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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: South Shore 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 08/19/2015.

**Mandatory One-Year Compliance Date:** **08/19/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |

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

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that while a summary is provided to parents at the conclusion of the IEP Team meeting, which includes a completed IEP service delivery grid describing the types and amounts of special education and related services, as well as a statement of the major goal areas associated with these services, the district sends only one copy of the proposed IEP and placement to parents immediately, instead of two copies. | | |
| **Description of Corrective Action:**  District efforts to guarantee and maintain compliance will be as follows:  As of February 6, 2015 the district is now sending two copies of the proposed IEP and placement to parents immediately following development. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The first progress report submitted to the Department of Elementary and Secondary Education Program Quality Assurance will include supporting evidence that reflect this change in practice. | | |
| **Description of Internal Monitoring Procedures:**  From February 6, 2015 and moving forward, the Director of Special Education reviewed this area of partial compliance with the Special Education secretary and the members of the Special Education department. The change in practice will be that prior to the district sending out a proposed IEP, the Special Educator who writes the IEP, the Special Education secretary, and Director of Special Education will ensure that on the N1 it is indicated 2 copies of the IEP are being sent to the parents/guardians. The Special Education secretary will send out 2 copies of the proposed IEP to the parents/guardians for every student on an IEP. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date:** 10/05/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 6, 2015, submit evidence of notification of the new procedures to appropriate staff.  By February 5, 2016, submit the results of an internal review of student records and include the following: 1. The number of records reviewed; 2. The number of records in compliance; 3. For any records not in compliance, determine the root cause; and 4. The specific corrective actions taken to remedy the non-compliance.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to ESE upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  11/06/2015  02/05/2016 | | |

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

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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 if a student is removed from the general education classroom at any time, the IEP Non-participation Justification statement does not always state why the removal is considered critical to the student's program and the basis for the Team's 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:**  District efforts to guarantee and maintain compliance will be as follows:  By September 30, 2015 the following actions will occur to address the finding of partial compliance:  - the SSVT policy will be revised to ensure that each student's IEP Justification Statement will clearly describe the need for removal from the general education setting to ensure student progress in the least restrictive environment  - training will be provided to all pertinent staff to ensure that each individual student's IEPs will be written to ensure compliance with the mandatory regulations  - an agenda and sign in sheet will be generated as part of the training process | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  1. The first progress report submitted to the Department of Elementary and Secondary Education Program Quality Assurance will include:  -the agenda and attendance sign in sheet of the above described training  2. The second progress report submitted to the Department of Elementary and Secondary Education Program Quality Assurance will include:  -the total number of student special education records reviewed  -the total number of student special education records reviewed that are found to be in compliance as well as the percentage of student special education records in compliance after the policy revision and staff training session | | |
| **Description of Internal Monitoring Procedures:**  All members of the Special Education department who write student IEPs will include a statement why the removal from general education at any time is critical to the student's program as well as the basis for the Team's conclusion that the education of the student in the least 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:** 10/05/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 6, 2015, submit evidence of training, including the agenda and sign-in sheet, on the appropriate completion of the Non-participation Justification statement.  By February 5, 2016, submit the results of an internal review of student records and include the following: 1. The number of records reviewed; 2. The number of records in compliance; 3. For any records not in compliance, determine the root cause; and 4. The specific corrective actions taken to remedy the non-compliance.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to ESE upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  11/06/2015  02/05/2016 | | |