|  |
| --- |
| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION****Program Quality Assurance Services** |

##### COORDINATED PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Roxbury Preparatory Charter (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 09/04/2015.

**Mandatory One-Year Compliance Date:** **09/04/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 1 | Assessments are appropriately selected and interpreted for students referred for evaluation | Partially Implemented |
| SE 3 | Special requirements for determination of specific learning disability | Partially Implemented |
| SE 10 | End of school year evaluations | Not Implemented |
| SE 15 | Outreach by the School District (Student Find) | Partially Implemented |
| SE 21 | School day and school year requirements | 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 32 | Parent advisory council for special education | Partially Implemented |
| SE 44 | Procedure for recording suspensions | Partially Implemented |
| SE 46 | Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | Partially Implemented |
| SE 47 | Procedural requirements applied to students not yet determined to be eligible for special education | Not Implemented |
| SE 54 | Professional development | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| SE 56 | Special education programs and services are evaluated | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 11A | Designation of coordinator(s); grievance procedures | Not Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 18 | Responsibilities of the school principal | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 1 Assessments are appropriately selected and interpreted for students referred for evaluation | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and interviews indicated that for students who are English language learners (ELLs), evaluations are not provided and administered in the language and form most likely to yield accurate information on what the student knows and can do academically, developmentally, and functionally. Record review and interviews demonstrated that the charter school does not have procedures to determine a student's dominant language; additionally, the charter school does not convey information about the student's language needs to contracted evaluators so they can conduct testing in the student's native language or seek alternative methods to assess the student. |
| **Description of Corrective Action:** Roxbury Prep determines the English Language Development needs of students in two ways. First, once the Director of Special Projects claims students through the state database (SIMS), student ACCESS scores are shared with the Individual Needs Team. This information is analyzed alongside student performance data (i.e. MCAS, diagnostic data, grades reports, etc.) by the English Language Education team to determine student English Language Development levels. These Levels are shared with the Individual Needs Team and all teachers. Second, Roxbury Prep's enrollment paperwork includes a variety of Home Language Survey Questions to determine the student and family's primary language. The results of Home Language Survey questions are screened by the Director of Special Projects for the Network. The Director of Special Projects shares the names and survey results of students whose parents indicated a language other than English in any portion of the Home Language Survey with the Individual Needs Team. These students are screened via the WIDA Access Placement Test (W-APT) to determine English Language Proficiency. Results of the W-APT testing are analyzed in conjunction with student academic performance data by the English Language Education team to determine English Language Development Level of each student and shared with the Special Education Department. When Special Education evaluations are requested, student English Language Levels are shared with evaluators as a part of the data profile for the student. If a student's ELL Level is a 1 or 2, the evaluator immediately arranges for a bilingual evaluator. If a student's ELL Level is a 3 through 5, the evaluator arranges for a primary language screen to determine the most appropriate evaluation language. This updated procedure will be rolled out to Individual Needs Coordinators and Evaluation Team Members at a collaborative meeting in Fall 2015. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**Meeting agenda and attendance for procedural update. Evidence of language screening prior to evaluation procedures for all ELL students referred for evaluation. |
| **Description of Internal Monitoring Procedures:** Network Director of Individual Needs and Middle School Director of Individual Needs are copied on every evaluation request and review it for accurate procedures. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 1 Assessments are appropriately selected and interpreted for students referred for evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 20, 2015, submit the district's method of communication for conveying information about the English language needs for an ELL student who has been referred for Special Education evaluation. By November 20, 2015, for student record identified by the Department, provide evidence of meeting and evidence of consideration of the student's ELL status for assessment purposes, as well as evidence of completion of consented-to Educational Assessments A and B based upon Student Record Worksheet. By December 18, 2015 provide evidence of training in regards to the newly developed system for special education evaluation/re-evaluation of ELL students to Individual Needs Coordinators and Evaluation Team Members. This documentation will include signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials.By March 16, 2016, conduct an internal review of approximately 10 records for ELL students with initial or re-evaluations conducted following the implementation of all corrective actions. Provide a detailed narrative summary of this internal review, including the number of records reviewed and the number with appropriate gathering of relevant information, such as consideration of ELL needs, documentation of use of HLS, ELL assessments, supplemental data used to determine the language needs of an ELL student referred for Special Education and the conveyance of this information to the evaluators. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. \*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 11/20/201512/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 3 Special requirements for determination of specific learning disability | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records demonstrated that when a student is suspected of having a specific learning disability, not all IEP Team members sign the mandated Specific Learning Disability Team Determination of Eligibility form. |
| **Description of Corrective Action:** The School District held a professional development session targeting this objective during the 2014-15 school year. The District will hold another Process and Procedure meeting to review policies around the Specific Learning Disability requirement in Fall 2015. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**Results of internal audit will show 100% compliant completion of Specific Learning Disability forms in all applicable student files. Additionally, agenda and attendance sheets from professional development sessions will be available for review. |
| **Description of Internal Monitoring Procedures:** The Network Director of Individual Needs and Middle School Director of Individual Needs will conduct file audits at least four times per year. During each of these audits, at least one folder for a student qualifying for Special Education as a student with a Specific Learning Disability will be reviewed. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 3 Special requirements for determination of specific learning disability | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Although the district indicated that training has been conducted and that internal file reviews will be completed four times per year, the reviewing of at minimum one SLD student record does not allow the charter school a comprehensive insight into the practice of determining eligibility for an SLD student. Since the district has three separate locations with several different individuals authorized to chair the eligibility process, the internal review must sample from all 3 sites. |
| **Department Order of Corrective Action:**Submit evidence of training on the revised policy and procedures regarding the SLD eligibility determination process. Submit a revised plan to periodically review files to ensure compliance with this criteria. |
| **Required Elements of Progress Report(s):** Prior to developing the district's corrective actions, review the Department’s guidance on SLD eligibility determination at http://www.doe.mass.edu/sped/iep/sld/default.html. By November 20, 2015, and using the Department's guidance as the basis for its revision, submit the district's revised procedures to ensure that IEP Teams appropriately document the eligibility determination for students suspected of SLD, both for initials and re-evaluations. By December 18, 2016 submit evidence of special education staff training on these procedures. This documentation will include signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials.By March 16, 2016, conduct an internal review of approximately four records for students suspected of SLD, with initial or re-evaluations conducted following the implementation of all corrective actions, and sampling from the three different campuses. Provide a detailed narrative summary of this internal review, including the number of records reviewed and the number where IEP Teams completed all elements of the SLD eligibility determination process. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. \*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 11/20/201512/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 10 End of school year evaluations | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of student records and interviews indicated that the charter school does not conduct evaluations when consent is received between 30 and 45 working days before the end of the school year. |
| **Description of Corrective Action:** The School District updated its policies and procedures to align with the requirement in this area. All evaluations received between 30 and 45 working days before the end of the 2014-15 school year were completed and meetings were held in coordination with this policy. Language around this policy will be updated in the Individual Needs Procedural Guide for the 2015-16 school year. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs | **Expected Date of Completion:**04/05/2016 |
| **Evidence of Completion of the Corrective Action:**Language in Individual Needs Procedural Guide will reflect this policy. All evaluation requests received within 30 and 45 working days before the end of the 2015-16 school year will meet the procedural criteria. |
| **Description of Internal Monitoring Procedures:** The Directors of Individual Needs will review this procedure in April 2016 to ensure that all Individual Needs Coordinators are clear on this procedure. In addition, throughout the year, all evaluation requests are reviewed by the Director of Individual Needs and Middle School Director of Individual Needs, so dates and timelines are continuously reviewed for compliance purposes. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 10 End of school year evaluations | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2015, submit the charter school's updated policies and procedures as indicated in the charter school's Individual Needs Procedural Guide for evaluations when consent is received between 30 and 45 working days before the end of the school year.By December 18, 2015, submit evidence of Individual Needs Coordinator training on these procedures. This documentation will include signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials.The district will submit the results of an internal review of records for evaluations requests received between 30 and 45 working days before the end of the 2015-2016 school year. |
| **Progress Report Due Date(s):** 12/18/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 15 Outreach by the School District (Student Find) | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents demonstrated that the charter school has not established a method of outreach to parents or guardians to inform them of the process to refer students for a special education evaluation. |
| **Description of Corrective Action:** The School District will update its Handbook for the 2016-2017 school year to include language about the Special Education referral process so that parents are informed. For the 2015-16 school year, the School District will include guidance and referral process information in a "Handbook Update" to be sent home to all students by March 2016. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs, Director of Special Projects | **Expected Date of Completion:**04/05/2016 |
| **Evidence of Completion of the Corrective Action:**The Director of Individual Needs and Director of Special Projects will mail home the "Handbook Update" to all Roxbury Prep families by March 2016. The Student Handbook for school year 2016-17 will include appropriate language about the student referral process. |
| **Description of Internal Monitoring Procedures:** The "Handbook Update" will be mailed home by March 2016. The Roxbury Prep Student Handbook will be updated for the 2016-17 school year. Parents will sign an acknowledgement form to indicate their understanding of each section of the Handbook, Special Education referral process included. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 15 Outreach by the School District (Student Find) | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The charter school's proposal to include language for Special Education referral process to parents for the 2016-2017 Handbook is approved, as is the use of the Handbook Updated to currently enrolled students. However, the dissemination of this information to parents in March 2016 is not acceptable. Additionally, the district does not address training for staff members in situations in which a parent or guardian may refer a student for special education evaluation. |
| **Department Order of Corrective Action:**Submit evidence that the district's method of outreach to parents or guardians to inform them of the process to refer students for a special education evaluation has been disseminated. This may take the form of a link form the district's website or an addendum to the student/family handbook. |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence that the district has disseminated its method of outreach to ensure that parents or guardians are informed of how to request an eligibility determination for special education. This may include an actual handbook addendum plus description of dissemination or a webpage link to the outreach method. |
| **Progress Report Due Date(s):** 11/20/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 21 School day and school year requirements | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and interviews indicated that although IEP Teams determine a student's need for an educational program that is longer than the regular school year and document why the longer program is necessary, special education and/or related services for the extended school year are not specified in the IEP. |
| **Description of Corrective Action:** The School District will adapt policies and procedures for Extended School Year. The School District will incorporate the Extended School Year services into student IEP Service Grids. Roxbury Prep will update the Individual Needs Procedural Guide to reflect this change, and hold a training for Individual Needs Coordinators to explain and practice the new procedure. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**Student IEPs will have Extended School Year services outlined in the C Grid. This policy, as well as Extended School Year programming guidelines will be updated in the Individual Needs Procedural Guide. |
| **Description of Internal Monitoring Procedures:** The Network Director of Individual Needs and Middle School Director of Individual Needs will conduct file audits at least four times per year. During each of these audits, at least one folder for a student with Extended School Year will be reviewed. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 21 School day and school year requirements | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2015, submit the charter school's revised procedures in the charter school's Individual Needs Procedural Guide to ensure that when IEP Teams determine a student's need for an educational program that is longer than the regular school year, that the district documents why the longer program is necessary, as well as specifying the special education and/or related services for the extended school year in the IEP. By March 16, 2016 submit evidence of special education staff training on these procedures. This documentation will include signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials. PLEASE NOTE: the district will submit examples of why an extended school year or program is necessary.By March 16, 2015, conduct an internal review of approximately 10 records with IEP development meetings convened following the implementation of all corrective actions. Provide a detailed narrative summary of this internal review, including the number of records reviewed and the number of records where IEP Teams appropriately explain why the student is in need of an extended school year and the specification of special education and/or related services in the service delivery grid. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. \*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 12/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **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 demonstrated that the charter school's Notice of Proposed School District Action (N1), which summarizes the Team's decisions and considerations, are not consistently documented in the record. Additionally, when this notice is present, the following federally required information is not consistently included: rejected options and the reason for the rejection, and evaluation procedure, test, record, or reports the agency used as a basis for the proposed or refused action. |
| **Description of Corrective Action:** The School District will adapt Notice of Proposed School District Action (N1) procedures to include more detail about options considered and rejected by IEP Team Members. In addition, the N1 procedures will be updated to include the evaluation procedure, test, record, or reports used as a basis for the proposed action. Roxbury Prep will update the Individual Needs Procedural Guide to reflect this change, and hold a training for Individual Needs Coordinators to explain and practice the new procedure. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**The Individual Needs Procedural Guide will reflect the details of this procedure. In addition, the Director of Individual Needs and Middle School Director of Individual Needs’ audit results will reflect updated N1 procedures including options considered and rejected and evaluation procedures, tests, records, or reports used as a basis of the proposed action. |
| **Description of Internal Monitoring Procedures:** The Network Director of Individual Needs and Middle School Director of Individual Needs will conduct file audits at least four times per year. During each of these audits, the Director of Individual Needs and Middle School Director of Individual Needs will review N1 documentation. |
| 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:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 20, 2015, submit the charter school's revised procedures from the charter school's Individual Needs Procedural Guide regarding completion Notice of Proposed School District Action (N1) in its entirety. By December 18, 2015 submit evidence of special education staff training on these procedures. This documentation will include signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials. PLEASE NOTE: the district will submit examples of completed N1s used in training for the Department's review.By March 16, 2016, conduct an internal review of approximately 10 records with IEP development meetings convened following the implementation of all corrective actions. Provide a detailed narrative summary of this internal review, including the number of records reviewed and the number of records for thorough completion of N1s. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. \*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 11/20/201512/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 26 Parent participation in meetings | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records, interviews, and parent surveys indicated that the charter school does not use other methods to ensure parent participation in IEP Team meetings, including individual or conference telephone calls or video conferencing. |
| **Description of Corrective Action:** The School District held a professional development session targeting this objective in August 2015. The procedure for the coming school year will include documenting the various options for methods of parent participation in IEP and Evaluation meetings. This updated procedure will be reflected in Individual Needs Procedural Guide for the 2015-16 school year. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**The Individual Needs Procedural Guide will be updated to reflect this procedure. In addition, Director of Individual Needs and Middle School Director of Individual Needs audit results of IEP communication logs will reflect compliance in this area. |
| **Description of Internal Monitoring Procedures:** The Network Director of Individual Needs and Middle School Director of Individual Needs will conduct file audits at least four times per year. During each of these audits, the Director of Individual Needs and Middle School Director of Individual Needs will pull communication logs to monitor this area of compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 26 Parent participation in meetings | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 20, 2015, submit the charter school's revised procedures on documenting in the student record provision of alternative methods for participation in IEP and evaluation meetings to parents. By December 18, 2015, provide evidence of special education staff training on these procedures. This documentation will include signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials. By March 16, 2016, conduct an internal review of approximately 10 records for provision of information to parents regarding alternative methods of participation in IEP and evaluation meetings which were convened following the implementation of all corrective actions. Provide a detailed narrative summary of this internal review, including the number of records reviewed and the number of records for thorough completion of N1s. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. \*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 12/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **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 interviews indicated that the charter school does not consistently provide translated documents or interpreters who are familiar with special education programs and services for families whose primary language of the home is other than English. |
| **Description of Corrective Action:** In the School District's Enrollment procedures, parents are asked to indicate their preference for document translation. This information is documented in the Network Student Data collection system (PowerSchool) as well as the online IEP database. If parents have indicated their preference for translated documents, all communication will be translated into their preferred language. Similarly, if a parent indicates translation preference on the Home Language Survey, all oral communication will be translated by Voiance Translation Services, or an in-person translator as available. For the 2015-16 school year, the Special Education Team will review Home Language Surveys of students in Special Education to ensure the online IEP system reflects the parents' preference. In future school years, this process will occur in July and August planning time as part of the enrollment process. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs, Director of Special Projects | **Expected Date of Completion:**04/05/2016 |
| **Evidence of Completion of the Corrective Action:**The Individual Needs Procedural Guide will reflect this policy. In addition, online IEP management system data will reflect PowerSchool data in reference to parent preferred language of translation. |
| **Description of Internal Monitoring Procedures:** The Network Director of Individual Needs and Middle School Director of Individual Needs will conduct file audits at least four times per year. During each of these audits, the Director of Individual Needs and Middle School Director of Individual Needs will pull IEP management and PowerSchool data to compare language translation preference, and evidence of translated documents as necessary. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 29 Communications are in English and primary language of home | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 20, 2015, for student records identified by the Department, provide evidence of translated documents for student identified on Student Record Worksheet.By November 20, 2015, submit the charter school's revised policy in the charter school's Individual Needs Procedural Guide for identifying when translated documents or interpreters who are familiar with special education programs and services for families whose primary language of the home is other than English is needed for special education purposes. By December 18, 2015 provide evidence of special education staff training on these procedures. This documentation will include signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials. PLEASE NOTE: the district will submit examples of completed N1s used in training for the Department's review.By March 16, 2015, conduct an internal review of approximately 10 records with IEP development meetings convened following the implementation of all corrective actions. Provide a detailed narrative summary of this internal review, including the number of records reviewed and the number of records for thorough completion of N1s. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. \*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 11/20/201512/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 32 Parent advisory council for special education | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and parent interviews indicated that the charter school does not have an active Parent Advisory Council. |
| **Description of Corrective Action:** The School District has proposed four meeting dates for the PAC for the 2015-2016 school year including 10/14, 12/08, 3/1, 5/12. Dates and times are varied and translators will be provided to allow for more parent involvement. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**PAC Agendas and signed attendance sheets will serve as evidence of completion. |
| **Description of Internal Monitoring Procedures:** These meetings will be scheduled in the summer planning months each school year. The Network-wide school calendar will reflect these dates, and the Network Director of Individual Needs and Middle School Director of Individual Needs will initiate planning procedures with Network and Campus staff. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The charter school's proposal does not describe actively engaging or recruiting parents to ensure that parents of students with special needs are made aware of the special education Parent Advisory Council. |
| **Department Order of Corrective Action:**Please review the Department's guidance on developing a Parent Advisory Council for special education parents at http://www.doe.mass.edu/sped/pac/guidelines.pdf. District will submit a plan of action to outreach to parents in regards to the Special Education Parent Advisory Committee as well as evidence that an active Special Education Parent Advisory Committee has been established beginning the 2015-2016 SY. |
| **Required Elements of Progress Report(s):** By November 20, 2015, submit a plan of action to outreach to parents in regards to the Special Education Parent Advisory Committee, as well as evidence of outreach implementation.By December 18, 2015, provide evidence, including agenda, name of presenter, and signed attendance sheet, that the school has held the annual workshop within the school on the rights of students and their parents and guardians under the state and federal special education laws.By March 16, 2016 provide evidence of active Special Education Parent Advisory Committee through an establishes by-laws, elected officers, signed meeting attendance sheet, agendas, name of presenters, etc. |
| **Progress Report Due Date(s):** 11/20/201512/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 44 Procedure for recording suspensions | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records, documents and interviews indicated that the charter school does not have a procedure to record the number and duration of suspensions from any part of a student's program. |
| **Description of Corrective Action:** The School District has met with Network administrators to streamline school-wide procedures around suspensions and tracking systems. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs, Network Administrators | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**Consistent and comprehensive records of student suspensions, including number and duration. |
| **Description of Internal Monitoring Procedures:** Monitored quarterly with meetings of network and district staff. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 44 Procedure for recording suspensions | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The generalized description about streamlining school-wide procedures around suspensions and tracking systems is not specific enough as to what the procedures and tracking system will incorporate. |
| **Department Order of Corrective Action:**District will submit a detailed description regarding the procedures for suspension and the method of tracking as well as evidence that the system is being utilized. This description must include all categories of student removal, including in-school suspensions, send-outs, send-homes, etc., as described in the district's code of conduct. In addition, this system must track the length of time for each removal and the class/subject the student is removed from. |
| **Required Elements of Progress Report(s):** By November 20, 2015, as per the Department order of corrective action, submit a detailed description of how the charter school will collect suspension and removal data for students with disabilities (and other students, including general education students), including coding categories of removal, indicating classes removed from, duration of removal, report development, etc.By December 18, 2015, submit evidence of training regarding the charter school's procedures for administrative staff, general education staff, and special education staff. This documentation will include the procedures, signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials.By March 16, 2016, submit suspension information for all currently identified special education students using data that provides details regarding the number and duration of suspensions from any part of the student's program, including in-school suspension, out of school suspension, non-admittance to class due to disciplinary offenses as addressed in the charter school's handbook (e.g. dress code violations). |
| **Progress Report Due Date(s):** 11/20/201512/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that when students with disabilities are suspended beyond 10 consecutive days or for a series of suspensions that are shorter than 10 consecutive days but constitute a pattern, the charter school does not consistently conduct a manifestation determination within 10 days of the decision to suspend to review all relevant information in the student's file, including the IEP, any teacher observations, and any relevant information from the parents, to determine whether the behavior was caused by or had a direct and substantial relationship to the disability or was the direct result of the district's failure to implement the IEP. Document review and interviews also indicated that the charter school does not have procedures for placing students in Interim Alternative Educational Settings (IAES). In addition, the charter school's policies indicated that while a student with disabilities may be lawfully expelled, they do not articulate the school's continued obligation to provide educational services, although in another setting. |
| **Description of Corrective Action:** The School District has modified its Manifestation Determination Review Procedures in the Individual Needs Procedural Guide for the 2015-16 school year. Deans, Principals and Individual Needs Coordinators will meet with Director of Individual Needs and Middle School Director of Individual Needs to review and norm procedures across campuses. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs, Network Staff | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**All Manifestation Determination Review meetings will be held within 10 days of the decision to suspend. Network Director of Individual Needs and Middle School Director of Individual Needs are invited and attend all Manifestation Determination Meetings in order to monitor compliance in this area. |
| **Description of Internal Monitoring Procedures:** Network Staff will monitor suspension numbers monthly. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Although the charter school proposes to modify the Manifestation Determination Review Procedures in the Individual Needs Procedural Guide for the 2015-2015 SY, and to provide the information to the Deans, Principals, and Individual needs Coordinators, it does not the procedures for placing students in Interim Alternative Educational Settings (IAES) or proposes changes to the charter school's policies in regards to provision of educational services for students with disabilities in another setting. |
| **Department Order of Corrective Action:**Submit an updated version of the charter school's procedures for conducting a Manifestation Determination, for placing students in IAES, and policies for providing educational services for students with disabilities in another setting. |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence of updated procedures for Manifestation Determinations in the Individual Needs Procedural Guide. Submit evidence of procedures for placing students in IAES, as well as proposing a change to the charter school's policies in regards to provision of educational services for student with disabilities in another setting. By December 18, 2015 provide evidence of training to each Individual Needs Coordinator, Dean of Students and Principals for each campus. This documentation will include signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials. |
| **Progress Report Due Date(s):** 11/20/201512/18/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 47 Procedural requirements applied to students not yet determined to be eligible for special education | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents and interviews indicated that the charter school does not have procedures for the discipline of students not yet determined to be eligible for special education. |
| **Description of Corrective Action:** Roxbury Prep has modified the Disciplinary Procedures in the Individual Needs Procedural Guide for the 2015-16 school year. Additionally, the Roxbury Prep Student Handbook will reflect this area in the 2016-17 school year. Deans, Principals and Individual Needs Coordinators will meet with Director of Individual Needs and Middle School Director of Individual Needs to review and norm procedures across campuses. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs, Director of Special Projects | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**Agendas and attendance sheets will serve as evidence of professional development to learn and norm procedures. Student discipline data and documentation of Manifestation Determination Review meetings will also serve as evidence of implementation of this criterion. |
| **Description of Internal Monitoring Procedures:** Network Staff will monitor suspension numbers monthly. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 47 Procedural requirements applied to students not yet determined to be eligible for special education | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence of procedures for the discipline of students not yet determined to be eligible for special education in the Individual Needs Procedural Guide for the 2015-16 school year. By December 18, 2015 provide evidence of training to deans, principals, and Individual Needs Coordinators on the district's updated procedure. Additionally, provide evidence of dissemination of information regarding procedures for the discipline of students not yet determined to be eligible for special education to parents through a handbook newsletter update, weblink and for employees through e-mail, meeting agenda, etc. |
| **Progress Report Due Date(s):** 11/20/201512/18/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 54 Professional development | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and interviews indicated that contracted related service providers and new employees hired after the start of the school year do not receive training on special education state and federal laws and regulations or local special education policies and procedures. |
| **Description of Corrective Action:** The School District has alerted the Associate Director of Operations, Boston, regarding the updated policy. All new staff will be trained within 30 days of hire. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs, Associate Director of Operations, Boston | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**Agendas and attendance sheets will serve as evidence of training sessions. |
| **Description of Internal Monitoring Procedures:** Network staff will meet weekly with District staff. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 54 Professional development | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2015 submit evidence of training on state and federal special education requirements and related local special education policies and procedures for contracted related service providers. Additionally, submit evidence of training for new employees hired after the start of the school year indicating that state and federal requirements are included in this training. |
| **Progress Report Due Date(s):** 12/18/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 55 Special education facilities and classrooms | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A facility review of Roxbury Preparatory Charter School's Mission Hill campus demonstrated that the room where students with disabilities receive specialized instruction is labeled the "Individual Needs" classroom. At the charter school's Lucy Stone campus, the substantially separate program's instructional area is only accessible by walking between students seated in the in-school suspension area, located outside the Dean of Discipline's open office. This in-school suspension area and the instructional space are divided by a bookcase and partition, thereby creating auditory distractions and confidentiality issues for students. Finally, all special education programs are clustered in the charter school's basement, which does not maximize the inclusion of such students into the life of the school. |
| **Description of Corrective Action:** The School District will meet with Operations Directors at each campus to review Individual Needs facilities and classrooms. School-based plans will be developed and implemented by 1/4/2016. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs, Campus Directors of Operations | **Expected Date of Completion:**04/05/2016 |
| **Evidence of Completion of the Corrective Action:**Results of walk-throughs show evidence of compliance in this area. |
| **Description of Internal Monitoring Procedures:** The Network Individual Needs staff will schedule twice-yearly walk-throughs of Special Education and English Language Education facilities to ensure compliance in this area. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2015 provide floor plans for the Lucy Stone campus, indicating the relocation of the substantially separate and special education programs, along with written narrative of description to remedy the non-compliance at the Mission Hill campus. The Department will conduct an on-site to verify the location of services at Lucy Stone before March 16, 2016. |
| **Progress Report Due Date(s):** 12/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 56 Special education programs and services are evaluated | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and interviews indicated that the special education programs and services are not evaluated regularly. |
| **Description of Corrective Action:** By October 31, 2015 the Network Director of Individual Needs and the Middle School Director of Individual Needs will create a self-assessment based on goals and achievements from the 2014-2015 school year. The assessment will be re-evaluated in June, 2016 and every year annually moving forward. |
| **Title/Role(s) of Responsible Persons:**Director of Individual Needs | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**Self-assessments will be archived for review each year to analyze trends. Self-assessments will be updated annually. |
| **Description of Internal Monitoring Procedures:** The Individual Needs Procedural Guide will outline the self-assessment process, and the Director of Individual Needs and Middle School Director of Individual Needs will complete this process each year. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 56 Special education programs and services are evaluated | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Although the charter school indicates that is will created a self-assessment based upon goals and achievements from the 2014-2015 SY, it does not indicate the individuals who will be participating in the self-assessment. Additionally, the district does not delineate if the self-assessment is based upon feedback on programming or an analysis of data. |
| **Department Order of Corrective Action:**Submit evidence of self-assessment and the method of collecting information on Special Education programs and services, as well as information on how the district plans on using the information in order to make changes to programs and services. |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence of a self-assessment tool and a proposal for collecting information regarding this criterion. Include special tasks assigned to individuals, a timeline for data gathering and analysis, and timeline for dissemination of findings.By March 16, 2016 submit evidence of the implementation of the self-assessment and any changes made to the charter school's special education programs and services as a result of the self-assessment. |
| **Progress Report Due Date(s):** 11/20/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 3 Access to a full range of education programs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Although the charter school has a policy that ensures equal access to a full range of education programs for all students, regardless of race, color, sex, gender identity, religion, national origin, sexual orientation, or disability, this policy does not address the protected category of homelessness. |
| **Description of Corrective Action:** Update Handbook and Application Language; Submit to the Board of Trustees for review and approval. |
| **Title/Role(s) of Responsible Persons:**Director of Special Projects | **Expected Date of Completion:**04/05/2016 |
| **Evidence of Completion of the Corrective Action:**Submit updated applications and handbooks. |
| **Description of Internal Monitoring Procedures:** Director of Special Projects will submit the Handbook and Application to legal counsel prior to board approval on an annual basis. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence of updated language regarding access to full range of education programs has been submitted to the Board of Trustees (e.g. agenda, minutes, etc). By December 18, 2015 provide evidence of dissemination of updated information regarding this criterion to students, parents, and employees. Information may be disseminated for parents through a handbook newsletter update, webpage link and for employees through e-mail, meeting agenda, etc. |
| **Progress Report Due Date(s):** 11/20/201512/18/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 10A Student handbooks and codes of conduct | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that the charter school's code of conduct does not include a procedure for accepting, investigating and resolving complaints alleging discrimination or harassment or disciplinary measures that the charter school may impose if it determines that harassment or discrimination has occurred. |
| **Description of Corrective Action:** Update Handbook Language; Submit to the Board of Trustees for review and approval. |
| **Title/Role(s) of Responsible Persons:**Director of Special Projects | **Expected Date of Completion:**04/05/2016 |
| **Evidence of Completion of the Corrective Action:**Submit updated application. |
| **Description of Internal Monitoring Procedures:** Director of Special Projects will submit the Handbook to legal counsel prior to board approval on an annual basis. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Although the charter school proposes to update the staff and student handbooks, it does not actually address a procedure for accepting, investigating and resolving complaints alleging discrimination or harassment or disciplinary measures that the charter school may impose if it determines that harassment or discrimination has occurred, and it does not provide a timeline or a method of dissemination of this information to students, parents, and employees. |
| **Department Order of Corrective Action:**The charter school will submit updated procedure for this criterion prior to updating student and staff handbooks, as well as evidence of submission to the Board of Trustees for review and approval. The charter school will also submit evidence of dissemination of the updated information to students, parents, and employees. |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence of updated procedures for this criterion, as well as evidence of submission to the Board of Trustees for review and approval. By December 18, 2015 provide evidence of dissemination of the procedure. Information may be disseminated for parents through a handbook newsletter update, weblink, etc. and for employees through e-mail, meeting agenda, etc. |
| **Progress Report Due Date(s):** 11/20/201512/18/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 10B Bullying Intervention and Prevention | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Although the charter school has a Bullying Prevention and Intervention Plan on its website, the Plan does not contain amendments as defined in M.G.L. c. 71, 370 wherein a member of the school staff may be identified as an "aggressor" or "perpetrator" in a bullying report. Additionally, the charter school's teacher and student handbooks do not address the district's Bullying Intervention and Prevention Plan or the updated provisions. |
| **Description of Corrective Action:** Update Bullying Plan, Staff Handbook and Student Handbook; Submit to the Board of Trustees for review and approval. |
| **Title/Role(s) of Responsible Persons:**Director of Special Projects | **Expected Date of Completion:**04/05/2016 |
| **Evidence of Completion of the Corrective Action:**Submit updated Bullying Plan, Staff Handbook and Student Handbook. |
| **Description of Internal Monitoring Procedures:** Director of Special Projects will submit the Bullying Plan, Staff Handbook and Student Handbook to legal counsel prior to board approval on an annual basis. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/20/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Although the charter school proposes to update the staff and student handbooks regarding Bullying Intervention and Prevention plan, it does not actually address specific information that will be updated and does not provide a timeline or a method of dissemination of this information to students, parents, and employees. |
| **Department Order of Corrective Action:**The charter school will submit updated Bullying Prevention and Intervention plan prior to updating student and staff handbooks, as well as evidence of submission to the Board of Trustees for review and approval. The charter school will also submit evidence of dissemination of the updated information to students, parents, and employees. |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence of updated Bullying Intervention and Prevention plan, as well as evidence of submission to the Board of Trustees for review and approval. By December 18, 2015 provide evidence of dissemination of updated Bullying Intervention and Prevention plan. Information may be disseminated for parents through a handbook newsletter update, webpage link, etc. and for employees through e-mail, meeting agenda, etc. |
| **Progress Report Due Date(s):** 11/20/201512/18/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 11A Designation of coordinator(s); grievance procedures | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents indicated that the charter school has not adopted and published grievance procedures for students and for employees as related to Title IX, Section 504, and Title II. |
| **Description of Corrective Action:** Update Staff Handbook and Student Handbook; Submit to the Board of Trustees for review and approval. |
| **Title/Role(s) of Responsible Persons:**Director of Special Projects | **Expected Date of Completion:**04/05/2016 |
| **Evidence of Completion of the Corrective Action:**Submit updated Staff Handbook and Student Handbook. |
| **Description of Internal Monitoring Procedures:** Director of Special Projects will submit the Staff Handbook and Student Handbook to legal counsel prior to board approval on an annual basis. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 11A Designation of coordinator(s); grievance procedures | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Although the charter school proposes to update the staff and student handbooks, it does not actually address the grievance procedures specifically and does not provide a timeline or a method of dissemination of this information to students, parents, and employees. |
| **Department Order of Corrective Action:**The charter school will submit updated grievance procedures prior to updating student and staff handbooks, as well as evidence of submission to the Board of Trustees for review and approval. The charter school will also submit evidence of dissemination of the updated information to students, parents, and employees. |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence of updated grievance procedures, as well as evidence of submission to the Board of Trustees for review and approval. By December 18, 2015 provide evidence of dissemination of updated grievance procedures. Information may be disseminated for parents through a handbook newsletter update, webpage link, etc. and for employees through e-mail, meeting agenda, etc. |
| **Progress Report Due Date(s):** 11/20/201512/18/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents demonstrated that the name(s), office address(es), and phone number(s) of the person(s) designated to coordinate compliance under Title IX and Section 504 are not provided in the student and employee handbooks. |
| **Description of Corrective Action:** Update Staff Handbook and Student Handbook; Submit to the Board of Trustees for review and approval. |
| **Title/Role(s) of Responsible Persons:**Director of Special Projects | **Expected Date of Completion:**04/05/2016 |
| **Evidence of Completion of the Corrective Action:**Submit updated Staff Handbook and Student Handbook. |
| **Description of Internal Monitoring Procedures:** Director of Special Projects will submit the Staff Handbook and Student Handbook to legal counsel prior to board approval on an annual basis. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Although the charter school addresses that it will update staff and student handbooks to include the name(s), office address(es), and phone number(s) of the person(s) designated to coordinate compliance under Title IX and Section 504, the charter school does not address a timeline or a method of dissemination of this information to students, parents, and employees. |
| **Department Order of Corrective Action:**The charter school will submit updated information regarding this criterion, as well as evidence of submission to the Board of Trustees for review and approval. The charter school will also submit evidence of dissemination of the updated information to students, parents, and employees. |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence of updated information regarding this criterion, as well as evidence of submission to the Board of Trustees for approval (e.g. agenda, minutes, etc). By December 18, 2015 provide evidence of dissemination of updated information regarding this criterion to students, parents, and employees. Information may be disseminated for parents through a handbook newsletter update, webpage link, etc. and for employees through e-mail, meeting agenda, etc. |
| **Progress Report Due Date(s):** 11/20/201512/18/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that annual staff training on the use of physical restraint is not consistently provided across the three school campuses; in addition, interviews indicated that new employees hired after the beginning of the school year do not receive training within one month of their employment. |
| **Description of Corrective Action:** 1. Annual staff training on the use of physical restraint will be provided to all campuses within 30 days of the start of school. 2. HR Department will add "Trained on the use of Physical Restraint" to our tracking system. This tracking will prompt Director of Special Projects to train new employees on the use of Physical Restraint. |
| **Title/Role(s) of Responsible Persons:**Director of Special Projects | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**Agendas and training logs will be provided. |
| **Description of Internal Monitoring Procedures:** 1. Add "Tracking of Use of Physical Restraint Training" to Director of Special Projects job description.2. Human Resources department will regularly send reports to the Director of Special Projects to notify of new employees who need to be trained. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Please be aware that changes to the physical restraint regulations, 603 CMR 46.00 will go into effect on January 1, 2016, thereby requiring the district to revise its physical restraint procedures accordingly. Some key elements in the new regulations include an emphasis on behavioral support and preventative measures; data collection, review, and reporting; notice to parents; and guidance on the use of time-out and seclusion. |
| **Department Order of Corrective Action:**Review the regulatory changes at http://www.doe.mass.edu/lawsregs/ and the Department's guidance at http://www.doe.mass.edu/sped/advisories/2016-1ta.html and http://www.doe.mass.edu/sped/advisories/QuestionAnswerGuide-603CMR.pdf. The district will develop written restraint prevention and behavior support policies and procedures to conform with the regulatory changes. |
| **Required Elements of Progress Report(s):** By November 20, 2015 submit evidence that the charter school provided training on the use of physical restraint at the beginning of the 2015-2016 SY on current regulations on all three campuses. By November 20, 2015 submit a training outline for new employees hired after the start of the school year indicating that the use of physical restraint will be provided to new employees. By December 18, 2015, submit a narrative describing the charter school's process to revise its written restraint policies and procedures, including its restraint prevention and behavior support procedures. By March 16, 2016, submit the charter school's revised written restraint policies and procedures, consistent with the new regulations that go into effect on January 1, 2016. By March 16, 2016, submit evidence of the dissemination of the revised restraint policies to staff, students, and parents. |
| **Progress Report Due Date(s):** 11/20/201512/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 18 Responsibilities of the school principal | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that the charter school's curriculum accommodation plan does not include services within the general education program to address the needs of children whose behavior may interfere with learning or for linguistic minority students. Additionally, a review of documents indicated that information regarding educational services in home or hospital is not made available to parents and students. Student record review and interviews also verified that the documentation of instructional strategies and results is inconsistent and not always available as part of the evaluation information reviewed by IEP Teams when determining eligibility. |
| **Description of Corrective Action:** 1. Update the Curriculum Accommodation Plan to include services within the general education program to address the needs of children whose behavior may interfere with learning or for linguistic minority students. 2. Update the Student Handbook to explicitly state the school's policy on home/hospital education services. 3. Update student record tracking to include a checklist of interventions attempted before referring for testing. Train Grade Level Chairs and Individual Needs Coordinators on implementing the student record tracking. |
| **Title/Role(s) of Responsible Persons:**Principals, Director of Individual Needs | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**1. Updated Curriculum Accommodation plan. 2. Updated Student Handbook. 3. Provide checklist of interventions. |
| **Description of Internal Monitoring Procedures:** 1. Future CAPs will be developed with all requirements in mind. 2. Student handbook will be provided to legal counsel before approval. 3. Director of Individual Needs will audit student records for compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2015 submit evidence of updated curriculum accommodation plan that includes guidance to general education teachers regarding the needs of children whose behavior may interfere with learning or for linguistic minority students By December 18, 2015 submit evidence of dissemination of information regarding to educational services in home or hospital to parents and students. Dissemination may be through a handbook newsletter update, webpage link, etc.By December 18, 2015 provide evidence of updated student record tracking to include a checklist of interventions attempted before referring for testing.By March 16, 2016, conduct an internal review of approximately two records from each campus for students referred for special education services after receiving instructional support & following the implementation of all corrective actions. For each record, determine if the instructional supports are documented in the record and provided as part of the evaluation information reviewed by the Team when determining eligibility. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. \*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 12/18/201503/16/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 24 Curriculum review | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review indicated that the charter school's curriculum review process does not include reviewing materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of gender identity. |
| **Description of Corrective Action:** Update curriculum review process to include reviewing materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of gender identity. |
| **Title/Role(s) of Responsible Persons:**Director of Special Projects | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**Provide updated curriculum review process. |
| **Description of Internal Monitoring Procedures:** Curriculum review process will be updated as needed to reflect required changes. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/19/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Although the charter school proposes to update the curriculum review process and materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of gender identity, it does not describe how individual teachers will use the process. |
| **Department Order of Corrective Action:**Submit updated curriculum review process and materials, as well as evidence of training to teachers. |
| **Required Elements of Progress Report(s):** By December 18, 2015 submit updated curriculum review process and evidence of training, including an agenda or memorandum, signed attendance sheet, and materials used for the training. |
| **Progress Report Due Date(s):** 12/18/2015 |

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

District: Roxbury Preparatory Charter School

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Roxbury Preparatory Charter School

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: September 4, 2016**

|  |
| --- |
| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 5 Program Placement and Structure | **Rating:** Partially Implemented |
| **Department CPR Finding:***A review of district documentation revealed that the charter school provides ESL services only to ELLs at proficiency levels 1 and 2 for 50 minutes per day. The charter school’s approach to providing services to students at proficiency levels 3, 4 and 5 is limited to sheltered content instruction and overlooks these students’ needs for instruction focused on English language development. Therefore, the district does not have an ELE program designed to promote and support the rapid acquisition of English language proficiency by ELL students as is required in G.L. c. 71A and to ensure that ELL students gain the proficiency in English that will enable them to participate meaningfully in the district’s general education program.*  |
| **Narrative Description of Corrective Action:**  Roxbury Prep identified this as an area of need between the 2014-2015 and 2015-2016 school years. In order to address this gap, Roxbury Prep created a position called the Director of Individual Needs Uncommon Boston, tasked with planning appropriate instruction for the population of students who require ELL programming. This school year, students at all campuses who place at ELD Levels 1 and 2 receive between two and three hours of direct ESL instruction per day. In the students’ other classes (Math and Science), students receive a modified curriculum based on their proficiency and performance level. In order to improve programming for students performing at Levels 3-5 ELD, Roxbury Prep will: * Level 3: Create classes for scholars to receive direct language instruction for at least 50 minutes 4 days per week.
* Level 4 & 5: Create classes for scholars to receive direct language instruction for at least 30 minutes 4 days per week.

In order to improve programming for all students in the Sheltered Content Immersion classes, Roxbury Prep will * Increase training for Sheltered English Immersion Instructors to support all English Language Learners in the general education classroom through language-based strategies, accommodations, and modifications as necessary.
* Hold a series of professional development sessions to train teachers on SEI best practices.

In preparation for the 2016-2017 school year, Roxbury Prep will: * Meet as school-based ELL teams to review student data and determine changes in ELD level for the coming school year. [The school-based ELL team includes ELL teachers, sheltered English immersion teachers, operations staff and the Director of Individual Needs.]
* During the enrollment process, Roxbury Prep will collect data through the Home Language Survey and help school-based teams to develop rosters of new students
	+ 1) who are currently identified as ELL by their previous schools, or
	+ 2) who need to be screened (through the WIDA Access Placement Test) to determine appropriate placement and instructional supports for the school year
* Instructional and Operational teams will work together to develop staffing and scheduling plans to include direct ESL instruction for students in Levels 1 through 5.
 |
| **Title/Role of Person(s) Responsible for Implementation:** Director of Individual Needs, Director of Special Projects, Director of Operations, Instructional Leader, Campus-based ELL Teams | **Expected Date of Completion for Each Corrective Action Activity:** **-** Across campuses, all students at an ELD Level 3 will be enrolled in a 50 minute ESL class by February 2016- Across campuses, all students at an ELD Level 4 and 5 will be enrolled in a 30 minute ESL class by February 2016- Staff Sheltered English Immersion professional development sessions will begin in January 2016- School-based instructional teams will meet to review ELL performance data and determine appropriate levels for the 2016-17 school year in June 2016- Instructional and Operational school leaders will meet with ELL instructional team to identify scheduling and staffing needs for the coming school year- Enrollment data will be collected continually throughout the enrollment process, and Home Language Survey results will be shared with school-based teams in August 2016- School-based teams will administer the W-APT test in August/September 2016- Schools will confirm schedule and staffing needs based on incoming student levels by September 2, 2016 |
| **Evidence of Completion of the Corrective Action:** * Updated school and student schedules will reflect increased ESL support for ELD Level 3s
* Professional development materials and attendance sheets
* Updated rosters and student schedules for 2016-17 school year will include appropriate ESL programming
 |
| **Description of Internal Monitoring Procedures:** * School-based Instructional coaches will monitor ESL teacher performance and student academic achievement
* Up-to-date ELL rosters will be reviewed by Director of Individual Needs, Operations and Instructional staff on a triennial basis
* The Director of Individual Needs and school-based staff will evaluate the ELL Program annually
 |
| 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 [x]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** The Department appreciates the district’s efforts towards increasing the ESL instructional time provided to ELLs at the WIDA proficiency levels 3, 4 and 5. However, the targeted ESL instruction time is still less than the recommended periods of instruction as described in the *Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners* found at <http://www.doe.mass.edu/ell/guidance/guidance.pdf> . Since the district has not met *Growth, Proficiency Attainment* and *Academic Achievement* target numbers in the last two consecutive years, the district needs to provide information on how the instructional needs of the ELL population at all levels will be addressed with this corrective action plan.The district should also note that it is the district’s obligation by law to ensure that ELLs are taught to the same academic standards and curriculum as all students and to provide the same opportunities to master such standards. The district’s plan to provide a modified curriculum of Science and Math to ELLs based on their proficiency and performance levels is not in compliance with the state and federal laws. Please see the *Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners* found at <http://www.doe.mass.edu/ell/guidance/guidance.pdf>. |
| **Department Order of Corrective Action:** N/A |
| **Required Elements of Progress Report(s):** 1. Please complete the *Castañeda* test by the progress report due date. Please ensure that your answers to the questions on the test reflect the changes that the district will implement in order to comply with federal and state laws and regulations.
2. Please explain how the district will monitor the progress and completion of the program goals identified in the *Castañeda* test. Please include the names of the responsible staff who will be involved in the process.
3. Please complete district information in the attached spreadsheet labeled *ELL List* by school for each ELL student in the district.
 |
| **Progress Report Due Date(s): February 19, 2016** |

|  |
| --- |
| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 10 Parent Notification | **Rating:** Not Implemented |
| **Department CPR Finding:** *A review of student records indicated that the charter school does not provide annual written notice of student English language proficiency to parents. Additionally, the charter school does not consistently provide parents with translated report cards and progress reports in becoming proficient in using English; additionally, progress reports are not provided with the same frequency as general education reporting.*  |
| **Narrative Description of Corrective Action:** * Campus-level Directors of Special Projects will mail required annual written notice to parents of students enrolled in the ELL Program at Roxbury Prep. Waivers and Opt Out forms will be included in this communication. All letters will be translated into the appropriate language for parent-indicated language preference.
* Roxbury Prep will translate all school-wide progress report and report card letters into home language as necessary.
* Roxbury Prep will monitor students’ English Language Development progress. These progress reports will be sent home with the same frequency as regularly-scheduled progress reports and report cards.
 |
| **Title/Role of Person(s) Responsible for Implementation:** Director of Individual Needs,Campus Operations Directors and Directors of Special Projects | **Expected Date of Completion for Each Corrective Action Activity:** * Director of Individual Needs will conduct a training with Operations staff regarding these policies in March of 2016
* Translated progress report and report card letters will be mailed home beginning with Quarter 1 report cards (December 2015)
* Annual written notice will be sent to all current parents of ELLs by June 2016 (including updated ELD leveled placement)
* Annual written notice will be sent to all parents of new Roxbury Prep ELL students by September 2, 2016
 |
| **Evidence of Completion of the Corrective Action:** * Director of Individual Needs will hold a training with Directors of Operations and Directors of Special Projects to review policies and procedures (materials, agenda, and attendance documentation)
* Translated progress report and report card letters will be on file for review.
* Annual written notice (including translated copy) will be included in student ELL folder
 |
| **Description of Internal Monitoring Procedures:** * The Roxbury Prep 2016-2017 network calendar will have dates of Annual Notification Mailing for Operations staff.
* The Individual Needs team will conduct a quarterly audit of ELL Files for evidence of Annual Mailing, translated progress report and report card letters, and other required elements.
 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 10 Parent Notification | **Status of Corrective Action:** [ ]  Approved [x]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Although the charter school provided a comprehensive corrective action plan, the training of the Operations staff needs to occur prior or concurrently with the implementation of the corrective action. |
| **Department Order of Corrective Action:** Provide training to the operations staff prior to or concurrent with the implementation of providing notice on ELL students annually and provision of translated progress reports and report cards to parents. |
| **Required Elements of Progress Report(s):** **By February 19, 2016**, submit evidence of training to Operations staff regarding policies for annual written notice to parents of students enrolled in the ELL program, including training documents, agenda, and signed attendance sheets. **By April 15, 2016**, conduct an internal review of approximately ten records for students in the ELE program to include a sampling where translations have been requested starting with Quarter 1 report cards from each of the three different campuses for evidence of progress reports regarding English Language Development (ELD). Provide a detailed narrative summary of this internal review, including the number of records reviewed and the number of ELD progress reports were documented, as well as translations of the ELD and report cards (as needed). If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. **By August 19, 2016**, conduct an internal review of approximately ten records for students in the ELE program for evidence that the annual written notice was sent to all current parents of ELLs (including updated ELD leveled placement). If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. **\*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s).** |
| **Progress Report Due Date(s): February 19, 2016; April 15, 2016; and August 19, 2016** |

|  |
| --- |
| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 13 Follow Up Support | **Rating:** Not Implemented |
| **Department CPR Finding:** *Review of records indicated that the charter school does not actively monitoring students who have exited an ELL program for two years.* |
| **Narrative Description of Corrective Action:** In the 2015-16 school year, students classified as Formerly Limited English Proficient (FLEP) were added to the active Network ELL Roster. These students will receive access to a word-to-word dictionary on assessments, as well as quarterly monitoring of progress in the general curriculum. Ongoing, all students who are classified as FLEP after review of academic and language performance will remain on the active ELL roster for two consecutive years and their progress will be monitored quarterly. Students will be classified as FLEP 2014, FLEP 2015, etc. depending on the year they were classified as a FLEP; this classification will also be documented in Powerschool. Once the student has been actively monitored for two years, the student will remain as a FLEP distinction both on the ELL roster and in Powerschool, however they will not be actively monitored by campus ELL teams.  |
| **Title/Role of Person(s) Responsible for Implementation:** Director of Individual Needs, Directors of Special Projects, ELL Instructional Teams | **Expected Date of Completion for Each Corrective Action Activity:** * 2015-2016 FLEP roster is already complete and updated for each campus and on Powerschool (evidence of this documentation is available upon request)
* The Director of Individual Needs will conduct a training for Operations staff on compiling and maintaining an updated ELL roster in March of 2016
* 2016-2017 ELL Roster will be available for returning students in June 2016, and for new students by September 2 2016
 |
| **Evidence of Completion of the Corrective Action:** * Director of Individual Needs will hold a training with Operations staff to review policies and procedures (materials, agenda, and attendance documentation)
* Active ELL rosters and corresponding Powerschool records will be reviewed quarterly by campus operations staff (as outlined on the Roxbury Prep Network-wide calendar)
* Documentation of FLEP Monitoring will be available at each campus in student ELL files
 |
| **Description of Internal Monitoring Procedures:*** Active ELL rosters and corresponding Powerschool records will be reviewed quarterly by campus operations staff (as outlined on the Roxbury Prep Network-wide calendar)
* Triennial ELL file audits will include review of FLEP monitoring procedures
 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 13 Follow Up Support | **Status of Corrective Action:** [ ]  Approved [x]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Although the charter school provided a description of monitoring of ELLs who have been identified as FLEP students, it does not give a provision for the reclassification of students who fails to make academic progress after having been FLEP’d.  |
| **Department Order of Corrective Action:** The district may use the monitoring form developed by the Department, available at <http://www.doe.mass.edu/ell/resources.html>. |
| **Required Elements of Progress Report(s):** **By February 19, 2016**, submit a description of information to be used to monitor the progress of exited students, as well as evidence of training to Operations staff regarding procedures for monitoring students (agenda, signed attendance sheets, example of training materials). Include provisions for the reclassification of exited students who fail to make academic progress as part of the training. **By April 15, 2016**, conduct an internal review of approximately ten records for students identified as exited students. If there is evidence that student is not making academic progress, indicate how the charter school is supporting the student and/or if the student has been reclassified to an active ELL. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. **\*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s).** |
| **Progress Report Due Date(s): February 19, 2016; April 15, 2016** |

|  |
| --- |
| 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:** *Review of records indicated that ELL student records do not consistently contain the following required documentation:* * *home language survey;*
* *results of identification and proficiency tests and evaluations;*
* *ACCESS scores;*
* *MCAS, PARCC or other tests chosen by the Board of Education and the district;*
* *information about students’ previous school experience, as available;*
* *copies of initial and annual parent notices;*
* *progress reports in the native language, if necessary;*
* *report cards, in the native language, if necessary;*
* *evidence of follow-up monitoring, if applicable.*
 |
| **Narrative Description of Corrective Action:** * Director of Individual Needs will conduct a training on all required documentation for student ELL files
* Campus operations staff will gather all necessary materials for student ELL files
 |
| **Title/Role of Person(s) Responsible for Implementation:** Director of Individual Needs, Directors of Special Projects | **Expected Date of Completion for Each Corrective Action Activity:** * Operations training on updated policies and procedures will be held in March 2016
* ELL files will be updated by April 2016
* All new student ELL files will be finalized in September 2016
 |
| **Evidence of Completion of the Corrective Action:** * Updated and accurate ELL files will be the evidence of the corrective action
 |
| **Description of Internal Monitoring Procedures:** * ELL Files will be audited by Director of Individual Needs and Director of Special Projects three times per year to review compliance
 |
| 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:** Not Applicable |
| **Department Order of Corrective Action:** Not Applicable  |
| **Required Elements of Progress Report(s):** **Please note:** The district may use the file checklist developed by the Department, available at <http://www.doe.mass.edu/ell/resources.html> **By February 19, 2016**, submit evidence of training to Operations staff regarding procedures for maintenance of ELL files including but not limited to agenda, example of training materials, and signed attendance sheets. **By August 19, 2016**, conduct an internal review of approximately ten records for students in the ELE program for evidence that ELL student files contain evidence of the required documentation. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. **\*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s).** |
| **Progress Report Due Date(s): February 19, 2016; April 15, 2016** |