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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: Abby Kelley Foster Charter Public (District)

CPR Onsite Year: 2014-2015

Program Area: Special Education

All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report dated 03/12/2015.

**Mandatory One-Year Compliance Date:** **03/11/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |

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

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| **Criterion & Topic:** SE 9 Timeline for determination of eligibility and provision of documentation to parent | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and staff interviews indicated that within forty-five (45) school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, the charter school does not always convene a Team meeting to determine whether the student is eligible for special education and provide to the parent either a proposed IEP and proposed placement or a written explanation of the finding of no eligibility. |
| **Description of Corrective Action:** The school will host a professional development session regarding IEP timelines and the requirement to hold a meeting within 45 school days. |
| **Title/Role(s) of Responsible Persons:**AnnMarie Little, Director of Special Education | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**Sign in sheetsStudent record review. |
| **Description of Internal Monitoring Procedures:** The special education director and special education assistant director will complete a record review, monitor student timelines, and conduct professional development sessions to ensure compliance. |
| 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:** 04/16/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Please provide a narrative description of new procedures with an internal oversight and tracking system that identifies the person(s) responsible for monitoring to ensure consistently convening IEP Team meetings within 45 school working days after receipt of parents' written consent to an initial evaluation or re-evaluation to determine student eligibility and either propose an IEP and placement or provide a written explanation of the finding of no eligibility. Submit evidence of appropriate special education staff training on 45 day timeline procedures, including memos, training agenda, attendance sheets with signatures/roles and copies of the materials presented to ESE by September 15, 2015. Subsequent to all corrective actions, please conduct a review of student records for eligibility timelines. Select a sample of student records from each school level(2 per level), with recent initial or reevaluation activity. Review the records to determine whether the 45 day timelines have been met. Indicate the number of records reviewed, the number found compliant, an explanation of the root cause(s) for any continued noncompliance and a description of additional corrective actions taken by the charter school to remedy any identified noncompliance with this criterion by December 11, 2015. \*Please note when conducting internal monitoring the charter school must maintain the following documentation and make it available to ESE upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):** 09/15/201512/11/2015 |

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

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| **Criterion & Topic:** SE 18B Determination of placement; provision of IEP to parent | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and staff interviews indicated that immediately following the development of the IEP, the charter school does not provide the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice. The practice of the charter school is to provide one complete IEP and two signature pages. |
| **Description of Corrective Action:** The school will host a professional development session with the special education staff to review the requirement that all parents must receive 2 copies of the proposed IEP and proposed placement. |
| **Title/Role(s) of Responsible Persons:**AnnMarie Little, Director of Special Education | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**Student record reviews |
| **Description of Internal Monitoring Procedures:** The Special Education Director and Assistant Director will monitor the IEP meetings to ensure parents receive 2 copies of the IEP through record reviews. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved **Status Date:** 04/16/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By June 15, 2015, submit a narrative description of the revised procedures related to providing parents with two (2) complete copies of the proposed IEP and proposed placement along with the required notice along with evidence of training relevant special education staff and include signed attendance sheet with name(s)/role(s) and name of presenter. Also submit the description of the internal oversight and tracking system and identify the person(s) responsible for the oversight, including the date of the system's implementation. By December 11, 2015, submit the results of an internal review of a sample of student records at all buildings (2 per level) conducted after the implementation of all corrective actions to ensure consistency and continued compliance for provision of two (2) complete copies of the IEP to parents. Indicate the number of records reviewed, the number found compliant, an explanation of the root cause(s) of any continued noncompliance and a description of additional corrective actions taken by the charter school to remedy any identified noncompliance with this criterion. \*Please note that when monitoring the charter school must maintain the following documentation and make it available to ESE upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and signature(s). |
| **Progress Report Due Date(s):** 06/15/201512/11/2015 |

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

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| **Criterion & Topic:** SE 55 Special education facilities and classrooms | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Onsite observations and staff interviews indicated that in Room 108 at the middle school, speech and language services are provided concurrently with occupational therapy and physical therapy and the spaces are separated by a free-standing divider leading to auditory and visual distractions. |
| **Description of Corrective Action:** The school administration in collaboration with the special education department, and related services providers will revise the middle school schedule to allow the related service providers to provide services to students at different times during the school day. |
| **Title/Role(s) of Responsible Persons:**AnnMarie Little, Director of Special Education | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**Middle School Schedules |
| **Description of Internal Monitoring Procedures:** The special education department will review middle school schedules to ensure there are no scheduling conflicts. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved **Status Date:** 04/16/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 15, 2015, submit a letter of assurance from the Head of School that related services are no longer provided concurrently at the middle school. Also submit copies of the middle school schedules for the speech-language pathologist, occupational therapist and physical therapist using Room 108 demonstrating elimination of concurrent services. |
| **Progress Report Due Date(s):** 09/15/2015 |

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

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| **Criterion & Topic:** CR 3 Access to a full range of education programs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the charter school does not include "homelessness" as a protected category regarding student access to a full range of education programs. |
| **Description of Corrective Action:** The school will update the school documentation to include Homelessness as a protected category regarding student access to a full range of education programs. |
| **Title/Role(s) of Responsible Persons:**AnnMarie Little, Director of Special Education | **Expected Date of Completion:**04/15/2015 |
| **Evidence of Completion of the Corrective Action:**Board of Trustee MinutesDocument Review |
| **Description of Internal Monitoring Procedures:** The school administration will annually review school documents to ensure compliance with Massachusetts laws and regulations. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved **Status Date:** 04/16/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By June 15, 2015, provide to ESE the agenda, meeting minutes and a copy of the updated Board of Trustee Policy for the addition of "homelessness" as a protected category regarding student access to a full range of educational programs. By September 15, 2015, submit evidence of dissemination to the school community on the updated Board of Trustee Policy regarding the added protected category of "homelessness" regarding student access to a full range of educational programs. Include samples of documents and copies of the materials presented. |
| **Progress Report Due Date(s):** 06/15/201509/15/2015 |

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

District: Abby Kelley Foster Charter Public School

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Kayla Harshaw, ELL Coordinator

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: May 5, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 18 Records of ELL Students** | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of student records and staff interviews indicated that a log of access is not always present in ELL student files creating a lack of protection of confidentiality when accessing student records.* |
| **Narrative Description of Corrective Action:** Abby Kelley Foster Charter Public School acknowledges the finding of “Partially Implemented” for Criterion & Topic: ELE 18 Records of LEP Students. In an effort to correct this problem, the ELL Coordinator has created a record of access log to ensure protection of confidentiality when accessing student records. The record of access log requires staff members to write their name, date, job title, purpose for reviewing the file and sign their initials each time they are accessing the LEP student files.In addition to a record of access log, student files will continue to be stored in a locked and secured place in the main office of each building at Abby Kelley Foster Charter Public School. ELL staff members and administrators will continue to be the sole staff members with access to the LEP student files as needed. ELL staff members and administrators will be trained during a weekly team meeting on how to properly complete the record of access log to ensure protection of confidentiality when accessing the LEP student files.  |
| **Title/Role of Person(s) Responsible for Implementation:** Kayla Harshaw, ELL Coordinator | **Expected Date of Completion for Each Corrective Action Activity:** September 1, 2015 |
| **Evidence of Completion of the Corrective Action:** * training for staff members to use the record of access log in team meeting minutes
* record of access log template
* samples of record of access logs from LEP student files

Evidence can and will be provided upon request. |
| **Description of Internal Monitoring Procedures:** Abby Kelley Foster Charter Public School is committed to an ongoing monitoring process to ensure the corrective action is enforced and in place. The ELL Coordinator will complete random reviews of LEP student files to ensure the record of access logs are being properly used and maintained. The ELL Coordinator will also provide follow up training sessions as needed to ensure that staff members are prepared to use the record of access log appropriately. Feedback will be provided by staff members as needed to ensure the record of access logs are being used to protect confidentiality of LEP student files. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 18 Records of ELL Students** | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:**       |
| **Department Order of Corrective Action:** Please provide evidence of staff training on the requirements for confidentiality of student records, including the need to maintain a log of access for third-party reviewers. Please include the agenda, training materials and sign-in sheets for training provided by **September 15, 2015.** |
| **Required Elements of Progress Report(s):** Submit the results of an administrative review of a sample of student records from all levels for evidence of logs of access. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the charter school to address any identified noncompliance. Please submit this to ESE by November 6, 2015. **\*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the ESE upon request: a) list of student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, with their role(s) and signature(s).** |
| **Progress Report Due Date(s): November 6, 2015** |