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

##### COORDINATED PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Greater Lowell Regional Vocational Technical

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 09/02/2015.

**Mandatory One-Year Compliance Date:** **09/02/2016**

**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 2 | Required and optional assessments | Partially Implemented |
| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 9A | Elements of the eligibility determination; general education accommodations and services for ineligible students | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 22 | IEP implementation and availability | 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 |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 15 | Non-discriminatory administration of scholarships, prizes and awards | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Not Implemented |
| CR 20 | Staff training on confidentiality of student records | Partially Implemented |

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

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| **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 district does not have procedures to determine a student's dominant language. Additionally, record review indicated that when an ELL student is referred for an evaluation, the district conducts assessments in English to determine if the student is capable of coursework at the vocational school. | | |
| **Description of Corrective Action:**  Create procedures to determine student's dominant language prior to evaluation: Information may include student's history in E.L.E. program, language screeners, review of previous assessments, etc. This information will be discussed as a team and provided to evaluators to determine which language to conduct an assessment for student. Additionally, staff members will be trained on the new procedure to ensure implementation. | | |
| **Title/Role(s) of Responsible Persons:**  Director Of Special Education or designee | | **Expected Date of Completion:**  09/02/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence may include staff training attendance sheet, form(s) used to track E.L.E., ELL file review sheet including student's history, training materials, and updated page in the department procedural manual. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education or designee will conduct an internal monitoring of student files twice a year to ensure that the student's dominate language is being identified and documented prior to a student evaluation of any type. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 1 Assessments are appropriately selected and interpreted for students referred for evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Although the district provides a comprehensive procedure for determining a student's dominant language prior to evaluation, the district's practice of assessing an ELL student in English to determine if the student is capable of coursework at the vocational school must be discontinued. | | |
| **Department Order of Corrective Action:**  Ensure that the district's procedure for determining a student's dominant language clearly prohibits assessing students in English to determine the student's capability for completing coursework at the vocational school. | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, for student SN identified by the Department, submit documentation based on the district's actions as specified in the Student Record Worksheet.  By December 8, 2015, submit the district's revised procedures to ensure that information from a variety of relevant sources or functional/developmental information is gathered to determine the appropriate language to evaluate a student, along with evidence of special education staff training on these procedures and an assurance that the district will not administer assessments in English to determine the student's capability of completing coursework at the vocational school. Documentation of training will include signed attendance sheets with name and role of staff member, agenda(s) with name and role of presenter, and examples of training materials.  By March 17, 2016, conduct an internal review of approximately 10 records for students with initial or re-evaluations conducted following the implementation of all corrective actions for evidence that the district has determined the appropriate language to assess students, along with evidence to support the decision. 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 grades, progress reporting, ELL assessments, ELL screeners, teacher reports, and other functional/developmental information to supplement evaluation data to determine eligibility. If non-compliance is identified, report the specific actions. 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):**  12/08/2015  03/17/2016 | | |

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

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that when a student has multiple disabilities, the district does not conduct assessments in all areas related to the suspected disabilities. Record review also demonstrated that the district does not consistently provide all required assessments consented to by the parent, specifically a history of the student's educational progress in the general curriculum and a teacher assessment of the student's attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults. | | |
| **Description of Corrective Action:**  An organized written process will be developed to ensure that all required and optional assessments are conducted as consented to by the parent. A checklist will be developed to substantiate that all areas related to the suspected disabilities are assessed. As part of this written process, a communication document will be generated and shared with all applicable TEAM members. Training will be provided to ensure a clear understanding of the process. Educational Assessments: Part A will become a required form in this process. Staff will be trained in the use of Educational Assessment: Part A as well as documenting their assessment of student's attention skills, participation behaviors, communication skills, memory, and social relations with groups, peers, and adults. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education and/or designee | | **Expected Date of Completion:**  09/02/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence may include staff training attendance sheet and materials, a new checklist form, communication form, and Educational Assessment Form A There will be an updated page in the procedural manual reflecting Educational Assessment A. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education or designee will conduct an internal monitoring of student files twice a year to determine if Educational Assessment A and teacher assessments that review student's attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults are included. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, for students SN, JP, NL, and TB identified by the Department, submit documentation based on the district's actions as specified in the Student Record Worksheet.  By December 8, 2015, submit the district's revised procedures, including the district's checklist, to ensure that when a student has multiple disabilities that the district assesses the student in all suspected disabilities along with evidence of special education staff training on these procedures.  Submit evidence of training on the district's revised procedures to ensure that students are assessed in all areas of the disability and the district's procedures to ensure that a history of the student's educational progress in the general curriculum is developed as required for each initial and re-evaluation. 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 17, 2016, conduct an internal review of approximately 5 records for students with multiple disabilities to determine if all areas of suspected disabilities have been addressed during the initial and re-evaluation 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.  By March 17, 2016, conduct a second internal review of approximately 10 records of students with initial and re-evaluations conducted following the implementation of all corrective actions to ensure that a history of the student's educational progress in the general curriculum is developed as required. 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):**  12/08/2015  03/17/2016 | | |

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| **Criterion & Topic:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the district obtains the student's consent to continue his/her special education program before the student has reached the age of majority. | | |
| **Description of Corrective Action:**  Staff will receive training to ensure that the district obtains the student's consent to continue his/her special education program after the student has reached the age of majority. Staff will receive an email reminding them to discuss the transfer of parental rights at the age of majority on or after the student's 18th birthday. The procedural manual will be updated noting in BOLD type that the student's consent must take place on or after the student's 18th birthday. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education and/or designee | | **Expected Date of Completion:**  09/02/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence may include staff training attendance sheet, training materials, copy of reminder email, and updated page in the department procedural manual. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education or designee will conduct an internal monitoring of Age of Majority decision sheets four times a year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit the district's system for ensuring that the district obtains the student's consent to continue his/her special education program on or after the student's 18th birthday, along with evidence of special education staff training on this system. This documentation should 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 17, 2016, conduct an internal review of approximately 10 records for students with shared or sole educational decision-making rights who have reached the age of 18 for evidence that the district has obtained the student's consent to continue his/her special education program after the age of majority. 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). | | |
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| **Criterion & Topic:**  SE 9A Elements of the eligibility determination; general education accommodations and services for ineligible students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that during re-evaluations, IEP Teams convene to determine if the student is making effective progress and/or to update information in the student's IEP before assessment results are available. | | |
| **Description of Corrective Action:**  The Special Education evaluation staff will be trained to ensure that IEP Teams convene to determine if the student is making effective progress and/or to update information in the student's IEP when all assessment results are available within the regulated timeline. A communication form will be developed and used among the entire TEAM with due dates to ensure that timelines are followed and all assessment results are available at the team meeting to ensure that all elements of eligibility are considered by the team. The procedural manual will be updated to include the new communication form. In the training, all the elements of eligibility, including timelines, will be reviewed. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education and/or designee | | **Expected Date of Completion:**  09/02/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence may include staff training attendance sheet and training materials, copy of communication form, student records, and team meeting notes and summary. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education or designee will conduct an internal monitoring of student files twice a year to determine if student records indicate that during re-evaluations, IEP Teams convene to determine if the student is making effective progress and/or to update information in the student's IEP when all assessment results are available within the regulated timeline. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9A Elements of the eligibility determination; general education accommodations and services for ineligible students | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit the district's revised process to ensure that all assessments for re-evaluations are completed and available within 30 days of the date of receipt of parental consent and prior to the Team eligibility determination meeting, along with evidence of special education staff training, including any revised 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 17, 2016, conduct an internal review of approximately 10 records for students who have been referred for assessments for the re-evaluation process following the implementation of all corrective actions for evidence that all assessments were completed prior to eligibility determination. 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). | | |
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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the IEP Teams do not consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  The Special Education staff will be trained to ensure that the non-participation justification portion of the IEP's contain specifically detailed information as to why removal from the general education classroom is critical to the student's program. The IEP will contain information for the basis of its conclusion that the education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. The least restrictive program decision will also be included in the student's N1 proposal. In the training, all elements of why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education or designee | | **Expected Date of Completion:**  09/02/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence may include staff training attendance sheet and materials, student records and updated page in the department procedural manual. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education or designee will conduct an internal monitoring of student files twice a year to determine if IEP Teams consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit the district's revised procedures to ensure that the non-participation justification statement of the IEP contain specifically detailed information as to why removal from the general education classroom is critical to the student's program. The Team will include information for the basis of its conclusion that the education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily.  By December 8, 2015, submit evidence of special education staff training on these procedures, including the revised 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 17, 2016, conduct an internal review of approximately 10 records of students with IEP development following the implementation of all corrective actions for evidence that the non-participation justification statement specifically details why removal from the general education classroom is critical to the student's program. 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):**  12/08/2015  03/17/2016 | | |

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| **Criterion & Topic:**  SE 22 IEP implementation and availability | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews demonstrated that once IEPs have been accepted by parents, the district does not provide the mutually agreed upon services without delay. | | |
| **Description of Corrective Action:**  Staff training will be provided to review the development of IEP's to ensure that mutually agree upon services are provided without delay. Beginning in the 2015-2016 school year, once an IEP has been accepted by parents, the district will provide the mutually agreed upon services without delay. All IEP cycles will be dated from the day of the meeting and run until the day before the year anniversary of that meeting. Ex. (10/02/15-10/01/16) All services the students receive on the grid will be dated with the exact start and end dates for each service. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director and/or designee | | **Expected Date of Completion:**  09/02/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence will include staff training attendance sheet, training materials and student records. Update language in procedural manual with a section that outlines the process for implementing and making available the mutually agreed upon services without delay. | | |
| **Description of Internal Monitoring Procedures:**  The LEA Representative will certify that the goals in the IEP are those recommended by the Team and that the indicated services will be provided without delay. In addition the Director Of Special Education or designee will conduct an internal monitoring of randomly selected student files twice a year to determine if student's IEP cycle supports the practice of providing the mutually agreed upon services without delay. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 22 IEP implementation and availability | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit the district's revised procedures to ensure that once an IEP has been accepted by parents, the district will provide the mutually agreed upon services without delay and that all IEP cycles will be dated from the day of the meeting and run until the day before the one-year anniversary date of that IEP meeting, including information that IEP service delivery grids identify the exact start and end dates for each service.  By December 8, 2015, submit evidence of special education staff training on these procedures, including the revised 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 17, 2016, conduct an internal review of approximately 10 records for students with IEP development following the implementation of all corrective actions to ensure that parent-accepted IEP services are implemented without delay. 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):**  12/08/2015  03/17/2016 | | |

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records demonstrated that Notices of Proposed School District Action (N1) to propose the IEP and summarize the Team's decisions and considerations do not consistently contain the following federally required information: rejected options and the reason for the rejection and evaluation procedures, tests, records, or reports the agency used as a basis for the proposed or refused action. | | |
| **Description of Corrective Action:**  The Special Education staff will be trained to ensure that the N1 proposal will consistently contain all federally required information including rejected options, reason for rejection, evaluation procedures, tests, records, and reports used as a basis for the proposed or refused action. In the training, all elements of the N1 will be addressed. In addition to the staff training, the IEP checklist will be adjusted to support staff as they prepare to submit the IEP to the Special Education office. On the checklist, there will be a section indicating that all 6 questions on the N1 are addressed thoroughly. The procedural manual will also be updated to specifically outline the process for completing the N1 that fulfills all federally required information. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education and/or designee | | **Expected Date of Completion:**  09/02/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence will include staff training attendance sheet, revised IEP checklist form, and updated procedural manual with a section that outlines the process of including all necessary elements in an N1 proposal. | | |
| **Description of Internal Monitoring Procedures:**  The Director Of Special Education or designee will conduct an internal monitoring of student files twice a year to determine if student's N1's consistently include all federally required information. | | |
| 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:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit the district's revised procedures to ensure that notices of proposed district actions (N1) will consistently contain all federally required information including rejected options, reason for rejection, evaluation procedures, tests, records, and reports used as a basis for the proposed or refused action.  By December 8, 2015, submit evidence that special education staff have received training to ensure the completeness of district N1s, including signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials.  By March 17, 2016, conduct an internal review of approximately 10 records for students with IEP development following the implementation of all corrective actions to ensure that district N1s consistently contain all federally required information including rejected options, reason for rejection, evaluation procedures, tests, records, and reports used as a basis for the proposed or refused action. 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). | | |
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| **Criterion & Topic:**  CR 3 Access to a full range of education programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Although the district describes how it 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 description does not address the protected category of homelessness. | | |
| **Description of Corrective Action:**  Add the word homelessness to the non-discrimination statement in the student handbook as well to additional school documents. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Guidance and Counseling Services | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Current school year student handbook has been updated as well as school website. Teacher handbooks have been updated for this school year. | | |
| **Description of Internal Monitoring Procedures:**  A committee, led by the Director of Guidance and Counseling Services, will meet yearly to review the handbook and school resources to ensure equal access to a full range of education programs for all students; inclusive of all students in protected categories. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit a sample of materials or webpage links to demonstrate that the district's nondiscrimination statement has been updated to include homelessness as a protected category as well as dissemination of this update to parents, students, and staff members. The district may also upload its Family Handbook or scan relevant pages from the updated handbook. | | |
| **Progress Report Due Date(s):**  12/08/2015 | | |

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| **Criterion & Topic:**  CR 8 Accessibility of extracurricular activities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that district's policy on the accessibility of extracurricular activities does not address the protected category of homelessness. | | |
| **Description of Corrective Action:**  Add the word homelessness to the non-discrimination statement in the Athletic Handbook as well as to additional school documents (i.e.: Student Handbook). | | |
| **Title/Role(s) of Responsible Persons:**  Director of Guidance and Counseling Services | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Current school year Athletic handbook has been updated as well as school website. | | |
| **Description of Internal Monitoring Procedures:**  A Committee, led by the Director of Guidance and Counseling Services, will meet yearly to review Athletic Handbook and school resources to ensure accessibility of extracurricular activities for all students; inclusive of all students in protected categories. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit a sample of materials or webpage links to demonstrate that the district's nondiscrimination statement has been updated in the Athletic Handbook to include homelessness as a protected category as well as dissemination of this update to parents, students, and staff members. The district may also upload its Athletic Handbook or scan relevant pages from the updated handbook. | | |
| **Progress Report Due Date(s):**  12/08/2015 | | |

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| **Criterion & Topic:**  CR 9 Hiring and employment practices of prospective employers of students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that although prospective employers of students sign a statement that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices on the basis of race, color, national origin, sex, handicap, religion and sexual orientation, this statement does not address the protected category of gender identity. | | |
| **Description of Corrective Action:**  Add the word gender identity to the non-discrimination statement to forms and documents related to the hiring and employment practices of prospective employers of students. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Guidance and Counseling Services and Co-Op Director | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Current forms and documents relating to the hiring and employment practices of prospective employers of students have been updated. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Counseling Services and the Cooperative Education Director will meet yearly to review forms and documents to ensure the non-discrimination statement the employer signs complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices for all students; inclusive of all students in protected categories. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit a copy of the revised Employer Confirmation Statement along with evidence of provision to prospective employers of students ensuring that gender identity is included in the non-discrimination statement as a protected category. | | |
| **Progress Report Due Date(s):**  12/08/2015 | | |

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

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| **Criterion & Topic:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents regarding non-discriminatory administration of scholarships, prizes and awards confirmed that gender identity as a protected category is not addressed. | | |
| **Description of Corrective Action:**  Add the word gender identity to the non-discrimination notice in communications (i.e.: letters of award, compliance form for donors, thank you letters) for the administration of scholarships, prizes and awards. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Guidance and Counseling Services | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Current school year communications for the administration of scholarships, prizes and awards (i.e.: letters of award, compliance form for donors, thank you letters) have been updated for the school year 2015-2016 to include the non-discrimination notice for Greater Lowell Technical High School to be inclusive of all protected categories. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Guidance and Counseling Services will review communications related to the administration of scholarships, prizes, an awards in collaboration with the Director of Curriculum and Instruction to ensure the non-discriminatory administration of scholarships, prizes and awards. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit the district's revised policy, ensuring the nondiscriminatory administration of scholarships, prizes and awards, to demonstrate the inclusion of gender identity as a protected category. Submit evidence of the dissemination of this revised policy, which can include scanned documents or webpage links. | | |
| **Progress Report Due Date(s):**  12/08/2015 | | |

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

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of documents demonstrated that the district has not developed a process to send written notice to students and parents following the student's 15th consecutive unexcused absence to meet with school representatives to discuss why the student is leaving school. Additionally, document review indicated the district has not developed a process to provide annual written notice to former students who have left school, not enrolled elsewhere and not earned their competency determination, to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs. | | |
| **Description of Corrective Action:**  A process to send written notice to students and parents following the student's 15th consecutive unexcused absence to meet with school representatives to discuss why the student is leaving school has been developed. The process is as follows: a student who is absent from school for ten or more unexcused consecutive days (including students who are out of school because of suspension or expulsion) and is atrisk for not completing his/her high school diploma requirements or is considering dropping out will receive notice along with his/her parent/guardian within a period of five (5) days from the students tenth consecutive absence. The notice shall initially offer two dates and times to attend an exit interview and how to contact the school to set up the meeting. The "exit interview" will occur within ten (10) days after the sending of the notice and may be extended at the request of the parent /guardian no longer than fourteen (14) days. The "exit interview" will include a team of relevant school personnel lead by the Director of Guidance and Counseling Services. This team will provide the student and his/her parent/guardian information about the benefits of earning a high school diploma, the detrimental effects of leaving school, and alternative education programs and services available to the student. During the "exit interview" meeting, the student will be offered the opportunity to express his/her challenges, concerns and needs which will be documented in order to create an action plan or an Individual Learning Plan (ILP) that will offer supports and resources to keep the student engaged in school. The school staff will make every effort to keep the student in school and support his/her needs, providing interventions to help the student succeed. Any student, parent/guardian, instructor, counselor or administrator can refer a student at risk for dropping out to the Director of Guidance and Counseling Services to initiate an exit interview meeting.  A notification letter has been developed by the Director of Guidance and Counseling Services to inform former students who have left school and are not enrolled elsewhere and not earned their competency determination to inform them of the availability of publicly funded post high school academic support programs and to encourage them to participate in those programs. The Director of Guidance will run a query in the Student Information System by October 1, 2015 to produce a report of former students who have left school, not enrolled elsewhere and not earned their competency determination covering a time period of the last three years starting with school year 2012-2013 through the end of school year 2014-2015. Students identified in this report will be sent written notice to inform them of the availability of publicly funded post-high school academic support programs and encouraging them to participate in these programs.  At the end of each school year after year ending 2014-2015 the Director of Guidance and Counseling Services will run a query in the Student Information System by October 1, 2015 to produce a report of former students who have left school, not enrolled elsewhere and not earned their competency determination and those identified students will be provided written notice to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Guidance and Counseling Services and Senior Assistant Principal | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  The process of sending written notice to students and parents following the student's 15th consecutive unexcused absence to meet with school representatives to discuss why the student is leaving school is available in writing on pages 12-13 of the student handbook. The student handbook is also available online. Annual written notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion has been created and will be implemented by October of 2015. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Guidance and the Senior Assistant Principal in collaboration with the Guidance Counselors and the Dean of Discipline and Attendance and Assistant Principal will meet yearly to monitor the process and the forms of communication. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Please be aware that changes to MGL c76, s18 that went into effect July 1, 2014 will require the district to revise its procedures for students 16 and over leaving school without a diploma. Some key elements include shorter timelines for required notice, a designated team of personnel for the exit interview, and annual reporting to the DESE. | | |
| **Department Order of Corrective Action:**  Review the revised legislation and other resources at the Department's webpage http://www.doe.mass.edu/dropout/. Revise the district's procedures and initial notice to conform to the regulatory changes. | | |
| **Required Elements of Progress Report(s):**  Using the revised legal requirements, develop a procedure and initial/annual notice to students 16+ and their parents that conform to MGL c76, s18 by December 8, 2015.  Upon approval from the DESE, the district will train relevant staff and implement use of the notices/procedures for submission by March 17, 2016. | | |
| **Progress Report Due Date(s):**  12/08/2015  03/17/2016 | | |

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

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| **Criterion & Topic:**  CR 20 Staff training on confidentiality of student records | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district's staff training on confidentiality of student records does not include the provisions of the Family Educational Rights and Privacy Act (FERPA). | | |
| **Description of Corrective Action:**  Training presentation was created by the Director of Guidance and Counseling Services for staff on confidentiality of student record during July of 2015. Training was reviewed by the Assistant Superintendent/Principal. Training was presented to staff prior at the start of the current school year, 2015-2016. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Guidance and Counseling Services | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Staff training is available and up to date on the school website. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Guidance and Counseling Services and The Assistant Superintendent/Principal will meet yearly to review and update training prior to the start of the upcoming school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 20 Staff training on confidentiality of student records | **Corrective Action Plan Status:** Approved  **Status Date:** 10/21/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 8, 2015, submit the district's staff training for confidentiality of student records to ensure that the provisions of the Family Educational Rights and Privacy Act (FERPA) are included in the training. Submit 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):**  12/08/2015 | | |

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

Greater Lowell Technical High School

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Greater Lowell Technical High 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**

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| 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 and documents indicated that the parent notification letter does not provide specific information to parents on the following required elements:*   * *The child’s level of English proficiency;* * *Program placement or the method of instruction used in the program;* * *The specific exit requirements; and* * *If the student has additional education needs that require special education services, how the Title III program will meet the objectives of the Individualized Education Plan (IEP).*   *Additionally, the parent notification letter requires parents to indicate acceptance or rejection of placement into the ELE program. A review of records also indicated that the district does not provide progress reports including, but not limited to, progress in becoming proficient in using the English language to the parents or legal guardians of students in the English learners programs in the same manner and frequency as report cards and progress reports to other students enrolled in the district.* | | | |
| **Narrative Description of Corrective Action:** Greater Lowell Technical High School’s Parent Notification Form will include the following required elements: (using the *Massachusetts’ DESE Guidance on Identification, Assessment, Placement, and Reclassification Appendix B: Parent Notification Form* as a model). The updated Parent Notification form will not include a signature for parents’ to indicate acceptance or rejection of placement into the ELE program.   * **The child’s level of English proficiency;** * **Program placement;** * **The specific exit requirements; and** * **If the student has additional education needs that require special education services, how the Title III program will meet the objectives of the Individualized Education Plan (IEP).**   The updated Parent Identification Form will be included in the Greater Lowell Technical High School ELE procedure manual and shared with Greater Lowell Administrators and ELE instructional staff.  Greater Lowell Technical High School will issue progress reports including, but not limited to, progress in becoming proficient in using the English language to the parents or legal guardians of students in the English learners programs in the same manner and frequency as report cards and progress reports to other students enrolled in the district. The progress reports will be aligned to WIDA and will include students’ progress in the areas of reading, writing, speaking, and listening. A sample progress report will be included in the Greater Lowell Technical High School ELE procedure manual. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Elizabeth L. Bennett, ELE Coordinator | | **Expected Date of Completion for Each Corrective Action Activity:** Parent Notification Letter will be updated and sent in September of the 2016-17 school-year. ELE progress reports will be developed in the fall of 2105 and will begin to be issued in March 2016. | |
| **Evidence of Completion of the Corrective Action:** Evidence of completion of implementation of the updated Parent Notification form include copies of forms placed in students’ ELE files, placement in the Greater Lowell ELE procedure manual, and meeting minutes regarding implementation with Greater Lowell Administrators and ELE instructional staff. Evidence of completion of the issuance of progress reports include copies of reports placed in students’ ELE files, a sample progress report in the Greater Lowell ELE procedure manual, and minutes from meetings on training and implementation with ELE instructional staff. | | | |
| **Description of Internal Monitoring Procedures:** The Internal Monitoring Procedure will include record reviews by the ELE Coordinator of student files for copies of Parent Notification forms and progress reports. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 10 Parent Notification | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **By March 14, 2016**, submit a copy of the district’s revised parent notice to demonstrate the removal of the parent signature and the district’s progress report for English language acquisition, along with evidence of staff training on providing ELLs with progress reports. Evidence should include signed attendance sheets with name/role of attendee, agenda with name/role of presenter, and examples of training materials.  By **June 17, 2016**, conduct an internal review of approximately ten records for ELLs for evidence that 1) all records contain the revised written parent notice and 2) progress reports on attaining English language proficiency are documented in student records. 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, along with 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): March 14, 2016; June 17, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 18 Records of ELL Students | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *A review of student records indicated that the district does not consistently translate documents into the parents’ native language when necessary.* | | | |
| **Narrative Description of Corrective Action:** Greater Lowell Technical High School employs a full time Khmer speaking translator who translates parent/student notifications, attends meetings, and makes parent phone calls. This position has been reassigned from the Guidance Department to the ELE Department in an effort to coordinate a timelier turn-around for documents to be translated into Khmer. The ELE department also budgets for translation services to ensure documents are translated. Greater Lowell’s ELE has a procedure for translating documents that includes translation request forms that are electronically filed in the ELE office. Greater Lowell Technical High provides translated documents in the parents’ native language including but not limited to  the following:   * Home language survey * Results of identification and proficiency tests and evaluations including ACCESS * MCAS results * Parent notification letters * Progress reports * Report cards * Opt-out forms * Waiver documentation, if applicable * All school-wide notifications | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Elizabeth L. Bennett, ELE Coordinator | | **Expected Date of Completion for Each Corrective Action Activity:** September 2015 | |
| **Evidence of Completion of the Corrective Action:** Evidence of completion of the corrective action includes the reassignment of the Khmer translator and the electronic database of translated documents. | | | |
| **Description of Internal Monitoring Procedures:** The Internal Monitoring Procedure will include record reviews of student files by the ELE Coordinator for evidence of translated documents. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 18 Records of ELL Students | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval: Not Applicable** | | | |
| **Department Order of Corrective Action: Not Applicable** | | | |
| **Required Elements of Progress Report(s):**  **By March 14, 2016**, conduct an internal review of approximately ten records for ELLs for evidence that ELL records contain evidence of translated documents when required by parents. 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 along with 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): March 14, 2016** | | | |

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

District: Greater Lowell Technical High School

Corrective Action Plan Forms

Program Area: Career/Vocational Technical Education

Prepared by: Greater Lowell Technical High School – Linda Arsenault

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 1, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 3 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *A review of documents and interviews revealed that not every program assesses students for employability, management & entrepreneurship, and technological knowledge and skills. Record review also demonstrated that the district has not yet established a system for tracking the attainment of all competencies across all strands. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (4)(c), Perkins Section 3(5)(B) and 134)* | | | |
| **Narrative Description of Corrective Action:** Greater Lowell Technical High School was using the VTCTS system until this system could no longer be sustained by the state contract. During the transition period we had begun creating a competency tracking system of our own but to be able to track and utilize the competency information and generate reports for teachers and administration we purchased Skills Plus. We have a signed a contract as of September 3, 2015 with Trainworks International Inc. for Skills Plus for our Sophomores and Juniors. Our Seniors will remain in the VTCTS, per the email from Maura Russell, dated September 15, 2015. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Cluster Chairs – Don Ducharme, Dan Hamel, Maureen Griffin, Margaret Sarmento | | **Expected Date of Completion for Each Corrective Action Activity:** January June 2016 | |
| **Evidence of Completion of the Corrective Action:** Skills Plus contract & Reports generated from the use of the Skills Plus program. **(Attachment)** | | | |
| **Description of Internal Monitoring Procedures:** Cluster Chairs will meet with their staff to discuss the Skills Plus reports and documents generated, reviewed and then sent home in January and June of 2015 We will also keep a copy of all the competency reports in the student folders. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 3 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not applicable | | | |
| **Department Order of Corrective Action:** Not applicable | | | |
| **Required Elements of Progress Report(s):**  Progress Report #1: The district does not need to provide a copy of the Skills Plus contract, but is asked to provide copies of any memos or other form of documentation that reflects that the district has a means of competency tracking.  Progress Report #2: Note that the system for competency tracking is a local decision and can include electronic tracking or tracking by hand on hard copies. For the second progress report, the district is asked to provide reports generated from the use of the Skills Plus system because that is the system the district has identified for use. Evidence that competencies are being tracked (whether through Skills Plus or another method) must be from all programs and must show that all strands are tracked. | | | |
| **Progress Report Due Date(s): January 25, 2016; March 17, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 10 | | **Rating:** Partially Implemented | |
| **Department CPR Finding:** *A review of 2014-2015 program advisory committee (PAC) documents indicated that not all committees have the required representation. A review of membership forms demonstrated that 12 programs have four or less members; other program advisory committees listed a larger number of members but low meeting attendance. Collectively, documents showed there is no representation from organized labor or registered apprenticeship programs. Finally, a review of documents and interviews indicated that there is no formal recruitment process to make advisory committee representation inclusive or to address representation required by regulation.*  *A review of documents demonstrated that the following Program Advisory Committees lack required representation:*   * *Automotive Collision Repair and Refinishing; Automotive Technology; Business Technology; Carpentry; Cosmetology; Culinary Arts; Drafting; Early Education and Care; Electricity; Heating, Ventilation and Air Conditioning; Marketing; Masonry; Medical Assisting; Metal Fabrication & Joining Technologies; Engineering Technology; Painting & Design and Plumbing lack postsecondary representation;* * *Automotive Collision Repair and Refinishing; Carpentry; Cosmetology; Culinary Arts; Drafting; Early Education and Care; Engineering Technology; Graphic Communications; Health Assisting; Heating, Ventilation and Air Conditioning; Machine Tool Technology; Masonry; Metal Fabrication & Joining Technologies; Engineering Technology; Painting & Design; and Plumbing lack parent representation;* * *Automotive Collision Repair and Refinishing; Automotive Technology; Carpentry; Cosmetology;*   *Culinary Arts; Electricity; Engineering Technology; Graphic Communications; Health Assisting; Heating, Ventilation and Air Conditioning; Machine Tool Technology; Masonry; Metal Fabrication & Joining Technologies; Engineering Technology; Painting & Design; and Plumbing lack student representation;*   * *Automotive Collision Repair and Refinishing; Automotive Technology; Carpentry; Cosmetology; Early Education and Care; Electricity; Health Assisting; Heating, Ventilation and Air Conditioning; Masonry; Medical Assisting; Metal Fabrication & Joining Technologies; and Painting & Design lack nontraditional by gender representation;* * *Automotive Collision Repair and Refinishing; Automotive Technology; Business Technology; Carpentry; Cosmetology; Culinary Arts; Drafting; Early Education and Care; Electricity; Electronics; Engineering Technology; Graphic Communications; Health Assisting; Heating, Ventilation and Air Conditioning; Machine Tool Technology; Marketing; Masonry; Medical Assisting; Metal Fabrication & Joining Technologies; Engineering Technology; Painting & Design; and Plumbing lack individuals representing the interests of students with disabilities;* * *Automotive Technology; Business Technology; Carpentry; Cosmetology; Culinary Arts; Electricity; Electronics; Engineering Technology; Graphic Communications; Health Assisting; Heating, Ventilation and Air Conditioning; Machine Tool Technology; Marketing; Masonry; Medical Assisting; Metal Fabrication & Joining Technologies; Engineering Technology; Painting & Design; and Plumbing* *lack racial or linguistic minority representation.*   *(Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (1) 1. and 2.)* | | | |
| **Narrative Description of Corrective Action:**  **L LLacks Postsecondary Representation** – Letters of invitation/participation written by the Superintendent have been sent for our October 7, 2015 meeting and will be sent several weeks prior to the Advisory meetings during the year. The Cluster Chairs and staff have also invited their Postsecondary contacts to be a part of the Program Advisory Committees.  **Lacks Parent Representation** - Letters of invitation/participation written by the Superintendent have been sent for our October 7, 2015 meeting and will be sent several weeks prior to the Advisory meetings during the year. The Cluster Chairs have asked teachers to contact parents to be a part of the Program Advisory Committees.  **Lacks Student Representation:** Letters of invitation/participation written by the Superintendent have been sent for our October 7, 2015 meeting and will be sent several weeks prior to the Advisory meetings during the year. The teachers have asked students to be a part of the Program Advisory Committees.  **Lacks Nontraditional Gender Representation:** Letters of invitation/participation written by the Superintendent have been sent for our October 7, 2015 meeting and will be sent several weeks prior to the Advisory meetings during the year. The administration and teachers have reached out to nontraditional gender workforce representatives to be a part of the Program Advisory Committees.  **Lacks Person with Disabilities Representation:** Clarificationwas made inregards to this category. It is now understood that a person can represent people with disabilities in their work place and then be the representative on the Advisory Committee.Letters of invitation/participation written by the Superintendent have been sent for our October 7, 2015 meeting and will be sent several weeks prior to the Advisory meetings during the year.  **Lacks Racial or Linguistic Minority Representation:** Letters of invitation/participation written by the Superintendent have been sent for our October 7, 2015 meeting and will be sent several weeks prior to the Advisory meetings during the year. The Cluster Chairs and staff have been reaching out to business partners and local industry employers to increase the participation for this category. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Cluster Chairs – Don Ducharme, Dan Hamel, Maureen Griffin, Margaret Sarmento, Superintendent/Director – Roger Bourgeois | | | **Expected Date of Completion for Each Corrective Action Activity:** October 7, 2015, October 28, 2015, January 20, 2016, May 4, 2015 |
| **Evidence of Completion of the Corrective Action:** Sign-in sheets from the Advisory Meetings held during the school year. Emails and letters sent to potential members. The completed membership forms for each of our 24 programs for the Advisory and also for the General Advisory meetings. . **(Attachment)** | | | |
| **Description of Internal Monitoring Procedures:**  Continue to reach out to industry and community members that may be able to fulfill the areas of membership that are lacking in the various programs. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 10 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not applicable | | | |
| **Department Order of Corrective Action:** Not applicable | | | |
| **Required Elements of Progress Report(s):**  Progress Report #1: The district will submit samples of materials used for the recruitment of new PAC members.  Progress Report #2: The district will provide the PAC membership forms for all programs as well as the General Advisory Membership form. The district will also provide meeting minutes for all PAC and GAC meetings from the last one or two meetings (prior to the progress report due date). The district will also provide evidence that the internal monitoring procedure (that the district proposed and which was approved) is being used. This can be minutes, memos, or a written summary attesting to the fact that the internal monitoring procedure is being utilized. | | | |
| **Progress Report Due Date(s): January 25, 2016; March 17, 2016** | | | |

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| ORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 11 | | **Rating:** Partially Implemented | |
| **Department CPR Finding:** *A review of documents and interviews revealed that not all programs are structured so that students acquire employability, management & entrepreneurship, and technological knowledge and skills (Strands 4, 5, and 6 of the MA Vocational Technical Education Framework common strands). The common strands are not curriculum based in all programs. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (4)(c), Perkins Section 3(5)(B) and 134)* | | | |
| **Narrative Description of Corrective Action:** The issues of curriculum will be addresses with continued curriculum development and revisions with Perkins and Title IIA Funds. Strand Four, Employability (and Career Readiness) Knowledge and Skills will be a focus to provide students with general knowledge and skills to be college and career ready. The Management and Entrepreneurship Knowledge and skills, Strand 5, are for all students and will be incorporated in our grades 11 & 12 Related sections of the student schedules. We will also enhance the curriculum in our Grade 9 CVTE class and reevaluate the assessment of the course. Skills Plus will also assist in tracking the data that is imported by staff in all programs. Strand 6, the Technology and Literacy Standards and Expectations will also be addressed in our curriculum maps and the scope and sequence of each program. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Director of Curriculum & Assessment – Michael Barton,Cluster Chairs – Don Ducharme, Dan Hamel, Maureen Griffin, Margaret Sarmento, Superintendent/Director – Roger Bourgeois | | | **Expected Date of Completion for Each Corrective Action Activity:** June 30, 2016 |
| **Evidence of Completion of the Corrective Action:** New and revised curriculum maps and/or scope & sequences that are inclusive of Strands 4, 5, & 6. Reports created through the use of Skills Plus will also identify our areas of strengths & weaknesses in all strands. . **(Attachment)** | | | |
| **Description of Internal Monitoring Procedures:** Skills Plus will generate various reports as well as the completed and working curriculum documents for each of the 24 programs. Curriclulum teams will be formed and the strands will be incorporated in a meaningful and useful way for staff and students success. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 11 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not applicable | | | |
| **Department Order of Corrective Action:** Not applicable | | | |
| **Required Elements of Progress Report(s):** Progress Report #1: The district will submit evidence that every program addresses strands 4, 5, and 6. This can be new and revised curriculum maps and/or scope & sequences that are inclusive of Strands 4, 5, & 6. Progress Report #2: Reports from Skills Plus will not be required, as they are already requested in the progress report for CVTE Criterion 3. However, the district will provide evidence of the portion of the internal monitoring procedure regarding curriclulum teams (which the district plans to form in order to incorporate the strands in a meaningful and useful way for staff and students success). Evidence for this portion of the internal monitoring process can be meeting minutes, memos, or a written summary attesting to the fact that the planned activities are occurring. | | | |
| **Progress Report Due Date(s): January 25, 2016; March 17, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 12 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *A review of documents and interviews revealed that there is no system in place to ensure that all of the articulation agreements for the career/vocational technical education programs are annually reviewed and approved. For example, while letters requesting articulation renewal were sent to five postsecondary institutions in 2013, there is no documentation of follow up. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (4), Perkins Section 134(b)(3)(A))* | | | |
| **Narrative Description of Corrective Action:** The Director of Guidance will be the keeper of the record for all articulation agreements. The guidance office will also maintain and review, and not in isolation, the articulation agreements. A formal procedure will be given to staff to ensure that a copy of each of the articulation agreements will be sent and filed in the guidance office. The guidance office will maintain the list and ensure the renewal of all agreements no later than June 30th of each school year. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Director of Guidance – Tracy Encarnacao | | **Expected Date of Completion for Each Corrective Action Activity:** June 30, 2016 | |
| **Evidence of Completion of the Corrective Action:** A **c**reated list of the all the current and previous articulation agreements that will be filed/stored in the Director of Guidance’s office. | | | |
| **Description of Internal Monitoring Procedures:** | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 12 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not applicable | | | |
| **Department Order of Corrective Action:** Not applicable | | | |
| **Required Elements of Progress Report(s):**  Progress Report #1: The district will submit a list of the articulation agreements reflecting that they are current (by the use of dates or notes).  Progress Report #2: The district will also provide evidence that the internal monitoring procedure (that the district proposed and which was approved) is being used. That procedure is a periodic check of the articulation agreements files to make sure there is no lapse in any of the agreements. The evidence can be minutes, memos, or a written summary attesting to the fact that the internal monitoring procedure is being utilized. | | | |
| **Progress Report Due Date(s): January 25, 2016; March 17, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 13 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *A review of documents and interviews indicated the following issues with implementation of Cooperative Education policies: 1) there is no safety and health orientation specific to the work site for all employee-students; 2) the pre-placement safety evaluation reviews and documents safety on a general level only, as the documentation states that the work site appears to comply with OSHA regulations common in the industry; 3) regular supervisory activities to ensure that the Cooperative Education agreement is followed at the work site occur, but an individual conducting these visits has no vocational license; 4) the student cooperative education application does not include academic teacher signatures; and 5) the cooperative education agreement does not identify the technical skills to be acquired by the student. A review of student records and interviews also revealed that the district system for recording student hours worked, which is signed by the cooperative education employer, does not differentiate between hours worked and student lunch breaks.*  *In addition, document review indicated that the notice of nondiscrimination in both the cooperative education student application and the cooperative education employment agreement does not include gender identity as a protected category. (Legal Citation: Code of Federal Regulations Title 29 (CFR 29) Parts 570.51-570.68, M.G.L. c. 74 Sections 1, M.G.L. c.149, Sections 1, Vocational Technical Education Regulations 603 CMR 4.03(7), Chapter 385 of the Acts of 2002*)  **Narrative Description of Corrective Action:**   1. There is no safety and health orientation specific to the work site for all employee-students.   **Corrective Action:** The Director of Cooperative Education or Technical Instructor will complete the General Worksite Safety and Health Checklist for each site.   1. The pre-placement safety evaluation reviews and documents safety on a general level only, as the documentation states that the work site appears to comply with OSHA regulations common in the industry.   **Corrective Action:** The Director of Cooperative Education or Technical Instructor will complete the Worksite Assessment Checklist for each cluster.   1. Regular supervisory activities to ensure the Cooperative Education agreement is followed at the work site occur, but an individual conducting these visits has no vocational license.   **Corrective Action:** The Director of Cooperative Education or Technical Instructor will complete the General Worksite Safety and Health Checklist, Worksite Assessment Checklist, and/or supervisory visits only.   1. The student cooperative education application does not include academic teacher signatures.   **Corrective Action:** The Cooperative Education Approval Form includes academic teacher signature. | | | |
| 1. The cooperative education agreement does not identify the technical skills to be acquired by the student. A review of student records and interviews also revealed that the district system for recording student hours worked, which is signed by the cooperative education employer, does not differentiate between hours worked and student lunch breaks.   **Corrective Action:** The weekly timecard includes the technical skills the student is acquiring. The timecard procedure has been updated in the Cooperative Education Manual to ensure students are not working more than 9 hours / day if they are under 18 years of age.  In addition, documentation review indicated that the notice of nondiscrimination in both the cooperative education student application and the cooperative education employment agreement does not include gender identity as a protected category.  **Corrective Action:** The Cooperative Education Student application and Cooperative Education Employment agreement does include gender identity and is stated on each form. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Stacey Bezanson | | **Expected Date of Completion for Each Corrective Action Activity: October 1, 2015** | |
| **Evidence of Completion of the Corrective Action:** Worksite Safety & Health Checklist, Manufacturing, Engineering & Technology Worksite Assessment Checklist, Cooperative Education Approval Form, Co-op Weekly Attendance & Evaluation Form, Procedure when an employer violates a Child Labor Law & Email, Safety Checklists. . **(Attachment)** | | | |
| **Description of Internal Monitoring Procedures:** The Director of Cooperative Education will review the Cooperative Education Manual quarterly. The Director of Cooperative Education will sample student records quarterly to verify the correct forms are being used and procedures are being followed. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 13 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not applicable | | | |
| **Department Order of Corrective Action:** Not applicable | | | |
| **Required Elements of Progress Report(s):**  Progress Report #1: The district has already submitted evidence that the cooperative education student application and the cooperative education agreement have been revised to include gender identity as a protected category in the notice of nondiscrimination. The district will submit evidence of the system now in place to ensure that all requirements that were cited are now in place. These include a) safety and health orientation specific to the work site for all employee-students; 2) the pre-placement safety review 3) regular supervisory activities conducting by a staff member or members holding a vocational license; 4) the cooperative education agreement identifies the technical skills to be acquired by the student; and 5) a system for reviewing the hours worked by students to ensure they are in compliance with MA child labor laws.  Progress Report #2: The district will also provide evidence that the internal monitoring procedure (that the district proposed and which was approved) is being used. The procedure described is that the Director of Cooperative Education will review the Cooperative Education Manual quarterly, and that the Director of Cooperative Education will sample student records quarterly to verify the correct forms are being used and procedures are being followed. This can be evidenced in memos or a written summary attesting to the fact that the internal monitoring procedure is being utilized. | | | |
| **Progress Report Due Date(s): January 25, 2016; March 17, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 14 | | **Rating:** Partially Implemented | |
| **Department CPR Finding:**  *A review of documents and interviews indicated that the forms and procedures used for non-cooperative education do not include gender identity as a protected category in the notices of nondiscrimination.*  *(Legal Citation: Perkins Section 134, M.G.L. c. 74 Section 2A, M.G.L. c. 152, Vocational Technical Education Regulations 603 CMR 4.03(4), Chapter 385 of the Acts of 2002)* | | | |
| **Narrative Description of Corrective Action:** The Assistant Superintendent/Principal has reviewed and changed all documents to include the gender identity as a protected category in the notices of nondiscrimination | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Assistant Superintendent/Principal - Jill Davis | | | **Expected Date of Completion for Each Corrective Action Activity:** September 1, 2015 |
| **Evidence of Completion of the Corrective Action:** The following has been added to any and all notices that are on our website, letters, handbooks, etc.; **“Greater Lowell Technical High School is an equal opportunity employer and does not discriminate on the basis of race, color, religion, sex, gender identity, national origin, sexual orientation, disability, age, homelessness, criminal records, military status or genetics. In addition, Greater Lowell is committed to providing an environment free from sexual harassment and prohibits retaliation against individuals who oppose such discrimination and harassment or who participate in an equal opportunity investigation. Employees or applicants for employment may contact Ms. Tracy Encarnacao, Director of Guidance & Counseling Services, Title IX / Section 504 Coordinator at 978.441.4955,** [**tencarnacao@gltech.org**](mailto:tencarnacao@gltech.org) **or contact Kathy Tierney, Director of Human Resources at 978-441-4892, and** [**ktierney@gltech.org**](mailto:ktierney@gltech.org) **for information.” (Attachment)** | | | |
| **Description of Internal Monitoring Procedures:** All materials must be approved through theAssistant Superintendent/Principal - Jill Davis’ office before they are release or made public and they must include the statement above. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 14 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not applicable | | | |
| **Department Order of Corrective Action:** Not applicable | | | |
| **Required Elements of Progress Report(s):**  Progress Report #1: The district will provide a copy of the forms used for non-cooperative education, evidencing that they now include gender identity as a protected category in the notices of nondiscrimination.  Progress Report #2: If the first progress report is approved, a second progress report will not be required. | | | |
| **Progress Report Due Date(s): January 25, 2016; March 17, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 20 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *A review of documents and instructional facilities by the DESE CVTE safety specialist indicate that not all career/vocational technical education instructional facilities meet current occupational standards. The Office for Career/Vocational Technical Education will send the official Safety Survey Report, which includes details specific to each program, to Superintendent Bourgeois under separate cover.*  *(Legal Citation: 603 CMR 4.03 (3) (4) (7)(8))* | | | |
| **Narrative Description of Corrective Action:** We have responded to the Safety Report and completed all recommendations except for 5 items which will be addressed and expected completion by October 31, 2015 | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent- Director Roger Bourgeois | **Expected Date of Completion for Each Corrective Action Activity:** October 31, 2015 | | |
| **Evidence of Completion of the Corrective Action:** A copy of the Safety Report that was submitted to the Department of Education on Friday, September 18, 2015 . **(Attachment)** | | | |
| **Description of Internal Monitoring Procedures:** The Superintendent holds monthly Safety meetings to discuss school incidents and any questions and/or concerns people may have.The Cluster Chairs and the Plant Services work together to create work orders to have all concerns addressed. The Safety Team will also conduct “Safety Walks” during and after school to confirm the Safety plans and procedure remain in place and consistent. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 20 | | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):** The district is required to complete the Safety Survey Report and email the report to Dave Edmonds of the Office for Career/Vocational Technical Education.The district will continue to provide Dave Edmonds with monthly updates using the Safety Survey Report Response Template, as requested. Summaries of progress made will be provided in subsequent Progress Reports submitted through the CAP process. | | | |
| **Progress Report Due Date(s):**  **January 25, 2016; March 17, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 21 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *A review of documents and instructional facilities by the DESE CVTE safety specialist indicate that not all career/vocational technical education instructional equipment meet current occupational standards. The Office for Career/Vocational Technical Education will send the official Safety Survey Report, which includes details specific to each program, to Superintendent Bourgeois under separate cover.*  *(Legal Citation: 603 CMR 4.03 (3) (4) (7) (8))* | | | |
| **Narrative Description of Corrective Action:**  We have responded to the Safety Report and completed all recommendations except for 5 items which will be addressed and expected completion by October 31, 2015 | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent- Director Roger Bourgeois | | **Expected Date of Completion for Each Corrective Action Activity: October 31, 2015** | |
| **Evidence of Completion of the Corrective Action:**  A copy of the Safety Report that was submitted to the Department of Education on Friday, September 18, 2015. **(Attachment)** | | | |
| **Description of Internal Monitoring Procedures:** The Superintendent holds monthly Safety meetings to discuss school incidents and any questions and/or concerns people may have.The Cluster Chairs and the Plant Services work together to create work orders to have all concerns addressed. The Safety Team will also conduct “Safety Walks” during and after school to confirm the Safety plans and procedure remain in place and consistent. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 21 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):** The district is required to complete the Safety Survey Report and email the report to Dave Edmonds of the Office for Career/Vocational Technical Education. The district will continue to provide Dave Edmonds with monthly updates using the Safety Survey Report Response Template, as requested. Summaries of progress made will be provided in subsequent Progress Reports submitted through the CAP process. | | | |
| **Progress Report Due Date(s):**  **January 25, 2016; March 17, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 22 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews indicated that the district has an established system for data analysis. However, not all technical teachers are aware of the Perkins Act Core Indicator of Performance outcomes beyond Perkins core indicator 5S1, which reports the results of the career/vocational technical education graduate follow-up surveys. Therefore, the technical teachers cannot utilize the Perkins Act Core Indicator of Performance data to improve programs and outcomes for students. (Citation: Perkins Section 113)* | | | |
| **Narrative Description of Corrective Action:** As part of Greater Lowell Technical High School Professional Development it will be important to identify the Core Indicators of Performance of concern and have program and cluster discussions on how they affect the students and the clusters/teams. Teaching teachers to interpret the data that is part of the Perkins annual report and having them be involved in the creation of the actual report. Using the Annual Report as a working document for each program will be helpful to improve the program and the outcomes of students. . **(Attachment)** | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  Cluster Chairs – Don Ducharme, Dan Hamel, Maureen Griffin, Margaret Sarmento, All Vocational Staff in all 24 programs | | **Expected Date of Completion for Each Corrective Action Activity:** June 30, 2016 | |
| **Evidence of Completion of the Corrective Action:** Meeting agendas that will show the discussion of the Core Indicators and how they effect and can info concerning them can be effective in the classroom. The meeting agenda showing the use and interpretation of the Perkins annual report. | | | |
| **Description of Internal Monitoring Procedures:** Checking teachers lesson plans and having conversations during staff meetings and using and discussion the Perkins Annual report after it is filed. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 22 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable. | | | |
| **Department Order of Corrective Action:** Not Applicable. | | | |
| **Required Elements of Progress Report(s):** Progress Report #1: The district will submit meeting agendas, and any other relevant materials that will show the discussion of the Core Indicators with the technical teachers, including how the data can be used to improve programs and the outcomes for students. If the district has established expectations of the use of Perkins Core Indicator Data by teachers, the district can also provide that information in the progress report narrative.  Progress Report #2: The district will also provide evidence that the internal monitoring procedure (that the district proposed and which was approved) is being used. That procedure is described as checking teacher lesson plans and having conversations during staff meetings and using and discussion the Perkins Annual report after it is filed.  Evidence can be minutes, memos, or a written summary attesting to the fact that the internal monitoring procedure is being utilized. | | | |
| **Progress Report Due Date: January 25, 2016; March 17, 2016** | | | |