s that the PNPS was provided to the parent at the Manifestation Determination Meeting or mailed with the findings from the Manifestation Determination meeting. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 45 Procedures for suspension up to 10 days and after 10 days: General requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training to Evaluation Team Chairs, along with signed attendance sheets and August 26, 2015 agenda on the requirement to provide and document the provision of written notice of procedural safeguards to parents at manifestation determination meetings. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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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:**  A review of documents and staff interviews indicated that general education and special education teachers do not receive training annually on the following: (1) state and federal special education regulations and related special education procedures, (2) analyzing and accommodating diverse learning styles of all students in order to achieve an objective of inclusion in the general education classroom, and (3) methods of collaboration among teachers, paraprofessionals and instructional assistants to accommodate diverse learning styles of all students in the general education curriculum. | | |
| **Description of Corrective Action:**  -Development of multiple modules of professional development for teachers regarding 1. state and federal special education regulations and related special education procedures; 2. analyzing and accommodating diverse learning styles of all students in order to achieve the objective of inclusion; and 3. methods of collaboration among teachers, paraprofessionals, and instructional assistants to accommodate diverse learning styles in the general education curriculum  -Schedule multiple sessions for the above training modules to accommodate teachers' schedules  -Development of online resource for teachers, to include "Frequently Asked Questions" regarding special education | | |
| **Title/Role(s) of Responsible Persons:**  Kay Seale, Special Education  Albert Ganem, Professional Learning  Mark Brophy, Human Resources | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  -Description of training modules  -Schedule of training modules provided  -List of participants and sign in sheets  -Online resources provided | | |
| **Description of Internal Monitoring Procedures:**  All District training is logged through the Office of Professional Development. Human Resources, Special Education, and Professional Development will use this database to ensure that all staff have the opportunity to participate in a training module at least once per year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  On or before March 14, 2016:  Submit evidence of training for general education and special education teachers of state/federal special education regulations and procedures, analyzing and accommodation diverse learning styles, and methods of collaboration. Include description or examples from the training modules, link or examples from online resource "Frequently Asked Questions," and schedules of trainings.  Submit data from HR office demonstrating that general and special education teachers have participated in the training. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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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:**  Observations indicated the following issues with special education facilities: 1) At the Chandler Magnet School, special education classes are clustered in the school's C wing (rooms 120, 119, 118, 121A, 121B, 122A and 122B), which does not maximize the inclusion of these students into the life of the school; 2) at Doherty High School, special education students and English language learners receive instruction simultaneously in room 209, creating auditory distractions and confidentiality concerns; 3) also at Doherty High School, students must access their special education classroom (room 324) through the suspension room, which creates a confidentiality issue; and 4) occupational therapy and speech therapy services at Doherty High School are delivered in a room where computers are fixed (room 203), which poses a safety hazard for the students. | | |
| **Description of Corrective Action:**  - The ACT Program located at Chandler Magnet School functions similarly to a Public Day School. The students require this program as part of the continuum of services so the District will apply for approval as a Public Day School.  - Identification of alternative spaces for the classrooms | | |
| **Title/Role(s) of Responsible Persons:**  -Kathleen Desmarais, Assistant Director  -Sally Maloney, Principal, Doherty H.S. | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  - Application to DESE for approval for the 2016-2017 school year to designate ACT as a Public Day School  - Room numbers and description of alternative spaces for the classrooms identified | | |
| **Description of Internal Monitoring Procedures:**  -Ongoing process towards completion of Public Day School Application  - Walk through of new space identified for classrooms designated as out of compliance | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  On or before March 14, 2016:  Complete and mail an Intent to Apply for Initial or Reconstructed Program Approval to the Director of Program Quality Assurance; this form is available at http://www.doe.mass.edu/pqa/sa\_nr/.  Submit a copy of the district's approval to operate a day school program on or before March 14, 2016. Please note this is simply a copy of the district's initial application to seek approval to operate a day program - no other documentation is required.  Provide floor plans for Doherty High School that indicate 1) relocation and schedules of students with disabilities and ELLs from Room 209; 2) relocation of students with disabilities from Room 324; and 3) relocation of occupational therapy and speech therapy services from Room 203 on or before March 14, 2016.  The Department will conduct onsite observations at Doherty High School Elementary School to review the relocation/re-scheduling of students in May or June 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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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:**  A review of student records and staff interviews indicated that although the district has a report card template translated into the seven major languages identified by the district, teacher comments on the report cards are not translated. Interviews also indicated that the system of oral interpretation for low incidence languages is not implemented consistently across all school levels. | | |
| **Description of Corrective Action:**  1.The District will explore a standard menu of teacher comments to be translated into seven languages.  2. Professional development will be provided to teachers regarding the implementation of translated report card comments.  3.In making every effort to comply with the mandates of the Department of Justice, all WPS documents are translated into the 7 major languages.  In school year 2013-2014, 2534 translations were conducted in 23 different languages.  In school year 2014-2015, 3026 translations were conducted in 25 different languages.  This year to date, 1705 translations have been conducted in 19 different languages.  Translation support for low incidence languages may be requested by accessing the Team On Line portal of the Worcester Public Schools. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Marco Rodrigues, Interim Superintendent  Mary Montaque, Quadrant Manager | | **Expected Date of Completion:**  08/01/2016 |
| **Evidence of Completion of the Corrective Action:**  1. Copy of menu of translated teacher comments.  2. Documented requests for translation services. | | |
| **Description of Internal Monitoring Procedures:**  1, Quadrant Manager will monitor implementation of translated teacher comments.  2. Sign-in sheets from teacher professional development regarding report card comments.  3. Random review of files of students speaking low incidence languages. | | |
| 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:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district did not include teacher training on translating report card comments or staff training on the system of oral interpretation for low incidence languages. | | |
| **Department Order of Corrective Action:**  Provide training to teachers on the district's method to ensure report card comments are translated and training to staff on the system of oral interpretation for low incidence languages. | | |
| **Required Elements of Progress Report(s):**  Submit a description/documentation of the district method for translating teacher comments on report cards into the seven major languages identified by the district on or before March 14, 2016.  Submit evidence of teacher training on translation of teacher comments on report cards and use of the translation support for low incidence languages accessing the Team online portal for relevant staff on or before March 14, 2016.  Include signed attendance sheets with name/role of staff, dated agendas, and examples of training materials on or before March 14, 2016.  Submit the date of the internal tracking system's implementation and frequency of internal oversight on or before March 14, 2016.  Submit a sample of student report cards for evidence that teacher comments on report cards are translated into the major languages spoken by parents or guardians with limited English skills on or before June 17, 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016  06/17/2016 | | |

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

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| **Criterion & Topic:**  CR 7C Early release of high school seniors | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the last day of senior attendance for Burncoat High School, Doherty High School, North High School, the Alternative School at St. Casimir's, University Park Campus, and Worcester Technical High School is more than 12 school days before the regular scheduled closing date of each school. | | |
| **Description of Corrective Action:**  The school calendar has been amended to ensure that the last day of school for all WPS seniors will not occur more than 12 days before the regular scheduled closing date of each school. School calendars for years 2015-2016; 2016-2017; and 2017-2018 reflecting this change have been approved by the School Committee. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Marco Rodrigues, Interim Superintendent  Dr. Mary Montaque, Quadrant Manager | | **Expected Date of Completion:**  08/12/2015 |
| **Evidence of Completion of the Corrective Action:**  School calendars for 2015-2016; 2016-2017; and 2017-2018. | | |
| **Description of Internal Monitoring Procedures:**  Creation of future calendars will be submitted to the Quadrant Office for approval in order to ensure appropriate closing dates for seniors. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7C Early release of high school seniors | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  On or before March 14, 2016, submit school calendars for 2015-2016; 2016-2017; and 2017-2018 demonstrating that the last day of senior attendance is not more than 12 school days before the regular scheduled school closing date. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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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:**  A review of documents indicated that the code of conduct does not include a nondiscrimination policy consistent with M.G.L. c. 76, s. 5, affirming every student's right to attend the public schools of the town where he or she actually resides, regardless of race, color, sex, gender identity, religion, national origin or sexual orientation. | | |
| **Description of Corrective Action:**  The student handbooks and codes of conduct have been amended to include a nondiscrimination policy consistent with M.G.L. c.76, s. 5, affirming every student's right to attend the public schools of the town where he or she actually resides, regardless of race, color, sex, gender identity, religion, national origin, or sexual orientation. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Bertha Elena Rojas, Manager of Supplemental Services  Dr. Mary Montaque, Quadrant Manager | | **Expected Date of Completion:**  08/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The revised handbooks and codes of conduct are posted on the Worcester Public Schools Website and may be viewed there. | | |
| **Description of Internal Monitoring Procedures:**  The Student Handbooks and Codes of Conduct will be reviewed annually prior to their distribution at the beginning of each school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit the link to the district's updated code of conduct nondiscrimination policy which affirms every student's right to attend the public schools of the town where he or she actually resides, regardless of race, color, sex, gender identity, religion, national origin or sexual orientation on or before March 14, 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

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| **Criterion & Topic:**  CR 14 Counseling and counseling materials free from bias and stereotypes | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that although the district has procedures to ensure counseling and counseling materials are free from bias and stereotyping on the basis of race, color, sex, religion, national origin, sexual orientation, disability and homelessness, these procedures do not address the protected category of gender identity. | | |
| **Description of Corrective Action:**  All counseling and counseling documents have been amended to include the protected category of gender identity. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Bertha Elena Rojas, Manager of Supplemental Services  Michelle Cadavid, Supplemental Services | | **Expected Date of Completion:**  08/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Revised copies of counseling and counseling documents. | | |
| **Description of Internal Monitoring Procedures:**  The Supplemental Service Department will continue to review counseling documents to ensure the inclusion of gender identity as a protected category. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 14 Counseling and counseling materials free from bias and stereotypes | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy or a link to the updated counseling materials for Department review.  Submit evidence of dissemination and training for staff on the updated counseling materials with the added category of gender identity, along with a training agenda, signed attendance sheets and copies of the materials presented on or before March 14, 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

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| **Criterion & Topic:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district's process for administering scholarships, prizes and awards does not address the protected category of gender identity. | | |
| **Description of Corrective Action:**  The District's process for administering scholarships, prizes, and awards has been amended to include the protected category of gender identity. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Montaque, Quadrant Manager  Albert Mercado, Guidance Liaison | | **Expected Date of Completion:**  08/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Copies of documents reflect the inclusion of gender identity as a protected category. | | |
| **Description of Internal Monitoring Procedures:**  The Guidance Liaison will review the criteria for administering scholarships, prizes, and awards prior to their issuance in order to ensure the inclusion of gender identity as a protected category. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy or a link to the updated process for administering scholarships, prizes and awards for Department review.  Submit evidence of dissemination and training for staff on the updated process with the added category of gender identity, including a training agenda, signed attendance sheets and copies of the materials presented on or before March 14, 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents demonstrated that the district's written notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion contains conflicting information regarding when the student and the parent or guardian may meet with a representative of the district to discuss the reasons that the student is leaving school. In addition, document review demonstrated that the district's annual outreach notice to former students who have not yet earned their competency determination and who have not transferred to another school includes a required meeting with district personnel within 10 days of receipt of the letter; while the district may encourage former students to meet with high school staff, there is no requirement for this activity or the timeline. | | |
| **Description of Corrective Action:**  -The exit protocol and timelines outlined below have been developed and are currently in place.  -School-based clerical staff will send out an initial letter in the student's native language to those students 16 or older who have 15 consecutive absences.  -Guidance counselors receive a weekly list of students who have received letters in order to contact students and families to schedule a meeting to discuss options, which include returning to the home school or pursuing alternative pathways to graduation within the Worcester Public Schools.  -If the family does not want to pursue options, an exit protocol form is completed.  -If there is no response from the letter and/or phone calls by the guidance counselor, a School Adjustment Counselor attempts a home visit in order to share the available options.  -An annual letter in the student's primary language will be mailed the last week of August to all students age 16 and over who have been identified as school leavers in the previous year. These letters will offer the same invitation concerning options for return to the Worcester Public Schools.  -Next steps include the electronic management of the protocol by enabling the SAGE on-line grading system to flag these school leavers.  -Guidance counselors, principals, and school adjustment counselors will be provided training in use of electronic tracking system. | | |
| **Title/Role(s) of Responsible Persons:**  Albert Mercado, Guidance Liaison  Mohammed Siddiqui, Senior Software Developer | | **Expected Date of Completion:**  08/01/2016 |
| **Evidence of Completion of the Corrective Action:**  - Quarterly random sampling of 10 student records  - Print-outs from the SAGE system  - Agendas from training sessions | | |
| **Description of Internal Monitoring Procedures:**  The Guidance liaison will meet with counselors in order to ensure compliance to this protocol. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Please see regulatory changes to procedures to provide written notice to students aged 16 and older who have 10 consecutive unexcused absences and their parents at http://www.doe.mass.edu/dropout/. | | |
| **Department Order of Corrective Action:**  Revise district notices to student and parent/guardian to include new regulatory requirement of sending notice within five (5) days of the 10th consecutive absence and offering two dates and times for family to meet with the Superintendent or his/her designee.  Develop the district's protocol for the exit interview to discuss the reasons for the student permanently leaving school and to consider alternative education programs and services available to the student, as well as the benefits of earning a high school diploma and a list of the alternative education programs and services available.  Revise the written notice to former students who have not yet earned competency and have not transferred to another school so that it no longer includes a required meeting with district personnel within 10 days of receipt of the letter.  Provide training to relevant staff, including high school principals, guidance counselors and clerical staff, on the district's revised written notices and procedures to ensure that students who are 16 and older do not leave high school without a diploma. | | |
| **Required Elements of Progress Report(s):**  Submit the revised notice to students and parents/guardian within five days of the tenth consecutive absence that offers at least two dates and times for an exit interview between the superintendent (or designee), relevant school staff and the student and parent/guardian to occur prior to the student permanently leaving school on or before March 14, 2016.  Submit the protocol for the exit interview on or before March 14, 2016.  Submit the written notice to former students who have not yet earned competency and have not transferred to another school, as well as the list of students for 2015-2016 who did not earn competency or transfer to another school on or before March 14, 2016.  Submit evidence of staff training on the revised notices and protocols, along with signed attendance sheets, agendas, and a sample of training materials on or before March 14, 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

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| **Criterion & Topic:**  CR 18 Responsibilities of the school principal | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the district has not developed a Curriculum Accommodation Plan to ensure that all efforts have been made to meet the needs of diverse learners in the general education program, such as provision of services to address the needs of children whose behavior may interfere with learning and instructional support in mathematics. | | |
| **Description of Corrective Action:**  The District is currently engaged in devising a Multi-tiered System of Support. The development of a new Curriculum Accommodation Plan is the charge of one of the MTSS sub-committees. In order to ensure the effective development of the plan, three representatives of DESE are included as members on this sub-committee. | | |
| **Title/Role(s) of Responsible Persons:**  Mary Montaque, Quadrant Manager  Albert Ganem, Director of Professional Learning | | **Expected Date of Completion:**  06/30/2015 |
| **Evidence of Completion of the Corrective Action:**  Copy of the new Curriculum Accommodation Plan that meets the needs of diverse learners in the general education program.  Agendas and sign-in sheets from MTSS meetings  Agendas and sign-in sheets from DCAP meetings | | |
| **Description of Internal Monitoring Procedures:**  Principals and managers will review lesson plans and conduct classroom observations to ensure that the DCAP ins being effectively implemented.  Model units will be provided to demonstrate how to meet the needs of diverse learners in the general education population. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The following are due on or before March 14, 2016:  Submit the district's Curriculum Accommodation Plan to ensure that all efforts have been made to meet the needs of diverse learners in the general education program, such as provision of services to address the needs of children whose behavior may interfere with learning and instructional support in mathematics.  Submit evidence of dissemination and training of relevant staff on the Curriculum Accommodation Plan, including a training agenda, signed attendance sheets and copies of the materials presented. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

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| **Criterion & Topic:**  CR 20 Staff training on confidentiality of student records | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that provisions of the Family Educational Rights and Privacy Act (FERPA) are not included in the annual training on confidentiality of student records for all school personnel. | | |
| **Description of Corrective Action:**  The provisions of FERPA and the mandated confidentiality of student records are reviewed with staff by principals at the opening of school. The District is in the process of developing a Superintendent's Bulletin regarding FERPA regulations to be presented at the Opening Annual Staff Meeting. | | |
| **Title/Role(s) of Responsible Persons:**  Mary Montaque, Quadrant Manager  Worcester Public Schools Principals | | **Expected Date of Completion:**  08/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Agendas from opening staff meetings.  Review of Superintendent's Bulletins, which are available on the WPS website.  Copy of Superintendent's Bulletins. | | |
| **Description of Internal Monitoring Procedures:**  Principals will review and discuss FERPA and confidentiality during Opening Professional Development each year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 20 Staff training on confidentiality of student records | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy or link to the Superintendent's Bulletin regarding FERPA regulations for Department review.  Submit evidence of dissemination and training for all school personnel on the provisions of the Family Educational Rights and Privacy Act (FERPA) as it relates to the confidentiality of student records, along with a training agenda, signed attendance sheets and copies of the materials presented on or before March 14, 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

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| **Criterion & Topic:**  CR 21 Staff training regarding civil rights responsibilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the district's training for all school personnel on their civil rights responsibilities in order to prevent discrimination and harassment does not address gender identity as a protected category. | | |
| **Description of Corrective Action:**  Documents informing school personnel of their civil rights responsibilities have been amended to include gender identity. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Montaque, Quadrant Manager  Mark Brophy, Interim Human Resources Manager | | **Expected Date of Completion:**  08/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Copies of documents provided to staff by Human Resources Department. | | |
| **Description of Internal Monitoring Procedures:**  Documents will be reviewed for compliance by Human Resources Manager. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy or a link to the updated training materials for Department review. Provide evidence of dissemination and training for staff on the updated civil rights responsibilities documentation with the added category of gender identity, along with a training agenda, signed attendance sheets and copies of the materials presented on or before March 14, 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

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| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that although individual teachers in the district review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, religion, national origin, and sexual orientation, this process does not address gender identity as a protected category. | | |
| **Description of Corrective Action:**  Gender identity has been added as a protected category in educational materials. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Montaque, Quadrant Manager  Worcester Public Schools Principals | | **Expected Date of Completion:**  08/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Copies of amended educational documents. | | |
| **Description of Internal Monitoring Procedures:**  Principals will routinely review educational materials to ensure that gender identity is listed as a protected category. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 01/13/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the revised curriculum review protocol for Department review, along with evidence of dissemination and training for staff on the updated curriculum review criteria with the protected class of gender identity included, along with a training agenda, signed attendance sheets and copies of the materials presented on or before March 14, 2016. | | |
| **Progress Report Due Date(s):**  03/14/2016 | | |

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

District: Worcester Public Schools

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Dr. Bertha Elena Rojas

Manager of ELL Support Programs and Supplemental Services

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 5 Program Placement and Structure | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews and a review of the documentation submitted by the district indicated that the district discontinues providing ESL instruction when ELLs reach higher levels of English proficiency, but have not yet met exit criteria. Furthermore,* *there are inconsistencies in the amount 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 no ESL instruction while some other Level 1 and Level 2 students receive 2.5 hours of ESL instruction per day.*  *Therefore, the Department concludes that the district* *does not provide all ELLs at the same proficiency levels with equal access to the same learning opportunities and fails to take appropriate action to promote and support the rapid acquisition of English language by all ELLs in the district as is required in G.L. c. 71A and meet the*  *legal obligations under the Equal Educational Opportunities Act of 1974,20 U.S.C. § 1701 et seq.(EEOA).* | | | |
| **Narrative Description of Corrective Action:**   1. The district revised its Guidance for Scheduling ELL students twice within the last year to address this issue, including issuance of a new Guidance for Scheduling ELLs congruent with DESE’s *Guidance on identification, Assessment, Placement, and Reclassification of English Language Learners (August 2015, referred to as DESE’s ELL Guidance in the rest of this document).* With the issuance of the new guidance, the Manager of ELL and WPS Leadership team, including interim superintendent Dr. Marco Rodrigues, the district is promoting clear and explicit expectations in regards to the prioritization of the education and ESL instruction of ELLs, the fact that WPS is a full service district of ELLs from grades K through 12 and of all ELL students with EPL levels 1 through 5. WPS’ Guidance for ELL scheduling documents explicitly describe expectations for scheduling ELLs for all EPL levels, details recommendations for groupings of students, and expectations of scheduling ELLs with SEI endorsed teachers for content classes. It also includes an explicit course description of all secondary level ESL courses, and the most updated definition of ESL Instruction, to ensure that ESL periods are focused on English Language Development (ELD). 2. Training to District-Wide personnel on state requirements based upon the DESE’s ELL Guidance document, including WPS District Leadership Team, ESL Faculty, Parent Information Center (PIC), Enrollment personnel at school buildings, all principals, and Special Education staff has already taken place as well by December 11th, 2015). Training with Guidance Department staff remains to be determined. 3. The Manager of ELL and the ELL Department’s team have developed a portfolio of documents to explicitly describe standard operating procedures to district-wide personnel, such as the already referenced WPS ELL Scheduling Guidance documents, and other procedures such as FLEP and Op-Out Monitoring procedures. The ELL team will continue to add to this portfolio so that a practical manual of ELL standard operating procedures is available to all principals and relevant district-wide staff. 4. In collaboration with the Information Technology office (IT), the Manager of ELL and the ELL Department team have worked together to obtain district-wide ELL data in the form of structured and informative reports to better ascertain district-wide needs and school-based needs. For example, reports are prepared to highlight school specific data, including concentration of EPL students in grades K-2 and K-3 by EPL level, so as to better inform staffing and instructional needs in elementary. These reports became available as of January 2015 and have become the primary source to classify elementary schools based upon their ELL incidence and prevalence in 4 categories relevant to our district being urban and high incidence for ELLs. The school categories include high incidence, moderate-high incidence, moderate-low incidence and low incidence schools. Such classification has improved communication with multiple stakeholders’ district-wide and in the community about ELL needs in specific buildings, including decisions for ESL staff allocation and ELL Scheduling practices. 5. The ELL department developed a process to obtain detailed information about ELL scheduling in the academic year 2014-15 supported by the IT department. Forms include student specific school lists and service delivery summary reports per school, which will be used as of this year to provide detailed feedback to principals to address scheduling concerns, and to inform the budget process. These forms and procedures provide the infrastructure for ongoing monitoring of scheduling of ELL students. 6. The district is in the process of forming School-Based ELL Teams to support review processes and decision making for ELLs, including ELL scheduling requirements, reclassification, and student progress reviews. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  Bertha-Elena Rojas, Manager of ELL, ELL Department’s staff, Marco Rodrigues, Interim Superintendent, All Principals, Guidance Counselors, ELL School-Based Teams (once designated), and Kristen Leo (IT Department). | | **Expected Date of Completion for Each Corrective Action Activity:**   1. Initial phase of training already implemented as of October 27, 2015. Information to be supported ongoing through staff meetings and district level meetings, and formally to be reviewed yearly in the Spring and Summer months prior to incoming academic years. 2. Initial phase of training already implemented through December 11, 2015. Yearly trainings to be provided at the end or at the beginning of each academic year. Training of Guidance department to be provided by March 2016. 3. Started in 2013-14 and remains ongoing. First portfolio of standard operating procedures to be released to principals at the beginning of FY16-17. 4. Started in 2014-15 and remains ongoing. Process to continue every year, and monitoring to remain ongoing every year. 5. Started in 2014-15 and remains ongoing. Process to continue every year, and monitoring to remain ongoing every year. 6. ELL School-based teams and training about expectations for the team’s work to take place by April 2016. School-based team members to be confirmed at the beginning of every academic year, and training to be provided to new members as necessary. | |
| **Evidence of Completion of the Corrective Action:**   1. -WPS Guidance for Scheduling documents are attached (formally released on October 27, 2015). 2. -Copy of agenda from Leadership Team Meeting dated October 1st, where New Guidance from DESE was reviewed to the district’s Leadership Team.   -Power Point Presentation to all principals used during the All Principals Meeting on October 27th, along with signing sheets (all attached)  - Power Point Presentation to all ESL Faculty, during ELL PD Institute days on November 23rd and 24th, 2015, along with staff signing sheets (all attached).  -Power Point Presentations used for district-wide trainings to PIC staff, Enrollment personnel, and special education staff during the month of November, along with respective staff signing sheets (all attached).  -Copy of meeting agenda and signing sheets of training with Guidance personnel to be provided by June 2016.  –Copies of meeting agendas, signings sheets and/or materials used for training/information as applicable and ongoing as standard operating procedures from January 2016 through September 2016, to be provided by October 2016.   1. **–**Documents already available for portfolio are attached including, Guidance for ELL Scheduling, FLEP and Opt-Out Monitoring Process and forms, & ELL Program Descriptions and Reclassification. 2. **–**ELL Tiered Support reports from November 2015 are attached.   **-**School classification charts for FY 14-15 based upon ELL incidence are attached.  **-**School classification charts FY 15-16 to be provided by October 2016.   1. –Redacted sample of student lists used to gather specific scheduling information per school is attached.   -Recently completed service delivery reports for elementary schools and Summary for secondary schools attached, to be used for feedback to principals and budget process.  -For the rest of FY 15-16 and through beginning of FY 16-17, completed service delivery reports used to inform scheduling practices, communications and feedback to ESL faculty and principals to reflect data gathering and monitoring practices to be provided by October 2016.   1. -FY 15-16, ELL School-based team designation template is attached.   -Chart with already designated ELL School-Based team members per school is attached. Evidence of all teams assembled per school to be provided by June 2016, along with signing sheets of training conducted with team members.  -School-based team member assignments FY 16-17 to be provided by October 2016. | | | |
| **Description of Internal Monitoring Procedures:**   1. -The district will continue to communicate expectations from the new Guidance for Scheduling ELLs in both formal and informal communications and procedures with district personnel, building principals and ESL faculty.   -Work with the Guidance Department will be targeted as there is a new Guidance Coordinator. This will support schedule development for ELLs in secondary.   1. –The district will continue to work on enhancing data gathering for the purpose of evaluating the status of ESL service delivery at each school and district-wide.   -Formal and informal feedback to principals and central office staff will be provided in regards to the status of service delivery.  -The Budget process will be informed from the evaluation of service delivery process, in order to make recommendations about ESL staffing needs to support service delivery for all ELLs at all schools.   1. –The district will continue to work on district-wide and school based ELL trends, so as to better address needs of ELL students, including scheduling of ESL instruction. 2. Continuing work on crafting the expectations and responsibilities of ELL School-Based Teams congruent with both DESE and WPS Guidelines. | | | |
| 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:** The documentation submitted indicates that there has been a major overhaul of the ELE program in the district. The Department appreciates the district’s efforts and would like to thank all the educators involved for the work and dedication to supporting their ELLs. | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  Please complete district information in the attached spreadsheet labeled ELL Student Data by school for each ELL student in the district. | | | |
| **Progress Report Due Date(s): March 11, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 10 Parental Notification | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of student records and documents indicated that the parent notices do not include the following: 1) how the program will meet the educational strengths and needs of the student; 2) how the program will specifically help the child learn English; 3) the specific exit requirements; 4) the parents’ right to apply for a waiver; and 5) if the student has additional education needs that require special education services, how Title III program will meet the objectives of the Individualized Education Plan (IEP). In addition, student records indicated that report cards are not translated into low incidence languages and not consistently translated for Spanish families. Record review and interviews also confirmed that reports containing, but not limited to, progress in becoming proficient in using the English language are not completed and sent in the same manner and frequency as report cards and progress reports to other students enrolled in the district.* | | | |
| **Narrative Description of Corrective Action:**   1. The District will revise enrollment forms and procedures to address the following informational gaps:  * Description of how ELL programs are designed to meet the needs of ELL students and how they help students learn English. * Parents rights to apply for a waiver for the TBE program * Reclassification process from Active ELL status to FLEP status and 2-year monitoring process. * Information to parents, including parents of ELL Sped students of Title III after school and summer programs available for extra support to students. * In addition, the ELL Department will develop a family friendly informational brochure to highlight key informational components about ELL Education in WPS, including gaps mentioned above. Brochure will be translated in as many languages as possible. * The District will update the WPS website section under the ELL Department with all revised information, including the parent/guardian brochure.  1. Report Cards:   -In coordination with the Quadrant Managers Office (in charge of report card issuance and new electronic report card initiative) the district will developed translated templates of the new electronic report card for elementary, and of the secondary report card in the following languages, and send these to parents/guardians who identified a language other than English at the home for the purpose of communication, as a standard operating procedure: English, Spanish, Portuguese, Albanian, Vietnamese, Arabic, Twi and Nepali.  -The district will provide translated templates in additional languages to the ones stated above upon request, and make such option explicit to parents/guardians in informational brochures and on the WPS website.   1. Progress reports for English Language Proficiency (ELP report):   -The district already developed an insert to provide information to parent/guardians in regards to students Progress in English Language Proficiency (see attached).  -The ELL manager will continue to work with the Quadrant manager in charge of the electronic report card initiative, to coordinate issuance of the ELP report with each report card for ELLs, including the translated templates according to item 2 above.  -Training will be provided to ESL faculty and to schools addressing how to use the ELP report, based upon WIDA standards. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  Bertha-Elena Rojas, manager of ELL, ELL Department, PIC staff, WPS web developer and IT department, Manager of Professional Learning. | | **Expected Date of Completion for Each Corrective Action Activity:**   1. -Meetings with ELL Staff and PIC to address concerns, review forms and plan the brochure have started and will remain ongoing through May 2016.   -Meeting with web developer and IT department to review informational needs and updates required by January 2016.  -Website update of ELL Department to be completed by July 2016.   1. -Coordination with Quadrant managers is already in progress. Templates of translated versions timelines is August, 2016, based upon issuance of electronic report card version for elementary.   **-**Secondary: Consistent issuance of translated templates to be fully implemented by 3rd quarter (April 2016) and thereafter.  **-**Review of student records (both elementary and secondary) as of 3rd quarter of FY 15-16, and yearly thereafter, to account for translated copies of report cards.   1. -PLP report already developed   -Translating templates in progress and to be completed by March 2016.  -Roll out of report with electronic report card to begin FY 16-17 or sooner, pending on electronic report card roll-out.   1. Coordination with Manager of Professional Learning to set training dates for utilization of PELP, so that training is accomplished by June 2016. | |
| **Evidence of Completion of the Corrective Action:**   1. Revised ELL Program Descriptions and Reclassification process are attached.   -Copies of agenda meetings, revised forms and informational brochure to be submitted by July 2016.  -Changes in Website information as evidenced by print-outs of the newly updated information, to be provided by October 2016.   1. -Continue coordination with Quadrant Managers for issuance of translated templates to electronic report card simultaneously with district’s roll-out of the card in August of 2016.   -Copies of record review sampling of 10 ELL student records at each school, utilizing checklist from CAP of ELE # 18, after issuance of 3rd quarter report card.  -Refer to Evidence from ELE #18, directly related to this item.   1. **–**ELP report developed is attached.   -Roll out of ELP report with electronic report card plan to be provided by October 2016.  -Translated templates of electronic report cards and PLP reports to be provided by October 2016. | | | |
| **Description of Internal Monitoring Procedures:**   1. Parent Information Center (PIC) will use new informational brochure to welcome parents and to provide information about ELL programs. The brochure will also be used at parent and community informational events. Also, ELL webpage will be monitored annually for necessary changes or updates. Information will be translated in the most common 7 languages. 2. -Continued collaboration with Quadrant Office to reinforce the importance of issuing report cards with translated templates and their filing in student cumulative folders.   -Yearly issuance of communication to principals regarding issuance of documents and communications with ELL families.   1. –Continue training on the use of the ELP to support overall assessment of students’ progress and as a vehicle of communication with parents during school-based meetings. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 10 Parental Notification | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Please note:** The Department has developed a template parent notice for district use, available at <http://www.doe.mass.edu/ell/resources.html>, that contains the information as indicated by ELE 10. While the district may use other methods to inform parents of their students’ educational rights (brochure, enrollment forms), the district’s own initial and annual notices must contain all elements.  **By March 11, 2016,** submit the district’s revised parent notice (both initial and annual) and the report card template that includes an insert for progress reporting.  **By March 11, 2016**, submit evidence of training on the revised parent notices, report card translations, and the progress report template, including an agenda, training materials and a signed attendance sheet for ELL staff and relevant record keeping staff  **By May 13, 2016**, conduct an administrative review of approximately 30 ELL records for students whose parents received notification following the implementation of all corrective actions and representing the district’s schools, grade levels, proficiency levels, and language diversity (including low incidence languages) for evidence of the following: 1) use of the revised parental notice; 2) translations of report cards; and 3) progress reporting. Indicate the number of student records reviewed and the number of student records in compliance; for all records not in compliance with this criterion, determine the root cause(s) of the noncompliance and provide the district’s plan to remedy the non-compliance**.**  **\*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review, their role(s) and signature(s).** | | | |
| **Progress Report Due Date(s): March 11, 2016; May 13, 2016** | | | |

**Please note that ELE 14 is not due until May 13, 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 indicated that ESL teachers/tutors that provide students in Kindergarten with ESL instruction do not hold an appropriate license or current waiver issued by the Massachusetts Department of Elementary and Secondary Education.* | | | |
| **Narrative Description of Corrective Action:**   1. New hires: Given the shortage of ESL certified candidates, the district’s practice in regards to the hiring of Kindergarten ELL tutors allowed the hiring of non-licensed candidates when they had a background in Early Childhood Education and they showed evidence to be working towards ESL certification. Candidates were hired under the understanding that they would not be able to remain in such positions if they had not secured the ESL license within one to two years. This hiring practice was discontinued as of November 2015, following the receipt of draft CPR findings report. ELL Department hiring staff was already informed about this compliance matter during the departmental staff meeting on November 16th, 2015. 2. Current K-ELL Tutor Staff: There are currently 10 K-ELL tutors in the district of which 8 are not ESL certified. The staff will receive a letter by February 2016, informing them of their displacement from their current position unless they secure an ESL license by mid August 2016. The district will maintain vacancies for these positions open until ESL certified staff are secured. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  Bertha Elena Rojas, manager of ELL and Supplemental Supports and Mark Brophy, Acting Human Resources Office | | **Expected Date of Completion for Each Corrective Action Activity:**   1. New hires: Already implemented as of November 2015 by ELL Department staff. 2. Current staff:   -Letter of potential displacement by February 2016.  -No K-ELL tutors without an ESL license on staff as of August 2016. | |
| **Evidence of Completion of the Corrective Action:**   1. -Formal communication with Human Resources Officer , both acting (current) and incoming (TBD) by January 2016 (Copy of meeting Agenda and revised Job Posting in qualifications section for ESL Tutors).   -Eliminate item #12 from ESL Tutor posting attached for future job postings.   1. Formal communications with ELL staff involved in candidate search and staff hiring by February 2016 (Copy of meeting Agenda).   **-**Communication to all Elementary Principals (Copy of email communication, and/or meeting agenda – either one to take place by February 2016). | | | |
| **Description of Internal Monitoring Procedures:**   1. Maintain current practices for candidate reviews, and interview process under the ELL Department and in collaboration with Human Resources (HR). 2. Manager of ELL and Supplemental Supports will continue to recommend new hires to HR, so that no candidates, if recommended and/or submitted by other parties (i.e.: principals), will be hired without following the due process under the ELL Department and the approval of Manager of ELL. | | | |
| 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:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**   1. Provide a report of the program director’s monitoring of the ELL tutors’ progress toward certification throughout 2015-2016 school year until licensure is secured, and a copy of any job posting and application information that may remain on file in the event the currently uncertified tutors fail to acquire proper certification by Summer 2016. 2. Provide evidence of the licensure of the current ESL teachers and tutors by the progress report due date. | | | |
| **Progress Report Due Date(s): May 13, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 18 Records of ELLs | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of student records indicated that the following are not consistently documented in student records: initial identification testing, parent initial and annual notices, and evidence of follow-up monitoring.* | | | |
| **Narrative Description of Corrective Action:**   1. The District will revise the “pink folder” for record keeping of ELL related documents and its protocol. The revised pink folder will include an updated checklist of the required documents to be included on ELL student records, with explicit reference to translated documentations in parent/guardian home language when applicable. The has already revised the checklist of items expected to be included in the pink folder. The checklist will also be used for training purposes and for the purpose of monitoring record keeping practices of ELL records. 2. All ESL faculty will be train on requirements of record keeping for ELLs and utilization of pink folder to hold all documents in the student cumulative folder. 3. All front office and clerical personnel and all staff at PIC will be trained on the importance of keeping records current for ELL student files, including all initial enrollment forms, translated copies of documents sent out to parents thereafter, and all monitoring forms applicable to students. 4. The Manager of ELL will prepare an informational memo to communicate to principals and WPS staff at large, the importance of maintaining complete and accurate records for ELL students, as well as a new monitoring process to ensure maintenance of record keeping practices. 5. The district will implement a record keeping monitoring process following the initial trainings on record keeping practices for FY 16-17. Ten random ELL records will be selected at each school to be revised utilizing the Record Keeping Checklist as a rubric and feedback tool to principals and front office/clerk personnel. As of FY 17-18, the district will monitor ELL record keeping on a 3 year rotation, so that 1/3 of schools will have a record review process in FY 18-19, another 1/3 in FY 19-20 and the last 1/3 in FY 20-21. The three year cycle will begin again with the first 1/3 of schools in FY 21-22 and continue thereafter. Checklists completed under the record review monitoring processes will be used as feedback tools to principals to provide information about missing items. Principal signatures will be obtained as receipt of the feedback. Re-raining of staff will be offered if multiple missing items are noticed in records. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  Manager of ELL and Supplemental Supports, ELL Department staff, Building Principals, Schools’ front office and clerical staff, Manager of Professional Learning. | | **Expected Date of Completion for Each Corrective Action Activity:**   1. –Revised and updated pink folder to be in effect FY 16-17.   -Development of checklist to be used for record keeping, record reviews and training related to upkeep of for all ELL related documents in students’ cumulative records. Checklist to be used with the already existing “pink folder” designed to hold all ELL documentation.   1. Training to all ELL faculty in regards to ELL record keeping and the use of the checklist, by Spring 2016. 2. Training of all Front office and clerical staff at schools and PIC personal, specific to record keeping and use of the checklist for ELL records by September 2016. 3. Memo to be completed by Spring 2016. Dissemination of memo via email and during trainings. 4. -Creation of monitoring schedule FY 16-17 for all schools (10 records per school).   -Development of three year cycle monitoring schedule to be used as of FY 17-18.  Additional training (school specific) provided if necessary. | |
| **Evidence of Completion of the Corrective Action:**   1. -Checklist developed is attached.   -Revised pink folder will be provided by October 2016   1. Copies of training agenda and/or materials used for training, and signing sheets of participants by June 2016. 2. Copies of training agenda and/or materials used for training, and signing sheets of participants by September 2016. 3. -Copy of memo about ELL record keeping practices to be provided by June 2016.   -Copies of emails used to disseminate memo and of training agendas where memo was used as reference to be provided by June 2016 and then October 2016.   1. -Monitoring schedule template FY 16-17 (10 records per school, all schools) and corresponding completed checklists.   -3 year cycle monitoring schedule template FY 17-18 and thereafter (10 records per school) and corresponding completed checklists. | | | |
| **Description of Internal Monitoring Procedures:**   1. Yearly issuance of portfolio documents (referenced under CAP of ELE #5) above, including requirements for maintenance of records of ELL students and a copy of the record keeping checklist. Portfolio of documents will be released to principals at the beginning of the year via one or more of these methods:  * School Year readiness training/meetings, before beginning of each academic year. * Email communications * Principals meetings  1. Yearly issuance of record keeping procedures and checklist to schools front office and clerical personnel at the beginning of the year, via training meetings and/or email communications. 2. 3 year cycle of ELL record keeping monitoring (1/3 of schools per year), with additional school-based training to be provided as necessary for schools where records show multiple missing items. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 18 Records of ELLs | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Please note:** The Department has developed a template student record checklist for district use, available at <http://www.doe.mass.edu/ell/resources.html>, that contains all required information as indicated by ELE 18.  Submit evidence of training including the district’s record maintenance checklist, an agenda, training materials, and a signed attendance sheet for ELL staff and relevant record keeping staff on the district’s ELL Student Records Checklist and the required content of ELL student records by **March 11, 2016.**  **By May 13, 2016**, conduct an administrative review of approximately 30 ELL records for students following the implementation of all corrective actions and representing the district’s schools, grade levels, proficiency levels, and language diversity for evidence of all required content in each record, including initial identification testing, parent initial and annual notices, and evidence of follow-up monitoring for exited ELLs. Indicate the number of student records reviewed and the number of student records in compliance; for all records not in compliance with this criterion, determine the root cause(s) of the noncompliance and provide the district’s plan to remedy the non-compliance.  **\*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review, their role(s) and signature(s).** | | | |
| **Progress Report Due Date(s): March 11, 2016; May 13, 2016** | | | |

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

District: Worcester Public Schools

Corrective Action Plan Forms

Program Area: Career/Vocational Technical Education

Prepared by: Frank Mann, Technical Director

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 2, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 1 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents, student records, and interviews indicated that while some students at Worcester Technical High School are provided with career assessments and career plans, students in career/vocational technical education programs at Burncoat, Doherty, North, and South High Schools do not receive career assessments and assistance with the development of a four-year career plan.* | | | |
| **Narrative Description of Corrective Action:** Beginning in school year 2015-2016, the District implemented the Naviance College and Career Readiness platform, which helps connect students’ academic achievement to their post-secondary goals. The application allows students to create a plan for their futures by assessing their individual strengths and learning styles in order to develop a four year career plan. All WPS secondary students have an email address and single sign-on to this system. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Albert Mercado,  District Guidance Liaison; Head Guidance Counselors at Chapter 74 Schools. | | **Expected Date of Completion for Each Corrective Action Activity:** Completed. September 2015 | |
| **Evidence of Completion of the Corrective Action:** Every Middle/High School student has a Naviance account, which is accessible through their WPS email and single sign-on. | | | |
| **Description of Internal Monitoring Procedures:** Usage reports will be provided by Naviance. Random checks of student records will occur. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 1 | **Status of Corrective Action:**  Approved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. Sample copies of completed usage reports provided by Naviance. 2. Sample student records - with personal information redacted - from Naviance that contain evidence of four-year career planning, including completed career assessments, for 8 students (2 per grade level) at each Burncoat, Doherty, North, and South High Schools. 3. Evidence that information is made available to assist students and families with limited English proficiency at each Burncoat, Doherty, North, and South High Schools in the completion and interpretation of career assessment results. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 3 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents, student records, and interviews verified that students are consistently assessed for safety and health (Strand 1) and technical skills (Strand 2) in all programs at Worcester Technical High School and for technical skills (Strand 2) at some of the vocational programs at Burncoat, Doherty, North, and South High Schools.* *However, a review of documents, student records and interviews indicated that the district does not assess the acquisition of embedded academic, employability, management & entrepreneurship, and technological knowledge and skills (Strands 4, 5 & 6) for all students enrolled in the district’s career/vocational technical education programs. ( Legal Citation: Perkins Section 134)* | | | |
| **Narrative Description of Corrective Action:** Strands 1, 2, and 3 are very specific to a particular trade or technical area. Strands 4, 5, and 6 focus on areas of knowledge and skills that students require to become college or career ready. In order to ensure that all student have access to the CVTE/CTE curriculum, the District will utilize Applied Educational Systems (AES) Business and ITCenter 21 service. These systems will enable vocational instructors to deliver the content in Strands 4, 5, and 6, and will also provide them with resources such as lesson plans, student deliverables, and powerpoint presentations. After the system is tested at Worcester Technical High School, participation in the AES Business and IT Center 21 will be extended to the Chapter 74 program at Doherty and North High Schools. These schools will be provided with sample competency tracking files for use in developing a system to track all competencies. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann, Vocational Director; Head Guidance Counselors at Chapter 74 schools. | | **Expected Date of Completion for Each Corrective Action Activity:** December 30, 2015 - initial roll out to Worcester Technical High school  September 30, 2016 roll out to Doherty & North | |
| **Evidence of Completion of the Corrective Action:** Evidence of completion of the corrective action will be rosters indicating the technical areas participating in the program, as well as the students enrolled in the AES Business and ITCenter 21 management and tracking system. | | | |
| **Description of Internal Monitoring Procedures:** Progress will be tracked with the activity reports within the application.  snapshot of www.aeseducation.com - Courses - Reports page. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: CVTE** 3 | **Status of Corrective Action:**  Approved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. Sample completed competency profiles for 2 students per Chapter-74 program at Worcester Technical High School, indicating the district assesses and documents the acquisition of employability, management & entrepreneurship, and technological knowledge and skills (Strands 4, 5 & 6). 2. Sample completed activity reports obtained from within the AES application for 12 students   (3 per grade level) at Worcester Technical High School.   1. A written description of the implementation plan and professional development schedule necessary to ensure timely roll-out of AES to the Chapter 74 programs at Doherty and North High Schools. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 4 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and interviews indicated that although the district provides course selection sheets and 8th grade tours for all high schools, an on-line program of study for Worcester Technical, and an annual open house where all five high schools present their career/vocational technical education programming, the district has not developed a district-wide program of study with specific information on admission requirements for all career/vocational technical programs; specific programs/courses that are available across the district, including employment and/or further education; and registered apprenticeship opportunities. In addition, document review indicated that there are no procedures to ensure information on career/vocational technical education programs at each high school is available in languages other than English. (Legal Citation: Perkins Section 134, Vocational Technical Education Regulations 603 CMR 4.03 (4) (6))* | | | |
| **Narrative Description of Corrective Action:** A brochure will be developed describing the district-wide program of studies available in all schools. It will also include specific information on admission requirements for all career/technical programs; specific programs and courses that are available across the district, including employment and further education; and registered apprenticeship opportunities. The brochures will be translated into seven languages. The brochure will be posted on the WPS website, as well as on each of the high schools’ websites. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann, Vocational Director; Albert Mercado, Guidance Liaison; Bob Walton, Information Technology Officer; a working group composed of teachers from each high school. | | **Expected Date of Completion for Each Corrective Action Activity:**  August 1, 2016 | |
| **Evidence of Completion of the Corrective Action:** Evidence of completion will be agendas and sign-in sheets from the working group responsible for the development of the brochure; copies of the brochure; and the posting of the brochure on the District and school websites.. | | | |
| **Description of Internal Monitoring Procedures:** Brochures will be updated annually in order to verify that course offerings reflect the most current information. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 4 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. Copies of agendas, meeting minutes and sign-in sheets, to date, from the working group responsible for the development of the brochure. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 5 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and interviews indicated that technical teachers at Worcester Technical High School are not provided Individualized Education Program (IEP) information on needed accommodations/modifications for grade nine students in exploratory.  Consequently, these students do not receive accommodations/modifications during exploratory.*    *A review of documents, student records and interviews also indicated that the five visited high schools do provide technical teachers with information on accommodations/modifications for students with IEPs for students in grades 10-12, but, with the exception of South High School, accommodations/modifications are not always provided in a student’s career/vocational technical program.*  *Interviews and document review also demonstrated there is no system in place for students with limited English proficiency to receive language support, as necessary, in their career/vocational technical education programming at any of the high schools. For example, oral or written translation of vocational curriculum materials, including safety curriculum and tests, are not routinely provided, when necessary. Any translations that occur in a student’s career/vocational technical education program are typically done by other students within the program. Interviews also confirmed that there is no process to ensure that guidance counselors at Worcester Technical communicate with students in a language they understand. Consequently, career guidance and placement services for this population differ from services provided to their peers.*  *Also see CVTE 4.*  *(Legal Citation: Perkins Sections 122 & 134, Vocational Technical Education Regulations 603 CMR 4.03(4) (6 (7), M.G.L.c.76, Section 5)* | | | |
| **Narrative Description of Corrective Action:**   1. The issue regarding the distribution of IEPs at Worcester Technical High School has been corrected. On September 1, 2015, prior to the start of the exploratory program, all IEP snapshots were distributed to technical department heads for use by their instructors. This practice is already in place at each of the other high schools. The Special Education Department Head at each high school is responsible for disseminating the updated version of the IEP snapshot after each team meeting. 2. Student accommodations/modifications for students with IEPs will be provided for students’ career/vocational technical education program in all schools. 3. The District will provide training to secondary principals and CVTE Department Heads on the access to translation services. Selected vocational curriculum materials (i.e. safety curricula) may be translated to provide support to English Language Learners. 4. In making every effort to comply with the mandates of the Department of Justice, all WPS documents are translated into the 7 major languages.   In school year 2013-2014, 2534 translations were conducted in 23 different languages.  In school year 2014-2015, 3026 translations were conducted in 25 different languages.  This year to date, 1705 translations have been conducted in 19 different languages.  CVTE personnel may request translation of these documents in the Team On-Line portal - the Worcester Public Schools translation/interpretation access. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Dr. Bertha Elena Rojas,  Manager of ELL Services; Kay Seale, Manager of Special Education; Frank Mann, Vocational Director; all High School Principals; ELL and Special Education Department Heads. | | **Expected Date of Completion for Each Corrective Action Activity:**  September, 2015 and on-going throughout the 2015-2016 school year. | |
| **Evidence of Completion of the Corrective Action:** Printed copies of e-mail distribution of the snapshots and job postings for the ELL teachers. | | | |
| **Description of Internal Monitoring Procedures:** Examination of students schedules to ensure appropriate placement; sign-off sheet from teachers upon receipt of IEP snapshots and documented requests for translation services. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 5 | **Status of Corrective Action:**  Approved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. Evidence that technical teachers at Worcester Technical High School are provided Individualized Education Program (IEP) information prior to the start of Exploratory. 2. Evidence that accommodations/modifications for students with IEPs are provided in the students’ career/vocational technical education program in all schools. 3. A narrative description of the system and procedures developed to ensure support services are provided, when appropriate, for students with limited English proficiency enrolled in career/vocational technical education programs at all high schools. 4. Copies of agendas, handouts and sign-in sheets from the trainings provided to date for secondary principals and CVTE Department Heads on accessing translation services. 5. A list of the selected vocational curriculum materials (i.e. safety curricula) the district has determined will be translated to provide support to English Language Learners in their CVTE program. 6. A list indicating the specific number and types of documents requested (in school year 2015-16) to be **translated** by CVTE personnel in the Team On-Line portal. 7. A list indicating the specific number and types of **interpreter** services requested (in school year 2015-16) by CVTE personnel in the Team On-Line portal. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 7 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews, document review, and student record review indicated that all students can elect to apply to Worcester Technical or to the other two Chapter-74 programs in the district (Health Assisting at North and Engineering at Doherty). However, the current process used for the exploratory program at Worcester Technical differs from the process described in the district’s Department-approved admission policy; specifically, the programs explored by students are based on choices made on the school application prior to having been accepted, which is not in the approved admission policy that states students will select six (6) programs after the mini-exploratory of all programs. Further, how students are placed into the programs after exploratory, with the exception of Worcester Technical, is not indicated in student records. Finally, there is no documentation to confirm that the number of hours for the exploratory program meets the minimum requirement of one-half the school year (approximately 198-247.50 hours). (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03(4). M.G.L. c. 76, Section 5)* | | | |
| **Narrative Description of Corrective Action:** Programs explored by students are based on selections made on the sending school’s application prior to acceptance. The mini-exploratory in each academy exposes students to all of the programs at Worcester Technical. Students are then provided with the opportunity to change their original list to replace one shop with another. Extending the exploratory to eight cycles as opposed to six meets the minimum requirement mandating that the exploratory last for one half of the year. Students are placed into shops at the end of the second marking period. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann, Vocational Director; Head Guidance Counselors at Chapter 74 schools. | | **Expected Date of Completion for Each Corrective Action Activity:**  January 31, 2016 – Worcester Technical H.S.  March 31, 2016 – North and Doherty H.S. | |
| **Evidence of Completion of the Corrective Action:** Revised Admissions Policy forwarded to DESE. | | | |
| **Description of Internal Monitoring Procedures:** Review of student course selection sheets indicating all exploratory choices as well as the number of selections made by each student. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 7 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** The district’s response did not address the finding that there was no evidence provided by the district indicating the exploratory program at Worcester Technical meets the minimum requirement of one-half the school year (approximately 198-247.50 hours). In addition, the district’s response did not include steps the district will take to ensure student records contain information documenting how students are placed into their programs after exploratory. | | | |
| **Department Order of Corrective Action:**  The district will *immediately* submit proposed revisions to the current admission policy and work with the CVTE liaison, Ramona Foster, to complete the approval process. The district will also develop and disseminate procedures and train staff to use the revised admission policy to ensure effective implementation (upon approval by ESE/CVTE). Further, the district will provide information relative to the number of hours in the exploratory program at Worcester Technical. The district can submit this information using Document 10 in the Coordinated Program Review Procedures - *District Information Package for Career/Vocational Technical Education (p. 52).* In addition,the district will conduct an internal record review that demonstrates that the district is tracking how students are placed into their program after exploratory. | | | |
| **Required Elements of Progress Report(s):**  **The district will *immediately* submit proposed revisions to the current admission policy and work with the CVTE liaison, Ramona Foster, to complete the approval process. The revisions can be submitted as a Microsoft Word document, with the proposed changes highlighted, and can be emailed to** [**rfoster@doe.mass.edu**](mailto:rfoster@doe.mass.edu)**.**  In addition, the district will submit the following by April 15, 2016:     1. A completed Document 10 in the Coordinated Program Review Procedures - District Information Package for Career/Vocational Technical Education indicating the total hours in the exploratory program at Worcester Technical. 2. A description of the policies and procedures developed to ensure effective implementation of the revised admission policy, once approved. 3. The results of the district internal record review tracking how students are placed into their program after exploratory. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 8 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and interviews indicated that not all programs in which students are enrolled meet the Perkins IV definition of career and technical education, with the exception of Worcester Technical. Specifically, other high school programs do not have established advisory committees, offer sequences of courses, provide students with opportunities for technical skill proficiency, or offer an industry recognized credential/certificate. See also CVTE 9A. (Legal Citation: Perkins Act IV of 2006, Sections 3 & 134; Massachusetts Perkins IV Manual)* | | | |
| **Narrative Description of Corrective Action:** The comprehensive high school programs will establish advisory committees, design sequences of courses, provide students with opportunities for technical skill proficiency, or offer an industry recognized credential/certificate. The Vocational Director will collaborate with staff at each school in order to ensure each CTE program includes these elements. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann Vocational Director; Head Guidance Counselors at Chapter 74 schools. | | **Expected Date of Completion for Each Corrective Action Activity:**  Establish advisory committees – June, 2016  Offer course sequences – August, 2016  Provide students with opportunities for technical skill proficiency/offer an industry recognized credential – August, 2016 | |
| **Evidence of Completion of the Corrective Action:** Advisory Committee Member Lists; Programs of Study; IRC or Certificate of Completion for each CTE program meeting as defined in APPENDIX G – DOE044 CVTE – Non-Chapter 74 Career and Technical Education Program Participation Codes. | | | |
| **Description of Internal Monitoring Procedures:** Documents will be reviewed bi-annually by the Vocational Director. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 8 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** While the district indicates high school programs will meet the criteria, there was no clear description of the steps to be taken to achieve compliance. It is also unclear what the role of the Head Guidance Counselors will be in the process, or why the teachers of the Perkins-funded programs are not part of the corrective action. Further, the internal monitoring procedures section indicates that documents will be reviewed by the Vocational Director. While this may be appropriate for monitoring some aspects of the finding, as written, it is insufficient to achieve and sustain compliance. | | | |
| **Department Order of Corrective Action:** The district will provide training to teachers and staff involved in teaching or overseeing Perkins-funded programs to ensure a clear understanding of their responsibilities under the Carl D. Perkins Act. The district will also complete the Perkins IV Checklist for each Perkins-reported program annually. The district will develop policies, procedures and disseminate to relevant staff. The district will develop follow-up activities to ensure that new/revised procedures are being implemented district-wide in a continuous manner. | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. A status update, including supporting documentation, on the district’s efforts in developing policies, procedures and follow-up activities to ensure each Perkins-funded program at Burncoat, Doherty, South and North meets the Perkins Act definition of a career and technical education program. 2. A description of the training and professional development the district has provided to date to teachers and staff involved in teaching or overseeing Perkins-funded programs. Include supporting documentation. 3. Copies of completed Massachusetts Perkins IV Career and Technical Education Program Checklists for each Perkins program the district the currently reports in the DESE Student Information Management System (SIMS) at all high schools. The Checklist is Appendix A in the Massachusetts Perkins IV Manual (<http://www.doe.mass.edu/cte/perkins/>). 4. A clear description of the ongoing monitoring procedures the district will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 9A | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and interviews indicated that, except for Worcester Technical, the district’s four high schools inaccurately report students as enrolled in career and technical education programs as defined by Perkins IV when the programs do not meet the Perkins definition. See also CVTE 8. (Legal Citation: Perkins Section 11, Vocational Technical Education Regulations 603 CMR 4.05)* | | | |
| **Narrative Description of Corrective Action:** In order to ensure that data is reported correctly, reports from SIMS are being correlated with reports from SAGE, which is the District’s data base. Currently, course offerings in SAGE do not carry both CTE and Chapter 74 course numbers. Four courses have been identified as needing additional course numbers to separate CTE from CVTE courses. These courses will be added to the course catalog in order to appropriately enroll students.  By adjusting the scheduling of courses in SAGE, students will not be allowed to enter the second year of a program without having completed the initial prerequisite course.  As previously note in topic CVTE 8, students are reported as enrolled in CTE, yet, with the exception of Worcester Technical High School, high school programs do not have established advisory committees, offer sequences of courses, provide students with opportunities for technical skill proficiency, or offer an industry recognized credential/certificate. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann, Vocational Director; Kristen Leo, Senior Systems Analyst; Albert Mercado, Guidance Liaison | | **Expected Date of Completion for Each Corrective Action Activity:**  SAGE Adjustment – February, 2016  Establish Advisory Committees – June, 2016  Offer sequences of courses – August, 2016  Provide students with opportunities for technical skill proficiency/offer an industry recognized credential – August, 2016 | |
| **Evidence of Completion of the Corrective Action:** Print out of SAGE catalog; list of Advisory Committees; copies of Certificates of Completion. | | | |
| **Description of Internal Monitoring Procedures:** Documents will be reviewed biannually by the Vocational Director. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 9A | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**  A representative sampling of SAGE reports across all high schools (with confidential student information redacted) ensuring accuracy in reporting students as enrolled in Perkins-funded programs at Burncoat, North, South and Doherty. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 10 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and interviews indicated that each program at Worcester Technical has a Program Advisory Committee that meets at least twice annually as well as a General Advisory Committee. However, while some programs at the other high schools have industry connections and informal relationships with individual businesses, there is no formal process to verify the labor market for these programs, which is typically done by an advisory committee. Therefore, with the exception of Worcester Technical, representatives from business/industry and postsecondary education are not consistently involved in the development, implementation, and review of the district’s Perkins-funded career/vocational technical programs.*  *In addition, the Program Advisory Committee chairs for the Chapter-74 programs at North and Doherty are not members of the district’s General Advisory Committee, as required. (Legal Citation: M.G.L. c.74 Section 6; Vocational Technical Education Regulations 603 CMR 4.03 (1))* | | | |
| **Narrative Description of Corrective Action:** Each CTE program will recruit representatives from business/industry and post-secondary education to be consistently involved in the development, implementation, and review of the District’s Perkins-funded career/vocational technical programs. Chapter 74 advisors from North and Doherty High Schools will be included in all General Advisory Meetings, which are hosted at Worcester Technical High School in the Spring and Fall. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann, Vocational Director; Principals, Doherty and North High Schools. | | **Expected Date of Completion for Each Corrective Action Activity:**  Identification of members of Advisory Committees at North and Doherty –  February 16, 2016  Attendance at Advisory Meeting – April, 2016 | |
| **Evidence of Completion of the Corrective Action:** Invitations to potential advisors; meeting sign-in sheet; General Advisory meeting minutes. | | | |
| **Description of Internal Monitoring Procedures:** The Vocational Director will engage in consistent communication regarding the establishment of Advisory Committees with Chapter 74 principals and will document participation in General Advisory Meetings. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 10 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. Evidence (e.g., rosters, meeting minutes, meeting agendas, etc.) the district has recruited advisory committees from business/industry and postsecondary for each Perkins-funded program the district the reports in the DESE Student Information Management System (SIMS). 2. A written description of the process the district has created to ensure each advisory committee is involved in the development, implementation, and review of the district’s career/vocational technical programs. 3. A status report on the districts efforts to assess labor market demand for all Perkins-funded programs in collaboration with the advisory committees to be established. 4. Evidence indicating the Program Advisory Committee chairs for the Chapter-74 programs at North and Doherty are members of the district’s 2015-16 General Advisory Committee. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 11 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents, student records, and interviews indicated that except for staff at Worcester Technical, most staff members are not aware of the administrative responsibilities under Perkins IV, which resulted in the following issues:*   * *All programs at Worcester Technical High School have developed comprehensive program scope and sequence and are appropriately structured so that students acquire the technical skills in Strands 1 and 2 in the Vocational Technical Education Frameworks (VTEF); other Worcester Technical programs are appropriately structured so that students acquire the technical skills in Strands 4, 5, & 6. However, only a few programs at the other high schools (Burncoat, Doherty, North and South) include the technical skills that encompass all aspects of the industry for the particular program (Strands 1-6).* * *With the exception of Worcester Technical, there is no process to ensure that the integration of academic standards with relevant career/vocational technical programs occurs.*   *(Legal Citation: Perkins Section 134, M.G.L. c. 74 Section 2; Vocational Technical Education Regulations 603 CMR 4.03 (4) 4.06)* | | | |
| **Narrative Description of Corrective Action:** Documents will be developed for each CTE program that describes the scope and sequence for the program, as well as a program of studies. This will ensure that all of the high school programs include the technical skills that encompass all aspects of the industry for the particular program. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann, Vocational Director; Head High School Guidance Counselors | | **Expected Date of Completion for Each Corrective Action Activity:**  August, 2016 | |
| **Evidence of Completion of the Corrective Action:** Copies of documents developed for each CTE program | | | |
| **Description of Internal Monitoring Procedures:** Vocational Director will review documents annually. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 11 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** The district provided some information on the steps to be taken to ensure all Perkins-funded programs are appropriately structured so that students acquire all aspects of the industry. However, there was no description of the corrective action to be taken to ensure the integration of academic standards with relevant career/vocational technical programs occurs at Burncoat, Doherty, North and South. | | | |
| **Department Order of Corrective Action:** The district will develop policies and procedures to address the finding that integration of academic standards with relevant career/vocational technical programs does not occur at Burncoat, Doherty, North and South. | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. A status report that includes relevant supporting documentation on the district’s efforts to ensure all Perkins-funded programs are structured so that students acquire the technical, safety & health, embedded academic, employability, management & entrepreneurship, and technological knowledge and skills. 2. A description, and any supporting documentation, of the follow-up activities, policies and procedures developed to ensure the integration of academic standards with relevant career/vocational technical programs occurs at Burncoat, Doherty, North and South. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 12 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and interviews indicated that although the district has articulation agreements, including registered apprenticeship programs, there is no district-wide process to ensure articulation agreements are annually reviewed and approved. (Legal Citation: Perkins Section 134; Vocational Technical Education Regulations 603 CMR 4.03 (4))* | | | |
| **Narrative Description of Corrective Action:** Articulation agreements, including registered apprenticeship programs, will be reviewed annually. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann, Vocational Director; Albert Mercado, Guidance Liaison | | **Expected Date of Completion for Each Corrective Action Activity:**  June 30, 2016 | |
| **Evidence of Completion of the Corrective Action:** Copy of list of articulated agreements, including registered apprenticeship programs. | | | |
| **Description of Internal Monitoring Procedures:** The list of articulation agreements and registered apprenticeships will be reviewed by the Vocational Director and Guidance Liaison on an annual basis. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 12 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** The district’s response was insufficient indicating information on articulation agreements and registered apprenticeships will be reviewed annually, and the evidence for completion was stated to be a list of articulation agreements. This response does not describe the sequence of specific activities it will implement in order to remedy the identified noncompliance, nor does providing another list of articulation agreements serve as evidence of compliance to address the specific finding. | | | |
| **Department Order of Corrective Action:** The district will develop and implement a process that clearly reflects the sequence of specific activities to be implemented in order to remedy the identified noncompliance that there is currently no district wide process in place to ensure articulation agreements are annually reviewed and approved (beyond maintaining a list of articulation agreements). | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. A description of the process to be created and implemented to ensure that articulation agreements, once established, are reviewed and renewed annually. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 13 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and student records demonstrated that the non-discrimination statement on forms, agreements, flyers, and applications for the district’s cooperative education at Worcester Technical does not address gender identity as a protected category. (Legal Citation: Massachusetts Statute 2011, c. 199)* | | | |
| **Narrative Description of Corrective Action:** The District has a standard non-discrimination statement that is inclusive of all sub-groups and ensure its’ use on all WPS documents. We have added gender identity verbiage to agreements, flyers, and applications for Worcester Technical High School. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Bob Walton, Information Technology Officer; High School Principals; District Level Department Heads. | | **Expected Date of Completion for Each Corrective Action Activity:**  December, 2015 | |
| **Evidence of Completion of the Corrective Action:** Copies of WPS communications | | | |
| **Description of Internal Monitoring Procedures:** Principals and Department Heads will consistently review documents issued by their school staff. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 13 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**  Copies of relevant cooperative education forms, agreements, flyers, and applications that includes a revised nondiscrimination statement protecting students from discrimination in public schools on the basis of gender identity. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 14 | | | **Rating:** Partially implemented |
| **Department CPR Finding:** *A review of documents and student records revealed that forms, agreements, flyers, and applications for Worcester Technical’s non-cooperative education (unpaid) work-based learning program do not address gender identity as a protected category. (Legal Citation: Massachusetts Statute 2011, c. 199)* | | | |
| **Narrative Description of Corrective Action:** The application forms have been updated to include gender identity in the non-discrimination statement. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Bob Walton, Information Technology Officer; High School Principals; District Level Department Heads. | | **Expected Date of Completion for Each Corrective Action Activity:**  December, 2015 | |
| **Evidence of Completion of the Corrective Action:** Copies of WPS communications | | | |
| **Description of Internal Monitoring Procedures:** Principals and Department Heads will consistently review documents issued by their school staff. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 14 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**  Copies of relevant forms, agreements, flyers, and applications *for Worcester Technical’s non-cooperative education (unpaid) work-based learning program* that includes a revised nondiscrimination statement protecting students from discrimination in public schools on the basis of gender identity. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 18 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of teacher licensure revealed that two staff members working in Chapter-74 approved career/vocational technical education programs are not appropriately licensed or working under a current Department-issued waiver. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (5))* | | | |
| **Narrative Description of Corrective Action:** The two teachers identified in the review are Employee ID 6295 and Employee ID 13155. Both are employed at Worcester Technical High School. Employee 6295 holds professional licensure in Telecommunications and preliminary licensure in ISS&N. Employee 13155 is licensed as a Lead Teacher by the Office of Children and  Families and has been issued a waiver by the Department of Elementary and Secondary Education. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Mark Brophy, Interim Human Resources Manage; Kyle Brenner, Principal, Worcester Technical High School; Frank Mann, Vocational Director | | **Expected Date of Completion for Each Corrective Action Activity:**  Employee 6265 – Completed.  Employee 13155 – Completed. | |
| **Evidence of Completion of the Corrective Action:** Copy of Employee 6295's teaching license; copy of approved waiver for Employee 13155. Director of Human Resources will reapply for a subsequent waiver for Employee 13155. | | | |
| **Description of Internal Monitoring Procedures:** *The Staff Certification Details Report,* issued annually by the Human Resources Department, will be reviewed by the Vocational Director and Principal of Worcester Technical High School in order to ensure compliance with licensure requirements. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 18 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. Evidence (copies of current licenses/waivers) indicating all staff members working in Chapter-74 approved career/vocational technical education programs are appropriately licensed or working under a current Department-issued waiver. 2. A description of the district-wide process created and implemented *on an annual basis* to ensure staff working in Chapter-74 programs are appropriately licensed or working under a current Department-issued waiver. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | | |
| **Criterion & Topic:** CVTE 20 | | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and instructional facilities by the DESE CVTE safety specialist indicated that not all career/vocational technical education instructional facilities meet current occupational standards. The Office for Career/Vocational Technical Education will send the official Safety Survey Report, which includes details specific to each program, to Interim Superintendent Rodrigues under separate cover. (Legal Citations: 603 CMR 4.03 (3) (4) (7)(8))* | | | | |
| **Narrative Description of Corrective Action:** All safety citations are in the process of being corrected and will be reported through the official Safety Survey Report. | | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Jeffrey Martin, Director of Facilities; Frank Mann, Vocational Director; Kyle Brenner, Principal. | | | **Expected Date of Completion for Each Corrective Action Activity:**  January 1, 2016 | |
| **Evidence of Completion of the Corrective Action:** Checklist from building walkthrough with Facilities Manager | | | | |
| **Description of Internal Monitoring Procedures:** On-going, consistent walkthroughs by Facilities Manager. | | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | | |
| **Criterion:** CVTE 20 | | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | | |
| **Department Order of Corrective Action:** Not Applicable | | | | |
| **Required Elements of Progress Report(s):** Provide a status report on the district’s efforts to complete the requirements set forth in the official Safety Survey Report until all safety hazards have been mitigated. | | | | |
| **Progress Report Due Date(s):**  *Monthly reports to the OCVTE Safety Specialist until all safety issues have been mitigated.*  **Submit the status of remediation of safety issues, to be reported in the Corrective Active Plan Progress Report by April 15, 2016.** | | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 21 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and instructional facilities by the DESE CVTE safety specialist indicated that not all career/vocational technical education instructional equipment meet current occupational standards. The Office for Career/Vocational Technical Education will send the official Safety Survey Report, which includes details specific to each program, to Interim Superintendent Rodrigues under separate cover. (Legal Citation: 603 CMR 4.03 (3) (4) (7)(8))* | | | |
| **Narrative Description of Corrective Action:** All safety citations are in the process of being corrected and will be reported through the official Safety Survey Report. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Jeffrey Martin, Director of Facilities; Frank Mann, Vocational Director; Kyle Brenner, Principal, Worcester Technical H.S. | | **Expected Date of Completion for Each Corrective Action Activity:**  January 1, 2016 | |
| **Evidence of Completion of the Corrective Action:** Checklist of targeted walkthrough by Facilities Manager focusing on Career/Vocational Technical Education. | | | |
| **Description of Internal Monitoring Procedures:** Ongoing, consistent walkthroughs by Facilities Manager. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:**  CVTE 21 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):** Provide a status report on the district’s efforts to complete the requirements set forth in the official Safety Survey Report until all safety hazards have been mitigated. | | | |
| **Progress Report Due Date(s):**  *Monthly reports to the OCVTE Safety Specialist until all safety issues have been mitigated.*  **Submit the status of remediation of safety issues, to be reported in the Corrective Active Plan Progress Report due April 15, 2016.** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 22 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of documents and interviews revealed that each high school has an Instructional Leadership team that meets monthly and utilizes multiple data sources to develop accountability plans; however, the data reviewed does not include all of the Perkins Core Indicators. Document review and interviews also demonstrated that while technical teachers at Worcester Technical are provided with and use Perkins Act Core Indicator data to improve student outcomes, this data is not shared with the technical teachers at the other high schools. (Legal Citation: Perkins Section 113, Perkin 134 (b) (5), (7), (8))* | | | |
| **Narrative Description of Corrective Action:** The Vocational Director will meet with the High School Principals to review the Perkins Act Core Indicator data in order to improve student outcomes. These reports will highlight trends from the data reported in the FAUPL reports available online via CTE Reports Menu of the DESE website. This data will then be incorporated into each school’s accountability plan. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann, Vocational Director; High School Principals; High School Instructional Leadership Teams; Albert Ganem, Manager of Professional Learning | | **Expected Date of Completion for Each Corrective Action Activity:**  Sharing of data with Principals – October, 2016  Sharing of data by Principals with Instructional Leadership Teams – October, 2016  Incorporation into accountability plans – November, 2016 | |
| **Evidence of Completion of the Corrective Action:** Copies of the data shared with principals; meeting agendas; accountability plans. | | | |
| **Description of Internal Monitoring Procedures:** Review of school accountability plans by the Office of Professional Learning will ensure that the Perkins Core Indicators are utilized to support student outcomes. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 22 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** The district indicates Principals at each of the high schools reporting Perkins-funded programs will review the Perkins Core Indicator data. However, there was no indication that the technical teachers in the programs will also receive the Perkins Core Indicator data in order to improve programs and outcomes for students. | | | |
| **Department Order of Corrective Action:** The district will ensure that teachers in Perkins-funded program are provided with Perkins Core Indicator data, and that they will receive assistance in understanding the data so as to improve programs and outcomes for students. | | | |
| **Required Elements of Progress Report(s):**  **Submit the following:**   1. A copy of the teacher sign-off sheet evidencing that the teachers in Perkins-funded programs at all four high schools with Perkins programs have received the most recent Perkins Core Indicator Data (Year 8). 2. Additional information and supporting documentation indicting the assistance the teachers in Perkins-funded programs will receive to understand the data and how the data will be used. 3. A status report on the districts efforts to ensure that the Perkins Core Indicator data will be incorporated into each school’s accountability plan as of November 2016. | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 24 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of financial Perkins records submitted by the district and interviews indicated the following:*   * *The district paid for two staff members to attend 2015 conferences that are not approved expenditures in the FY15 grant.* * *A district-wide process does not yet exist to ensure property/inventory-control records are kept. The documentation must include a description of the property, a serial number or other identification number, source of property, who holds title, acquisition date, cost of the property, percentage of Federal participation in the cost of the property, location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.* * *The district changed the proportion of the wages paid out of Perkins funds for the Special Populations Coordinator (from 40% Perkins and 60% non-federal funding to 60% Perkins and 40% non-federal funding) without notifying the district’s liaison, a standard procedure for financial changes to grants. Budgetary shifts within a line item must be communicated to liaisons to ensure such changes are allowable under the Perkins Act.* * *A review of documents and interviews indicated that the district uses the school-based Director of Career/Vocational Technical Education, who exclusively serves Worcester Technical, also performing the duties of the Special Populations Coordinator, which is the position described in the approved Perkins grant. The district is using Perkins funds for activities that do not agree with the position authorized under the grant (the Special Populations Coordinator).*   *(Legal Citation: Education Department General Administrative Regulations (80.32[d][1]); Carl D. Perkins Career & Technical Education Improvement Act of 2006; Massachusetts Perkins IV Manual, 2006)* | | | |
| **Narrative Description of Corrective Action:**   1. Clarification is needed on this item, which appears to refer attendance at an MVA event as opposed to a MAVA event. It is unclear whether every expenditure charged to Perkins grant must be listed in the grant narrative e.g. each in-state professional development activity, each individual supply item, etc. 2. The District is exploring different bar-coding systems to ensure that appropriated property/inventory control records are kept. 3. The change in the time distribution occurred when the Special Populations Coordinator postion was filled on an interim basis. The interim position was limited in hours and was a less than full-time position. The percentage of time indicated was of a part-time position, which resulted in less being charged to the grant than the 40% budgeted to the full-time position. Since the interim position did not exist previously, and had never been paid with District funds, we do not believe that this is a supplant. 4. The position description and duties of the District Director of Career and Vocational Technical Education, which includes serving as Special Populations Coordinator, have been provided with our annual Perkins grant application and have not changed in recent years. The school-based CVTE duties incorporated into the position are and have consistently been charged to District funds. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Frank Mann, Vocational Director; Kyle Brenner, Principal, Worcester Technical H.S.; Gregg Bares, Manager of Grant Resources; Dr. Marco Rodrigues, Interim Superintendent | | **Expected Date of Completion for Each Corrective Action Activity:**   1. Appropriate action will take place based on clarification from DESE 2. Adoption of bar-coding system - August, 2016 3. Completed 4. Completed | |
| **Evidence of Completion of the Corrective Action:***(The district left this section blank)*  Copy of completed Perkins application | | | |
| **Description of Internal Monitoring Procedures:** Review of Perkins grant by a working group including the Vocational Director; Manager of Grant Resources; and the Interim Superintendent. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 24 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** In bullets 1, 3 and 4, the district is rebutting a finding, rather than identifying specific corrective action steps to be taken in order to address the findings. | | | |
| **Department Order of Corrective Action:**  For bulleted item #1: In its first Progress Report, the district will develop a process of notifying ESE/OCVTE of proposed activities that are not identified in the original, approved Perkins budget.  For bulleted item #2: In its first progress report, the district will provide time lines and progress reports on the status of the development and implementation of the district’s inventory control system.  For bulleted item #3: In its first progress report, the district will provide procedures to ensure that staff positions that supplant local funds are not paid for with Perkins funds.  For bulleted item #4:In its first progress report, the district will provide procedures to ensure that staff positions described in the local Perkins grant are paid for in accordance with the terms of the grant and that any changes to positions during the course of the year are communicated to and approved by the CVTE liaison.  Further, the district will begin to seek an alternate funding source for the Special Populations Coordinator position in FY17, as Perkins funding is not an appropriate use of funds for the position as implemented. | | | |
| **Required Elements of Progress Report(s): See Department Order of Corrective Actions.** | | | |
| **Progress Report Due Date(s): April 15, 2016** | | | |