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

##### COORDINATED PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Revere

CPR Onsite Year: 2015-2016

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 02/29/2016.

**Mandatory One-Year Compliance Date:** **02/28/2017**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 3A | Special requirements for students on the autism spectrum | Partially Implemented |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 18A | School district employment practices | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  SE 3A Special requirements for students on the autism spectrum | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that for students on the autism spectrum, IEP Teams do not consistently consider and specifically address the needs resulting from a child's unusual responses to sensory experiences or the needs resulting from engagement in repetitive activities and stereotyped movements. | | |
| **Description of Corrective Action:**  A review of student records and interviews indicated that for students on the autism spectrum, IEP Teams do not consistently consider and specifically address the needs resulting from a child's unusual responses to sensory experiences or the needs resulting from engagement in repetitive activities and stereotyped movements. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent and Assistant Directors of Special Education | | **Expected Date of Completion:**  03/04/2017 |
| **Evidence of Completion of the Corrective Action:**  The Assistant Directors of Special Education will conduct a training for all Special Education Liaisons to ensure their understanding of the requirements for SE #3A outlining that the IEP Team shall consider and shall specifically address the following: the verbal and nonverbal communication needs of the child; the need to develop social interaction skills and proficiencies; the needs resulting from the child's unusual responses to sensory experiences; the needs resulting from resistance to environmental change or change in daily routines; the needs resulting from engagement in repetitive activities and stereotyped movements; the need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from autism spectrum disorder; and other needs resulting from the child's disability that impact progress in the general curriculum, including social and emotional development. Additionally, the training will clarify the district's procedures for using an Autism discussion checklist at team meetings. This Autism discussion checklist will be completed by Special Education Liaisons at team meetings, referenced in the IEP, and submitted with the IEP packet to the Assistant Directors of Special Education for review. | | |
| **Description of Internal Monitoring Procedures:**  An internal review of 20 student records will be conducted to ensure Special Education Liaisons are documenting the team's discussion of the seven specific areas of need when developing the IEP for a student with ASD. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3A Special requirements for students on the autism spectrum | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 04/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and monitoring system to ensure that IEP Teams consider and specifically address the 7 areas of autism. The system should include oversight and periodic reviews by the Assistant Directors of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By June 10, 2016, for those students identified by the Department, submit documentation as described in the Student Record Worksheet, mailed to the district via regular post.  By June 10, 2016, submit evidence of staff training on the 7 areas of IEP development for students with ASD. Evidence should include a dated meeting agenda, staff attendance sheet, and training materials.  By June 10, 2016, submit a description of the district's internal oversight and monitoring system with periodic reviews, along with the name/role of the designated person(s).  By October 21, 2016, conduct an internal review of records for approximately 15 ASD students with IEPs developed subsequent to implementation of all corrective actions, for evidence that all 7 areas of need are documented in IEPs. Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records found to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  06/10/2016  10/21/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  SE 8 IEP Team composition and attendance | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that required IEP Team members are not consistently excused in writing by parents in advance of IEP Team meetings. Specifically, general education teachers for students involved in a general education program are absent from IEP Teams without written parent excusal, although they consistently provide written input in advance to the IEP Team and parent for development of the IEP. | | |
| **Description of Corrective Action:**  A review of student records and interviews indicated that required IEP Team members are not consistently excused in writing by parents in advance of IEP Team meetings. Specifically, general education teachers for students involved in a general education program are absent from IEP Teams without written parent excusal, although they consistently provide written input in advance to the IEP Team and parent for development of the IEP. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent and Assistant Directors of Special Education | | **Expected Date of Completion:**  03/04/2017 |
| **Evidence of Completion of the Corrective Action:**  The Assistant Directors of Special Education will conduct a training for all Special Education Liaisons to ensure their understanding of the requirements for SE #8 and the district's procedures for securing parents' written excusal of team members in advance of IEP Team meetings. An Attendance Sheet and a signed Team Member Excusal Form, where appropriate, will be submitted by the Special Education Liaison as a part of the IEP packet to the Assistant Directors of Special Education. | | |
| **Description of Internal Monitoring Procedures:**  An internal review of 20 student records will be conducted to ensure Special Education Liaisons are documenting parent? written excusal of team members in advance of IEP Team meetings. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 04/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and monitoring system to ensure that required IEP Team members are consistently excused in writing by parents in advance of IEP Team meetings. The system should include oversight and periodic reviews by the Assistant Directors of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By June 10, 2016, submit evidence of staff training on the district's required Team member excusal process. Evidence should include a dated meeting agenda, staff attendance sheet, and training materials.  By June 10, 2016, submit a description of the district's internal oversight and monitoring system with periodic reviews, along with the name/role of the designated person(s).  By October 21, 2016, conduct an internal review of approximately 15 records for students with IEPs convened subsequent to implementation of all corrective actions, for evidence that required Team members who cannot attend are excused in writing in advance of the meeting. Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records found to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  \*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 the person(s) who conducted the review, their role(s), and their signatures. | | |
| **Progress Report Due Date(s):**  06/10/2016  10/21/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that IEP Teams do not always consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing. | | |
| **Description of Corrective Action:**  A review of student records indicated that IEP Teams do not always consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent and Assistant Directors of Special Education | | **Expected Date of Completion:**  03/04/2017 |
| **Evidence of Completion of the Corrective Action:**  The Assistant Directors of Special Education will conduct a training for all Special Education Liaisons to ensure their understanding of the requirements for SE #18a and the district's procedures for documenting and appropriately addressing students' needs when he/she may be vulnerable to bullying, harassment or teasing. The Special Education Liaison will submit to the Assistant Directors of Special Education IEPs which clearly outline the team's consideration of disability-related needs regarding bullying, harassment, or teasing, and where necessary, the interventions, related services and/or goals designed to address those needs. | | |
| **Description of Internal Monitoring Procedures:**  An internal review of 20 student records will be conducted to ensure Special Education Liaisons are considering and specifically addressing the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 04/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and monitoring system to ensure that IEP Teams consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing. The system should include oversight and periodic reviews by the Assistant Directors of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By June 10, 2016, submit documentation for those students identified by the Department as described in the Student Record Worksheet, mailed to the district via regular post.  By June 10, 2016, submit evidence of staff training on IEP development for students whose disability makes him or her vulnerable to bullying, harassment, or teasing.  By June 10, 2016, submit a description of the district's internal oversight and monitoring system with periodic reviews, along with the name/role of the designated person(s).  By October 21, 2016, conduct an internal review, post training, of approximately 15 records for students whose disability affects social skills development and whose disability makes him or her vulnerable to bullying, harassment, or teasing. Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records found to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  \*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 the person(s) who conducted the review, their role(s), and their signatures. | | |
| **Progress Report Due Date(s):**  06/10/2016  10/21/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that although the district provides the parent with a Team meeting summary and two (2) copies of the proposed IEP and proposed placement along with the required notice, the IEP and placement are not always sent within ten (10) school working days following the IEP Team meeting. | | |
| **Description of Corrective Action:**  A review of student records indicated that although the district provides the parent with a Team meeting summary and two (2) copies of the proposed IEP and proposed placement along with the required notice, the IEP and placement are not always sent within ten (10) school working days following the IEP Team meeting. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent and Assistant Directors of Special Education | | **Expected Date of Completion:**  03/04/2017 |
| **Evidence of Completion of the Corrective Action:**  The Assistant Directors of Special Education will conduct a training for all Special Education Liaisons to ensure their understanding of the requirements for SE #18b and the district's procedures for sending parents two copies of the proposed IEP and placement page within ten school working days. The Special Education Liaison will submit to the Assistant Directors of Special Education the proposed IEP and placement page in order for these documents to be sent to the parent with ten school working days of the Team meeting. | | |
| **Description of Internal Monitoring Procedures:**  An internal review of 20 student records will be conducted to ensure two copies of the proposed IEP and placement page are sent to parents within ten school working days of the Team meeting. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 04/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and monitoring system to ensure that parents receive copies of the proposed IEP within 10 days of the IEP meeting. The system should include oversight and periodic reviews by the Assistant Directors of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By June 10, 2016, submit evidence of staff training regarding the sending of a proposed IEP and placement within ten days to the parent. Evidence of training should include a dated meeting agenda, staff attendance sheet, and training materials.  By June 10, 2016, submit a description of the district's internal oversight and monitoring system with periodic reviews, along with the name/role of the designated person(s).  By October 21, 2016, conduct an internal review of approximately 15 records with IEP development post-training for evidence that the proposed IEP and placement were sent to parents within ten days. Provide an analysis of this review to include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and any steps that the district has taken to remedy the non-compliance.  \*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 the person(s) who conducted the review, their role(s), and their signatures. | | |
| **Progress Report Due Date(s):**  06/10/2016  10/21/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that IEP Teams do not consistently justify the student's removal from the general education classroom and state why the removal of the student from the general education classroom is considered critical to the student's program and the basis for the IEP 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:**  A review of student records indicated that IEP Teams do not consistently justify the student's removal from the general education classroom and state why the removal of the student from the general education classroom is considered critical to the student's program and the basis for the IEP 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. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent and Assistant Directors of Special Education | | **Expected Date of Completion:**  03/04/2017 |
| **Evidence of Completion of the Corrective Action:**  The Assistant Directors of Special Education will conduct a training for all Special Education Liaisons to ensure their understanding of the requirements for SE #20 and the district's procedures for appropriately justifying the student's removal from the general education classroom. The Special Education Liaison will submit IEP's that consistently and appropriately justify the student's removal from the general education classroom. | | |
| **Description of Internal Monitoring Procedures:**  An internal record review of 20 student serviced outside of the general education classroom will be conducted to ensure Special Education Liaisons are justifying the student's removal from the general education classroom. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 04/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and monitoring system to ensure that Non-Participation Justification statements indicate why the removal of the student from the general education classroom is considered critical to the student's program. The system should include oversight and periodic reviews by the Assistant Directors of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By June 10, 2016, submit evidence of staff training on the development of non-participation justification statements in IEPs, ensuring that these statements clearly 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. Evidence of training should include a dated meeting agenda, staff attendance sheet, and training materials.  By June 10, 2016, submit a description of the district's internal oversight and monitoring system with periodic reviews, along with the name/role of the designated person(s).  By October 21, 2016, conduct an internal review of approximately 15 records for students with IEP development subsequent to implementation of all corrective actions, for evidence that non-participation justification statements in IEPs clearly state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Submit a detailed analysis of this review, which will include the number of records reviewed and the number of records found to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and the immediate steps that the district has taken to remedy the non-compliance.  \*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 the person(s) who conducted the review, their role(s), and their signatures. | | |
| **Progress Report Due Date(s):**  06/10/2016  10/21/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 3 Access to a full range of education programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Although the 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:**  In all identified areas within the handbooks added "Homeless" to protected groups regarding equal access to a full range of education programs... | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  03/24/2016 |
| **Evidence of Completion of the Corrective Action:**  All 6 handbooks have been uploaded separately with identification of which page the change was made on. This change does not require school committee approval and is currently live on our website for immediate use. New staff sign off on acceptance of the handbook and all staff sign off at the beginning of the school year. All our handbook are electronic along the electronic sign off. This could only be changed in the future if someone actively deleted it from the handbooks. | | |
| **Description of Internal Monitoring Procedures:**  As always, we will make sure all staff, students and parents sign off electronically at the beginning of the school your to acknowledge they have read the handbook. We will continue to monitor any areas where we need to add protected classes to our existing list. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date:** 04/08/2016  **Correction Status:** Corrected | |
| **Basis for Decision:**  With the uploading of additional documents, the district was able to demonstrate that its anti-discrimination policy has been updated to include the protected category of homelessness. This policy has been approved and added to all 2015-2016 handbooks and the Department was able to confirm that it is available on the district's website. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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

|  |  |  |  |
| --- | --- | --- | --- |
| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review demonstrated the following issues with the district's written notice to students 16 or over leaving school without a high school diploma and their parents/guardians: 1) the notice is not sent to the student; 2) the notice is not sent within five (5) days from the student's tenth unexcused consecutive absence; and 3) the notice does not offer at least two dates and times for an exit interview between the superintendent (or designee) and the student and the parent/guardian. | | | |
| **Description of Corrective Action:**  All high school administrators were trained on utilizing the newly formatted letter which describes 2 dates to meet, is sent to both parent and student, sent within 5 days. The administration modified the letter and translated it into several languages. Uploaded is examples of the letter sent out since January 1 of this year in CR16CAP1. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  03/24/2016 | |
| **Evidence of Completion of the Corrective Action:**  Uploaded in CR16CAP1. Also, these letters will automatically generate through Power School once the student over 16 hits the 10th absence or is withdrawn without a transferring school. | | | |
| **Description of Internal Monitoring Procedures:**  We will monitor the Power School accuracy rate of determining these students and make sure their is coordination with those individuals providing tiered drop out prevention intervention to ensure we are addressing all the students in need. | | | |
| 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:** Approved  **Status Date:** 04/08/2016  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By June 10, 2016, submit the district's revised written notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion, as well as evidence that this information has been disseminated to all building principals and relevant staff.  Please note that the uploaded notice is the same as previously submitted for the self-assessment and must be corrected as indicated by the district's CAP. | | | |
| **Progress Report Due Date(s):**  06/10/2016  10/21/2016 | | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 18A School district employment practices | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the district's notice for job vacancies does not address the specific protected categories of race, color, national origin, sex, or disability. | | |
| **Description of Corrective Action:**  Reviewed all job posting and applications for employment to ensure they address the protected categories of race, color, national origin, sex, or disability. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  03/24/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence uploaded in "Additional Documents" to include the language applying to all postings in School Spring automatically (5 recent examples CR18ACAP1) along with all eleven of our non-teaching position applications with the same language down the bottom (CR18ACAP2) | | |
| **Description of Internal Monitoring Procedures:**  Since these are permanent changes from this point forward it would require someone to actively remove it. We will continue to monitor our hiring process to ensure we are in compliance and make sure any new jobs that are not advertised on School Spring or have an internal application (we have no plans to create any new jobs such as this) will be in compliance in the advertising, application and hiring process. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 18A School district employment practices | **Corrective Action Plan Status:** Approved  **Status Date:** 04/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By June 10, 2016, submit the revised notice for job vacancies to address the specific protected categories of race, color, national origin, sex, or disability, along with evidence of its dissemination. | | |
| **Progress Report Due Date(s):**  06/10/2016  10/21/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that while individual teachers review educational materials for simplistic and demeaning generalizations, gender identity is not included in the curriculum review as a protected category. | | |
| **Description of Corrective Action:**  A global email will be sent out to all staff ensuring that they continue to follow their practice of reviewing all educational materials for simplistic and demeaning generalizations but ensure they add "Gender identity" to this criteria for reviewing educational materials. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  07/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of email sent including distribution list | | |
| **Description of Internal Monitoring Procedures:**  Work with curriculum directors to ensure Gender Identity is identified in specifically as part of their review process. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 04/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By June 10, 2016, provide evidence that all teaching staff were informed to include gender identity as a protected class when reviewing educational materials for simplistic and demeaning generalizations. | | |
| **Progress Report Due Date(s):**  06/10/2016 | | |

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

District: Revere Public Schools

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Albert Mogavero, ELL Director

CAP Form will expand to as many lines as necessary. Before completing and emailing to pqacap@doe.mass.edu, please see separate *Instructions for Completing Corrective Action Plans.*

All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report to the school or district.

**Mandatory One-Year Compliance Date: May 23, 2017**

|  |  |  |  |
| --- | --- | --- | --- |
| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| Criterion & Topic: ELE 5 Program Placement and Structure | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Staff interviews, documentation submitted by the district and student performance data such as English proficiency attainment and academic progress of ELs indicated that the district does not provide sufficient ESL instruction to ELs at the elementary schools to promote and support the rapid acquisition of English language proficiency by these students as is required in G.L. c. 71A and there are inconsistencies in the level of ESL instruction provided to ELs regardless of their proficiency levels. For instance, some of the students at proficiency levels 1 and 2 receive as few as 25 minutes of daily ESL instruction while some other Level 1 and Level 2 students receive 60 minutes and some Level 5 students are provided 50 minutes of ESL instruction per day. Furthermore, at Rumney Marsh Academy ELLs who are entitled to receive both language and disability related services under the Individuals with Disabilities Education Act (IDEA) and Section 504 of the Rehabilitation Act of 1973 (Section 504) are not provided access to ELE services available to other students in the district. Please see* *20 U.S.C. §§1400-1419; 34 C.F.R. pt.300 (IDEA, Part B and its implementing regulations); 29 U.S.C. § 794 and 34 C.F.R. pt.104 (Section 504 and its implementing regulations.* | | | |
| **Narrative Description of Corrective Action:** The ESL Director is currently researching and analyzing ESL schedules and other ESL programs to correct ESL instructional time discrepancies and to develop a plan that will address where ESL instructional time is not provided. All ELL students in all schools will receive ESL instructional services beginning in September 2016. Where appropriate, ESL teachers with lighter loads will have partial reassignments to meet the needs in other schools where adequate time or services were not possible in the past. In addition,the ESL Director will send an official list of all ELL students and their proficiency levels to all schools (Principals and ESL teachers) before August 2016. In addition, the ELL director will meet with all principals and ESL teachers in August and September 2016 to review the guidelines of the Guidance on Identification, Assessments, Placement, and Reclassification of English language learners so that everyone has a complete understanding of the daily ESL instructional time for students. The ESL Director will also complete an ELL Student Roster Sheet with the appropriate ESL Instructional time for each student, especially at Level 1 and Level 2, and send it to all principals and ESL teachers so that they have a model guideline of the amount of daily instructional time that ELL students at each proficiency level are to receive. Elementary ESL teachers will then provide their principal and the ESL Director with their individual ELL Student Roster Sheet of each student and their daily instructional ESL time. The Student Roster Sheets will be collected in early October 2016 and again in March 2017 by the ESL Director who will monitor the ESL instructional time. The ESL Director will review the ELL Student Roster Sheets with the principals and adjust the instructional time as needed as stated in the Guidance guidelines. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Albert Mogavero, ELL Director  Principals  ESL teachers | | **Expected Date of Completion for Each Corrective Action Activity:** August 2016-Official ELL Student list and proficiency levels sent to principals and ESL teachers.  August-September 2016-Meetings with Principals and ESL teachers  August 2016- ELL student Roster and Appropriate ESL instructional times sent to principals and ESL teachers.  October 2016-ESL teachers send their individual ELL Student Roster and ESL instructional times for each student to the ELL Director  October 2016-ESL Director reviews ESL Student Schedules, makes scheduling adjustments if necessary and informs principals and ESL teachers.  March 2017- ESL Director reviews ESL Student Schedules, makes scheduling adjustments if necessary and informs principals and ESL teachers. | |
| **Evidence of Completion of the Corrective Action:** ELL Student lists, ESL Director’s model ELL student roster and ESL instructional times, individual teacher ELL Student rosters and ESL instructional times, agenda with dates and sign in sheet with principals and ESL teachers, ESL Director schedule ( ELL Student Roster) reviews and recommendations to principals/teachers. | | | |
| **Description of Internal Monitoring Procedures:** The ESL Director will collect all teacher ELL Student rosters, making adjustments if necessary and providing technical assistance and consultation to principals and ESL teachers of the necessary adjustments to meet ESL instructional times, especially for Level 1 and Level 2 students. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 5 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  1- Please complete district information in the attached spreadsheet labeled EL List by school for each EL at elementary schools and Rumney Marsh Academy.  2- Provide a copy of the 2016-17 ESL teacher schedules for all grade levels in the district’s elementary schools and Rumney Marsh Academy. All schedules should include the following for each block of time:   * + Names of the ELL students   + Grade level for each student;   + English proficiency level for each student | | | |
| **Progress Report Due Date(s): October 24, 2016** | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 10 Parent Notification | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of student records indicated that reports containing, but not limited to, progress in becoming proficient in using the English language are not consistently completed and documented in student records.* | | | |
| **Narrative Description of Corrective Action:** The ESL Director will 1) create a checklist of all required documentation that must be documented, completed and stored in all ELL cumulative folders before September 2016. 2) The ESL Director will revise RPS Initial Identification Placement form and Annual Notification forms to align completely with the DESE ELL forms before September 2016. The new forms will contain the elements A-H of ELE Criterion Number 10. 3) The ESL Director will translate the forms, and mail the Initial Identification form and the Parent Notification form directly from the ELL Office immediately after ELL identification and thereafter yearly after the end of the last marking period. 4) The ELL Director will make copies that will be kept at the ELL Office and also distributed to each school where they will also be placed in students’ cumulative folders. 5) The ELL Director and/or the ELL Program Manager will conduct a review of at least five different records for each school twice per year (December and May) ensuring the forms have been sent home and that the Parent notification forms are maintained in the cumulative folders at the ELL Office and at each school. 6) A record review form containing the names of students’ records reviewed, the number of records in compliance and in non- compliance, the date and the name of the record reviewer will be provided as evidence of progress monitoring. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** ESL Director, ELL Office Manager | | **Expected Date of Completion for Each Corrective Action Activity:** July 2016, Parent notification letters mailed home, copies placed in all cum folders. Checklist that matches letters sent home to each ELL student. August 2016, all RPS forms revised to align with DESE ELL Forms. December 2016 and May 2017, the ELL Director and/or ELL Office manager will review at least five records of different students per school. | |
| **Evidence of Completion of the Corrective Action:** Revised Identification letter and Parent Notification letter, Checklist matching letters sent home to each individual ELL student. Record review documentation of the records reviewed during the year will be provided as evidence of progress monitoring. | | | |
| **Description of Internal Monitoring Procedures:** ELL documentation checklist of Initial Identification and Annual Parent notification, Internal progress monitoring by ELL Director and/or ELL Office Manager of at least 5 records (cum folders) at the ELL Office and per school in December and May. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 10 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** The Corrective Action Plan proposed by the district does not address the distribution of report cards and progress reports including, but not limited to, progress in becoming proficient in using English language (ELD). | | | |
| **Department Order of Corrective Action:** Ensure the student progress reports for each grade level include are consistently completed and documented in the student record. | | | |
| **Required Elements of Progress Report(s):**  **By October 24, 2016, s**ubmit template ELE progress reports for elementary, middle, and high school. Submit evidence of training to relevant staff members on the progress report, including frequency of reporting, completion of the form, and its maintenance in the student record, along with a training agenda, signed attendance sheets and training materials.  By **April 10, 2017**, conduct an internal review of approximately 10 records of ELLs for evidence that all records contain a valid Parent Notification form and ELE progress report. 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 when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request  a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s).** | | | |
| **Progress Report Due Date(s): October 24, 2016; April 10, 2017** | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| 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:** *Document review indicated that records of ELs did not consistently contain progress reports.* | | | |
| **Narrative Description of Corrective Action:** The ESL Director will create a checklist of all required ELL forms that must be documented, completed and stored in all ELL cumulative folders before September 2016. Thereafter, the ESL Director will meet with all principals, ESL teachers at all schools in September 2016 to implement the new ELL documentation checklist thus ensuring that progress reports are sent home, and kept in every ELL student’s cum folder. ESL teachers will also make copies of progress reports each semester and send them to the ESL Director who will check and match the progress reports to each individual ELL student. Progress reports will also be kept on file in the ELL Office. During the school year, once per semester, the ESL Director will conduct a review of several records at each school thus ensuring that progress reports are sent home and are kept in the cum files. The ELL Director will create a record review form of the cumulative folders reviewed, at both the ELL Office and at each school, and the date of the review thus ensuring compliance. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Albert Mogavero, ESL teachers, ELL Office Manager, principals | | **Expected Date of Completion for Each Corrective Action Activity:** ELL documentation checklist created in August 2016; Sign-in sheet and agenda of ELL Director meetings with Principals and ESL teachers September 2016; Check-off list of matching ELL names to progress reports throughout the year (each trimester); Periodic record review each trimester (Nov, March 2017, May 2017). | |
| **Evidence of Completion of the Corrective Action:** ELL Documentation checklist, ELL-progress reports matching checklist, ELL Director and principal and ESL teacher meetings, record review checklist. | | | |
| **Description of Internal Monitoring Procedures:** Monitoring by ESL Director who will review cum folders, check-off list of matching progress reports to students. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 18 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  By **October 24, 2016,** submit a description of the district’s internal oversight system for monitoring the inclusion of English proficiency progress reports on the ELL student records. Submit evidence of training on the revised documentation procedure to relevant staff members, along with a training agenda, signed attendance sheets and training materials.  By **April 10, 2017**, conduct an internal review of approximately 10 records of ELLs for evidence that all records contain a valid Parent Notification form and ELE progress report. 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 when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request  a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s).** | | | |
| **Progress Report Due Date(s): October 24, 2016; April 10, 2017** | | | |