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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: West Springfield

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 09/29/2016.

**Mandatory One-Year Compliance Date:** **09/29/2017**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 6 | Determination of transition services | Partially Implemented |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 14 | Review and revision of IEPs | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 29 | Communications are in English and primary language of home | Partially Implemented |
| SE 37 | Procedures for approved and unapproved out-of-district placements | Partially Implemented |
| SE 40 | Instructional grouping requirements for students aged five and older | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Not Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 10C | Student Discipline | 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 22 | Accessibility of district programs and services for students with disabilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |

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

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| **Criterion & Topic:**  SE 6 Determination of transition services | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review indicates that students age fourteen (14) or older are not always invited to attend part or all of the Team meetings at which transition services are discussed or proposed. In addition,  when one purpose of the Team meeting is to discuss transition services, a representative of a public agency who may be responsible for providing or paying for transition services is not invited to the Team meeting. | | |
| **Description of Corrective Action:**  The district has determined that the root cause behind not consistently inviting a student age fourteen or older to attend part or all of the Team meeting at which transition services are discussed or proposed is due to the need for updated training at the district level. The lack of recent training opportunities has resulted in an inconsistent application of the standard. Similarly, the district has determined that the root cause of the district's failure to consistently invite representatives from public agencies who are responsible for providing or paying for transition services was the need for an annual training/review of this process with the Middle School and High School ETLs. Although most students, aged 14 or older, are invited to attend the Team meeting, they were not always included when parents requested that they not attend or if the student refused to attend the meeting. Although district staff work closely with agencies such and DDS and MassRehab, there was a lack of clarity/understanding as to when representatives from these agencies were required to attend meetings.  In order to address these areas of noncompliance, the Special Educator Director and the Assistant Special Education Director will provide an updated training/review with Middle School and High School Evaluation Team leaders on October, 25, 2016 that outlines the need to always invite students aged 14 or older as well as a representative from a public agency that will be providing transition services to the student(when applicable) to the Team meeting. Additionally, at this training, the Evaluation Team Leaders will receive training regarding the use of a form designed to gather student input and increase student participation in team meetings. Information on this form will help the student to express their post-secondary goals, which can be used in both the Transition Plan as well as in the IEP. This training will also review the process of inviting outside agencies to Team meetings. To further improve communication, the special education director and the high school ETLs will meet on a quarterly basis with DDS and MRC to review students and help coordinate upcoming team meetings. The first meeting occurred on 9/22/2016. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  10/25/2016 |
| **Evidence of Completion of the Corrective Action:**  Staff meeting agenda and minutes  Staff attendance sheets  Memorandum sent to staff following the training providing a summary of the process to be followed  Dates of meetings with DDS and MRC  Review to Team Meeting Attendance sheets to ensure appropriate participation | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Director and the Assistant Special Education Director will regularly monitor meeting invitations and attendance sheets will be spot checked to ensure that staff is inviting students and agency representatives to Team meetings. Five IEPs from the Middle and High School levels will be checked on a weekly basis to ensure compliance. These results will be logged on a spreadsheet to document compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 6 Determination of transition services | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit the agenda, meeting minutes, sign-in sheet, and memorandum sent to middle and high school staff following the training on the requirement to invite students age 14 and older to their IEP Team meetings, as well as representatives of public agencies that may be responsible for providing or paying for transition services. Also, provide a copy of the form developed to gather student input and increase student participation in team meetings.  By March 1, 2017, subsequent to all corrective actions, submit the spreadsheet with results of a weekly administrative review of five middle school and high school student records of students age 14 and older to confirm the name of the student age 14 or older and representative of state agencies, when applicable, on the IEP meeting invitation and the N3A. Indicate the number of records reviewed and the number found in compliance. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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

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| **Criterion & Topic:**  SE 8 IEP Team composition and attendance | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and interviews indicate that the district is not documenting a parent's agreement to excuse the attendance of a Team member whose area of the curriculum or related services is not being modified or discussed at the meeting. | | |
| **Description of Corrective Action:**  The District has determined that the root cause behind the failure to consistently document a parent's agreement to excuse the attendance of a Team member whose area of the curriculum or related service was not being modified or discussed at the meeting was due to the need for an updated training. The district does have a form that was developed to document parental consent to excuse a team member. However, that form had not been updated in over ten years, and the district did not provide regular training about the use of this form. Although the waiver of attendance form did exist, Evaluation Team Leaders did not always have access to this form or were unaware of the need to present this form for parents agreement and signature at the meeting. The lack of training, combined with staff turnover, has resulted in an inconsistent application of the policy by Evaluation Team Leaders.  On September 13, 2016, at an Evaluation Team Leader staff meeting, the special education director and assistant director provided an updated training about the policy surrounding the use of the meeting excusal form. A memorandum was developed outlining this process. During the meeting, the need for the form, how to access the form, and when to use the form was outlined for all Evaluation Team Leaders. In addition to raising awareness about the excusal form, the District is now using a version of this form that is available on Semstracker, which is easily accessible to all Evaluation Team Leaders. This practice will eliminate the possibility of forgetting to bring the paper form to a meeting. Implementation of this process began at the completion of the training on September 13, 2016. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  09/13/2016 |
| **Evidence of Completion of the Corrective Action:**  Evaluation Team Leader Meeting Agenda for September 13, 2016 training.  ETL attendance sheet for September 13, 2016 meeting.  Memorandum outlining the process for use of the form.  Completed waiver forms signed by parents. | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Director and Assistant Special Education Director will regularly monitor attendance sheets obtained from IEP meetings to ensure that the waiver form is included in the event that a team member whose area of the curriculum or related service is not being modified or discussed at the team meeting. These results will be logged on a spreadsheet as a way of monitoring compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit the agenda, meeting minutes, sign-in sheet, form to document parental consent to excuse a team member, and memorandum sent to ETL staff following the September 13, 2016, training on the requirement to document a parent's agreement to excuse the attendance of a Team member whose area of the curriculum or related services is not being modified or discussed at the meeting.  By March 1, 2017, submit the spreadsheet with results of the administrative review of attendance sheets from IEP meetings held subsequent to the September 13, 2016, training. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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

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| **Criterion & Topic:**  SE 14 Review and revision of IEPs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and interviews indicate that the district is not ensuring that a Team meeting is held annually, on or before the anniversary date of the IEP, to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate. | | |
| **Description of Corrective Action:**  The District has determined that the root cause for not ensuring that a Team meeting is held annually, on or before the anniversary date, is due to very high case loads for Evaluation Team Leaders, who were often serving in a dual role as an Evaluation Team Leader/School Psychologist. Particular challenges were noted at the end of the school year, where there are a greater number of annual reviews that are due. There was also a need for training and administrative oversight to improve the ability of Evaluation Team Leaders to manage caseloads by using the Semstracker program efficiently and effectively in order to generate annual review reports and re-evaluation due date reports to support compliance.  At the start of the 16/17 school year, the District has hired two additional Evaluation Team Leaders to help reduce caseloads at the elementary and middle school levels. The "dual role" positions of Evaluation Team Leader/School Psychologist have also been restructured so that the Evaluation Team Leader and School Psychologist are now separate and distinct positions, which will help caseload responsibilities.  Additionally, the Assistant Special Education Director will provide a training to the new Elementary Evaluation Team Leaders, as well as the existing Middle and High School Evaluation Team Leaders regarding the use of Semstracker to assist with managing the scheduling of annual reviews. The Assistant Director will meet each month with identified Evaluation Team Leaders to review the upcoming meetings for the next month and ensure the timely scheduling of those meetings. When possible, certain annual reviews will be moved up in order to alleviate an overflow of meetings at the end of the school year. The Assistant Director will also follow up to ensure that the meetings were held on time and will spot check by attending a random sampling of those meetings. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  12/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Minutes of supervision sessions with Assistant Special Education Director  Schedules/reports generated from Semstracker  Agenda/notes from Semstracker training session  Team Meeting notices | | |
| **Description of Internal Monitoring Procedures:**  The Interim Special Education Director and the Assistant Special Education Director will meet on a monthly basis with Evaluation Team Leaders in order to review scheduling procedures and troubleshoot potential roadblocks to compliance. The Interim Director and Assistant Director will also review 10 random IEP meeting packets to ensure that the annual reviews are being scheduled in compliance with DESE regulations. These spot checks will be recorded on a spreadsheet so that progress can be monitored over time. The spreadsheet will also provide information about whether or not a more specific intervention is required in a specific building or with a specific employee. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 14 Review and revision of IEPs | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit the agenda, meeting minutes, and sign-in sheet(s), from the training(s) provided to all Evaluation Team Leaders regarding the use of Semstracker to assist with managing the scheduling of annual reviews.  By March 1, 2017, subsequent to all corrective actions, submit the spreadsheet with results of an administrative review of annual review Team meeting timelines. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and interviews indicate that the district does send the parent two copies of the proposed IEP and placement, with the required notice; however, this information is not sent within  3-5 days of the Team meeting when a meeting summary is not provided. | | |
| **Description of Corrective Action:**  The District has determined that there appears to be two major factors contributing to the delay in sending IEP and placement information to the parents within three to five days of the Team meeting when a meeting summary is not provided. The first factor is that there has been a delay in obtaining a principal's signature on the IEP, especially in the larger schools within the district. The second factor is that the district has identified that draft copies of IEP were not consistently being prepared in advance on team meetings at the Middle School and High School levels. The lack of preparedness would often result in delays getting the final copy out to the parents.  The Interim Special Education Director will speak with building principals about the need to obtain signatures in a timely manner at a district administrators meeting on October 19, 2016. At an Evaluation Team Leader staff meeting on September 13, 2016, the Interim Director and Assistant Director informed Evaluation Team Leaders that IEP signatures can also be obtained at the Central Office.  At the Middle and High School level, the Interim Director and Assistant Director attended department meetings in order to stress the importance of providing the parent with the completed proposed IEP or a draft of the proposed IEP at the conclusion of each team meeting. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  10/28/2016 |
| **Evidence of Completion of the Corrective Action:**  Agenda and minutes of training sessions  Copies of completed IEPs provided to parents at the Team meeting  Copies of draft IEPs provided to parents at the Team meeting | | |
| **Description of Internal Monitoring Procedures:**  The Interim Special Education Director and the Assistant Special Education Director will randomly check IEP packets for compliance. The date of the meeting, signature date, and date sent out will be documented on a spreadsheet to ensure compliance and identify an buildings that may require more support. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's plan does not clearly explain the use of Team meeting summaries, draft IEPs, or the provision of a completed proposed IEP at the conclusion of the IEP Team meeting. If a draft IEP is provided to the parent at the conclusion of a Team meeting, it is considered to be a proposed IEP. Please review Memorandum on the Implementation of 603 CMR 28.05(7): Parent response to proposed IEP and proposed placement at http://www.doe.mass.edu/news/news.aspx?id=3182. | | |
| **Department Order of Corrective Action:**  Submit a description of district procedures to ensure provision of two copies of a proposed IEP and placement, with the required notice, to a parent within required timelines: within 3-5 days after the conclusion of the Team meeting, or alternatively, within two calendar weeks after the provision of Team summary notes at the conclusion of the Team meeting. | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit a copy of the procedures developed by the district to ensure provision of two copies of a proposed IEP and placement, with the required notice, to a parent within required timelines.  By December 23, 2016, submit a copy of the agenda and sign-in sheets, from the September 13, 2016, meeting with Evaluation Team Leaders, the October 19, 2016, meeting with principals, and department meetings with middle and high school special education staff, where the revised protocol for obtaining principal or central office staff signature on IEPs and provision of proposed IEP to the parent within required timelines was reviewed.  By March 1, 2017, subsequent to all corrective actions, submit a spreadsheet that includes a report of the administrative review of student records for the date of the IEP meeting, date of district signature, and date IEP was sent to the parent. Indicate the number of records reviewed and the number found in compliance. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and interviews indicate that the Non-participation Justification statement in the IEP is not specific to each student. In addition, the Non-participation Justification statement does not consistently 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:**  The district has determined that the root cause for not including a statement in the non-participation justification that clarifies why the removal is considered critical to the student's programming as well as the basis for the Team's conclusion that education of the student in a less restrictive environment could not be achieved satisfactorily was the need for training of Evaluation Team Leaders and Special Education Teachers.  Training will be provided to all Evaluation Team Leaders and Special Education Teachers regarding the purpose of the non-participation justification portion of the IEP as well as what information should be included in that section. Training for Evaluation Team Leaders regarding this form was provided to staff at the ETL/Psychologist staff meeting that was held on 9/13/2016. At that time, the purpose of the non-participation justification and a description of what information was required was reviewed. Training for the high school special education teachers was provided by the Assistant Special Education Director on 9/27/2016 during the special education department meeting. Elementary special education teachers will be provided with this information during their PLC meeting on 10/18/2016. Middle School and Early Childhood meetings will be scheduled and completed by the end of the calendar year. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  01/06/2017 |
| **Evidence of Completion of the Corrective Action:**  Copy of IEP training guide  Staff meeting agenda and minutes  Staff sign in sheets  Copies of IEPs | | |
| **Description of Internal Monitoring Procedures:**  The Interim Special Education Director and the Assistant Special Education Director will regularly monitor IEPs to ensure that the proper information is included in this section. A spreadsheet will be used to monitor compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit a copy of the agenda, sign-in sheets, and handouts from the trainings on the purpose, and writing, of IEP non-participation justification statements that were held on September 13, 2016, with Evaluation Team Leaders and school psychologists; September 27, 2016, with high school special education staff; October 18, 2016, with elementary special education teachers; and in department meetings with middle school and early childhood special education staff that will be held before the end of December 2016.  By March 1, 2017, subsequent to all corrective actions, submit a spreadsheet that includes a report of the administrative review of IEPs in student records for inclusion of a Non-participation Justification statement that states why removal from the general education classroom is critical to the student's program and also 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. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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

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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:**  Record review and interviews indicate that the content of the Notice of Proposed School District Action (N1), provided to a parent with the proposed IEP and placement, is not reflective of the discussion at the Team meeting and is not individualized to each student. The N1 does not consistently include a description of the action proposed or refused by the district; an explanation of why the district proposed or refused to take the action; a description of any other options that the district considered and the reasons why those options were rejected; and a description of each evaluation procedure, test, record, report, or other factors the district used as a basis for the proposed or refused action. | | |
| **Description of Corrective Action:**  The District has determined that the root cause for not consistently providing sufficient information that is reflective of the Team meeting within the Notice of Proposed School District Action is due to the need for updated training emphasizing the importance of crafting an individualized N1 that accurately describes the proposed action, and a dependence on a Semstracker drop down menu that does not provide individualized meeting information.  The District has provided updated training to all Evaluation Team Leaders regarding the purpose of the N1 letter as well as the required information that needs to be included. The training reviewed the six questions that need to be addressed as well as what information should be included for each question. Training regarding this form was provided to Evaluation Team Leaders at a staff meeting held on 9/13/2016 and the Interim Director and Assistant Director have been spot checking N1 letters since the time to ensure compliance. The drop down menu option on Semstracker has been disabled. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  09/13/2016 |
| **Evidence of Completion of the Corrective Action:**  Staff meeting agenda and minutes  Staff sign in sheet for the 9/13/16 meeting  Copies of Notice of Proposed School District Action (N1) letters | | |
| **Description of Internal Monitoring Procedures:**  The Interim Special Education Director and Assistant Special Education Director will regularly monitor N1 letters ensuring that comprehensive letters that are reflective of the Team meeting are being generated by ETLs. This information will be logged on a spreadsheet as a means of keeping track of compliance. | | |
| 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:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit a copy of the agenda, sign-in sheet, and handout(s) from the September 13, 2016, training provided to Evaluation Team Leaders on the purpose of the N1 notice as well as the required information that needs to be included to answer each of the required six questions.  By March 1, 2017, submit a spreadsheet that includes a report of the administrative review of student records with an IEP Team meeting held after September 13, 2016, for the content of the Notice of Proposed School District Action (N1) that is reflective of the discussion at the Team meeting and individualized to each student. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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| **Criterion & Topic:**  SE 29 Communications are in English and primary language of home | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and interviews indicate that the district provides a foreign language interpreter for IEP Team meetings, but translated copies of the Meeting Invitation (N3), Notice of Proposed School District Action (N1), assessment results, and progress reports were not included in student records. | | |
| **Description of Corrective Action:**  The District has determined that the root cause for not including translated copies of the Meeting Invitation (N3), Notice of Proposed School District Action (N1), assessment results, and progress reports was due to the need for training that clarifies the requirement to provide all IEP related information in the parents' native language, not just the IEP. There was also a need for clarification about the process used to access translation services for various languages. As a result, not all of the required documents were being translated.  At a district level Evaluation Team Leader meeting on October 25, 2016 the Interim Special Education director will provide training that addresses what documents should be translated, and also the process for securing translation services. Following this training, all Evaluation Team Leaders will receive a memorandum outlining the translation process and will sign off that they have reviewed the list of procedures. This memorandum will also include procedures to follow if a parent declines to have documents translated (Document in N1 and in Additional Information section of the IEP) as well as the clerical staff responsible for sending out documents to be translated. Essentially, the district will use forms provided by DESE, translators employed by the district, and outside agencies (Baystate Interpreters, Transfluenci) to ensure that parents are receiving forms in their primary language. When the need for translated records occurs, the Evaluation Team Leader will complete a District Commitment of Resources form and supply this form to the Administrative Assistant in the Special Services office, who will electronically send the documents to the proper translator. The Administrative Assistant will maintain a record of sent and received documents. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  10/25/2016 |
| **Evidence of Completion of the Corrective Action:**  Staff meeting agenda for October 25, 2016 ETL meeting  Sign in sheet for October 25, 2016 meeting  Copies of Commitment of Resources forms  Copies of translated documents (Progress Reports, Evaluations, N1s)  Copies of N1 letters noting when parents decline translation services | | |
| **Description of Internal Monitoring Procedures:**  The Interim Special Education Director and the Assistant Special Education Director will regularly monitor the log of translated documents as well as commitment of resources forms to ensure that the translation protocol is being followed. Additionally, IEP packets will be spot checked to ensure forms are being translated when needed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 29 Communications are in English and primary language of home | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  For the two students identified on the Student Record Issues Worksheet, the district mailed to the Department all requested information to verify the district is providing translated special education documents to the parents of student BA. The district also provided documentation that the parents of student AN do not wish to receive translations.  By December 23, 2016, submit a copy of the agenda, Commitment of Resources form, sign-in sheet, and memorandum from the October 25, 2016, training provided to Evaluation Team Leaders regarding documents that must be translated, and district procedures for securing translation services and interpreters.  By March 1, 2017, submit a report on the administrative review of records of students whose parents require translations, with an IEP Team meeting held after October 25, 2016, to ensure that documents are translated or that there is documentation of N1 notices that note the district offered, but the parent declined, translated documents or interpretive services. Indicate the number of records reviewed and the number found in compliance. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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

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| **Criterion & Topic:**  SE 37 Procedures for approved and unapproved out-of-district placements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and interviews indicate that the district is not monitoring the services and programs of individual students placed in public and private out-of-district programs. Documentation of monitoring plans and actual monitoring activities were not found in the files of students placed out-of-district. | | |
| **Description of Corrective Action:**  The District has determined that the root cause for failing to consistently monitor programs and services of individual students placed in public and private out of district programs was the need for an improved system to coordinate the monitoring of out of district students (and documentation of monitoring activities). The district had previously developed an out of district monitoring sheet to document monitoring activities, but this form was not reviewed with staff on a regular basis. The lack of recent training and the absence of a structured system to ensure monitoring has resulted in an inconsistent application of this process.  The district has updated the process of out of district monitoring. At a district level Evaluation Team Leader meeting held on September 13, 2016, the out of district list of students was reviewed with all ETLs. ETLs were assigned specific cases. The out of district list will be reviewed with all ETL's on at least a quarterly basis. The out of district monitoring form has been updated and shared with all Evaluation Team Leaders and School Psychologists. Additionally, the district has scheduled "visiting days" in the fall of 2016. On these specified days, district ETL's and psychologists will work in pairs to go out for site visits in order to see out placed students in their individual programs. These visits will be documented on the monitoring form and placed in the students' files. In addition, when quarterly progress reports are received from the out of district placement, the ETLs for each student will review the reports and document the review on the out of district monitoring form. This will ensure that any concerns about progress will be addressed in a timely fashion. Additionally, the ETL will document the dates of Team meetings and record an additional contact with the out of district facility on the monitoring form. These forms will be placed in individual student files. The first visiting days are scheduled for November 1, 2016 and November 15, 2016. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  01/30/2017 |
| **Evidence of Completion of the Corrective Action:**  Meeting agenda  Completed Individual Out of District Monitoring and Oversight Documentation  List of out of district students and assigned ETL  List of programs visited on "visiting days" | | |
| **Description of Internal Monitoring Procedures:**  The Interim Special Education Director and Assistant Special Education Director will participate in visits to out of district programs. The out of district list will be reviewed at least quarterly at staff meetings. Spot checks on individual student files to look for completed forms will be conducted on a regular basis. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 37 Procedures for approved and unapproved out-of-district placements | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district mailed to the Department the monitoring plan and evidence of current monitoring activities for the two out-of-district students, BA and MC, identified on the Student Issues Worksheet.  By December 23, 2016, submit a copy of the agenda, updated the process of out of district monitoring, updated out of district monitoring form, and sign-in-sheet from the September 13, 2016, Evaluation Team Leader training on district protocol to monitor out of district students and document monitoring activities.  By March 1, 2017, submit a report on the administrative review of out-of-district student records for documentation of activities to monitor the program and services of students placed out of district. Indicate the number of records reviewed and the number found in compliance. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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

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| **Criterion & Topic:**  SE 40 Instructional grouping requirements for students aged five and older | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates that the district exceeds the instructional grouping requirements, without provision of written notification to the Department and parents, in the following special education classes and programs:  For students placed in substantially separate programs outside of the general education classroom for more than sixty percent of the student's school schedule:  Biomedical Science class in the substantially separate Alternative High School program includes 13 students with a certified special educator and one aide  High School Food Lab class includes 14 students with a certified special educator and one aide  High School Daily Living class includes 13 students with a certified special educator and one aide  For students placed in resource rooms outside of the general education classroom for sixty percent or less of the student's school schedule:  Coburn Elementary School grade 5 Mathematics includes 13 students with a certified special educator and one aide  High School Resource Room Algebra 1A includes 13 students with a certified special educator and one aide  High School Resource Room Algebra 1B includes 14 students with a certified special educator and one aide  High School 4.3 Learning Center includes 14 students with a certified special educator and one aide  High School 4.6 Learning Center includes 15 students with a certified special educator and one aide. | | |
| **Description of Corrective Action:**  The District has determined that the root cause for exceeding the instructional grouping requirements in both substantially separate programs and partial inclusion programs, without provision of written notification to the Department and parents, is the need for an improved system of monitoring class size and addressing potential issues (including waiver applications) in a timely manner. The district has identified that there needs to be an improved system in place so that instructional grouping requirements are consistently reviewed and verified as met. The district has also identified that the instructional grouping issue was more prevalent in some of the larger buildings in the district.  At the start of the 16/17 school year, all instructional groupings were reviewed and determined to be in compliance. Additionally, special education teachers received a copy of the instructional grouping requirements for students aged five and older and were asked to immediately report any grouping size concerns. Each teacher was asked to provide, in writing, a list of their instructional groupings at the same time progress reports are submitted so that appropriate grouping size can be verified by special education administration. This process was summarized in a memorandum. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  06/30/2017 |
| **Evidence of Completion of the Corrective Action:**  Instructional grouping size at start of 16/17 school year  Memorandum to special education teachers summarizing grouping requirements and monitoring procedure  Grouping list at the end of marking periods | | |
| **Description of Internal Monitoring Procedures:**  The Interim Special Education Director and the Assistant Special Education Director will review the instructional groupings lists that are generated with progress reports. At WSHS, class lists will be reviewed on a monthly basis by Special Education and High School Administration by accessing PowerSchool. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 40 Instructional grouping requirements for students aged five and older | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit a copy of the memorandum sent to all special education teachers describing district process to ensure instructional grouping requirements are appropriate. Also submit a completed "Age Span and Instructional Grouping Worksheet," which can be found in the WBMS Document Library, for the following groups: 1)Alternative High School Biomedical Science; 2)High School Food Lab; 3)High School Daily Living; 4)Coburn Elementary Grade 5 Math Pull-out; 5) High School Resource Room Algebra 1A; 6) High School Resource Room Algebra 1B; 7) High School 4.3 Learning Center; and, 8) High School 4.6 Learning Center. | | |
| **Progress Report Due Date(s):**  12/23/2016 | | |

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

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| **Criterion & Topic:**  SE 54 Professional development | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the district has provided training to all staff on analyzing and accommodating diverse learning styles of students and methods of collaboration to accommodate diverse learners in the general education classroom. However, general education staff have not received training on state and federal special education requirements and related local special education policies and procedures. | | |
| **Description of Corrective Action:**  The District has determined that the root cause for not consistently providing training on state and federal special education requirements as well as related local special education policies and procedures was a lack of awareness about the requirement to provide this training. The district regularly provides training to general education staff about accommodating the needs of special education students and diverse learners within the general education setting. However, there was a lack of knowledge about the requirement to provide ongoing training about state and federal special education requirements.  This school year, the Interim Special Education Director and the Assistant Special Education Director have developed a presentation that provides training federal, state, and local special education regulations, policies, and procedures. During the fall of 2016, the Interim Director and Assistant Director will present this training during regularly scheduled faculty meetings. Participants will receive a copies of the presentation to refer to at a later date. This training will be updated and repeated on an annual basis. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  12/31/2016 |
| **Evidence of Completion of the Corrective Action:**  Faculty Meeting Agenda  Staff sign in sheets for faculty meetings  Googleslide Presentation of training | | |
| **Description of Internal Monitoring Procedures:**  The Interim Special Education Director and Assistant Special Education Director will develop the training and will work with building principals to ensure that the training will be provided by the end of the calendar year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit a copy of the presentation used to train all general education staff on state and federal special education requirements and related local special education policies and procedures. Also submit a copy of the signed attendance sheets that include the name, title, and school building of each staff member in attendance. | | |
| **Progress Report Due Date(s):**  12/23/2016 | | |

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

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review, interviews, and observations indicate that classroom locations at Philip G. Coburn Elementary School, Mittineague Elementary School and West Springfield High School do not maximize the inclusion of special education students into the life of the school.  At Philip G. Coburn Elementary School, substantially separate special education services are provided to students with autism in classrooms isolated from the rest of the school. Specifically, classrooms 1A and 2A, on the second floor, are located in a walled-off space at the back of the auditorium in rooms that are not accessible to students with physical disabilities.  At Mittineague Elementary School, the two special education classrooms for Functional Academics and the Resource Room are in the basement with the boiler room and library. There are no general education classrooms in the basement.  At West Springfield High School, the Alternative High School program is located in a suite of classrooms and offices with its own entrance, separate from all other high school students participating in general education classes. This arrangement was initially approved by the Department in 2011, as part of the new high school building design. At this time, the district must apply for approval as a public day program in order to operate the Alternative High School as a separate program, serving only special education students. | | |
| **Description of Corrective Action:**  The district has determined that the root cause behind the location of classrooms that fail to maximize the inclusion of special education students into the life of the school is a lack of available space to house district special education programs.  At Mittineague Elementary School, the Functional Academics classrooms have been eliminated, as the district has restructured and relocated the program. There is one Functional Academics classroom remaining at the elementary level, which is now located at Fausey Elementary School. The remainder of the students who were enrolled in the Functional Academics program are now placed in co-taught classrooms at Fausey Elementary School.  In regards to the Mittineague Resource Classroom, the district contends that the location of the classroom does not interfere with the inclusion of special education students into the life of the school. The district initially challenged the factual accuracy of this finding upon release of the draft report in August, but did not receive a written response from DESE. Students receive services in this classroom for no more than 40% of the school day, so they are inherently included in the regular education classrooms. The unique design of Mittineague Elementary, which was constructed in 1871, makes it necessary to utilize the lower floor of the building so that there is adequate instructional space available to the students. Additionally, all students use the lower floor of Mittineague for computer classes and access to the library.  At Coburn Elementary, the district has decided to relocate the substantially separate autism classrooms into Room 36, on the first floor of Coburn. This classroom is located in the center of the first floor and is accessible to student with physical disabilities. The program re-location is scheduled to occur at the end of the 2016/2017 school year to minimize the disruption to all students involved. In the event that a student with physical disabilities needs access to the program prior to the end of this school year, the district will move forward with the relocation plans.  At West Springfield High School, the Alternative High School will apply for approval as a pubic day program, so that the district is able to continue to provide a therapeutic milieu for student with social/emotional disabilities. | | |
| **Title/Role(s) of Responsible Persons:**  Ryan Murray, Interim Special Education Director  Laurie Bedard, Assistant Special Education Director | | **Expected Date of Completion:**  07/29/2017 |
| **Evidence of Completion of the Corrective Action:**  Completed DESE application for Public Separate Day program approval for the Alternative High School.  Teaching schedules for the previous Mittineague Functional Academics teachers who are now teaching at Fausey.  Notes/memo from October 6, 2016, tour of Coburn to explore potential relocation sites. | | |
| **Description of Internal Monitoring Procedures:**  The Interim Special Education Director and Assistant Special Education Director will be consulted prior to any relocation of special education classrooms. This practice will ensure that the classrooms are located in accessible areas of the school building that seek to maximize the inclusion of special education students into the life of the school. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district must provide floor plans for all of the identified classroom changes and relocations, and submit a plan authorized by the Superintendent for the relocation of the substantially separate autism classrooms at Coburn Elementary, to occur at the end of the 2016/2017 school year. | | |
| **Department Order of Corrective Action:**  The district will provide floor plans for Philip G. Coburn Elementary School, Mittineague Elementary School and Fausey Elementary School and indicate the former and current locations of services that were found non-compliant, and will provide authorization by the Superintendent for changes at Coburn Elementary school to occur at the end of the 2016/2017 school year. | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, provide floor plans for Philip G. Coburn Elementary School, Mittineague Elementary School and Fausey Elementary School and indicate the former and current locations of services that were found non-compliant. The Department will conduct an on-site to verify the location of services at each school before the December 23, 2016 progress report due date.  By December 23, 2016, submit a plan authorized by the Superintendent for the relocation of the substantially separate autism classrooms at Coburn Elementary, to occur at the end of the 2016/2017 school year.  By December 23, 2016, provide evidence that the district has submitted an application for approval as a pubic day program for the Alternative High School at West Springfield High School. | | |
| **Progress Report Due Date(s):**  12/23/2016 | | |

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

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| **Criterion & Topic:**  CR 9 Hiring and employment practices of prospective employers of students | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the district does not require prospective employers of students that participate in the Work-based Learning Program, career days, or that recruit student employees at the school, to sign a statement prohibiting discrimination in hiring or employment practices on the basis of race, color, national origin, sex, gender identity, handicap, religion, or sexual orientation. | | |
| **Description of Corrective Action:**  After budget reductions required the elimination of the Work-Based Learning coordinator in the district, this particular practice was missed. With the re-establishment of a guidance counselor who will work with students and their WBL assignments, this practice will begin again. | | |
| **Title/Role(s) of Responsible Persons:**  High School Principal, High School Guidance Director | | **Expected Date of Completion:**  12/31/2016 |
| **Evidence of Completion of the Corrective Action:**  The District will create an acknowledgement form "Prospective Employers Statement of Non-Discrimination" that prospective employers will need to sign prior to assigning any students to that agency. This form will be maintained at the Main Office of the High School. | | |
| **Description of Internal Monitoring Procedures:**  Each year, and with each WBL assignment, the District will secure an acknowledgement form for each prospective employer with whom the District is engaging students. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's plan does not include a training for staff members who will distribute and maintain the form, or submission of examples of forms completed by prospective employers of students. | | |
| **Department Order of Corrective Action:**  Submit the template form, "Prospective Employers Statement of Non-discrimination," description of protocol for distribution and maintenance of the form at the district, evidence that high school guidance staff have been trained, and examples of completed forms. | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit the template for the Prospective Employers Statement of Non-discrimination form.  By March 1, 2017, submit the agenda, handouts and sign-in sheet for the training attended by the high school principal, guidance counselors, or other staff that may organize or supervise student participation in career days, work-study, apprenticeship training programs, cooperative work experiences, or recruit students at the district for employment in the community. Also submit a sample of three statements signed by prospective employers of students. | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates that the nondiscrimination statement in the West Springfield Middle School handbook does not include the protected category of gender identity. | | |
| **Description of Corrective Action:**  This omission represents a proof-reading error. During the time that the review took place, the Middle School was in the process of transitioning from a print format to an online version. It was during this transition that the protected category of "gender identity" was inadvertently omitted. | | |
| **Title/Role(s) of Responsible Persons:**  Executive Assistant to the Superintendent and Middle School Principal | | **Expected Date of Completion:**  12/31/2016 |
| **Evidence of Completion of the Corrective Action:**  The Non-Discrimination Statement has been updated to be in alignment with the requirements and all families at the Middle School have been notified of the update by way of a phone call from the Middle School Principal. | | |
| **Description of Internal Monitoring Procedures:**  Annual review of district policy and handbooks will include specific attention to nondiscrimination statements for each handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Corrected | |
| **Basis for Decision:**  The Department reviewed the district website and confirmed that the statement of non-discrimination in the 2016-2017 Middle School handbook posted on the district website now includes the protected category of gender identity. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the district has not amended its Bullying Prevention and Intervention Plan (Plan) to extend protections to students who are bullied by a member of the school staff and to make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. District staff have not received annual training on the district's updated Plan, to include developmentally appropriate strategies to prevent bullying, information about specific categories of students particularly at risk for bullying or information about cyber-bullying. | | |
| **Description of Corrective Action:**  At the time of the document review, this particular policy had not been addressed by the district. Subsequent to the closing of the document review, the district had updated the policy to extend protections to students who are bullied by a member of the school staff and made clear that a member of the school staff may be named as the "aggressor". | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent Michael Richard, members of the Anti-bullying Task Force | | **Expected Date of Completion:**  09/29/2017 |
| **Evidence of Completion of the Corrective Action:**  The WSPS Anti-Bullying Task Force will review the Bullying Intervention and Prevention Plan and make recommendations to the Policy Sub-Committee of the WSPS School Committee. Upon receiving such recommendations, the Policy Sub-Committee of the WSPS School Committee will review and make appropriate revisions to the Bullying Intervention and Prevention Plan. Once reviewed by the Policy Sub-Committee, the policy will be forwarded to the entire School Committee for their approval at an Open Session Meeting. Minutes from the Anti-Bullying Task Force meeting, the Policy Sub-Committee meeting, and the Open Session of the School Committee meeting will be provided.  The district has launched training for staff and students relative to anti-bullying efforts and education. These include, inter alia, prevention assemblies for students sponsored by the District Attorney's Office, and compliance training for faculty, staff, and administration via Global Compliance Network. | | |
| **Description of Internal Monitoring Procedures:**  An annual review cycle for the Bullying Intervention and Prevention Plan will be initiated. This review will take place each January. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit a copy of the revised Bullying Prevention and Intervention Plan that extends protections to students who are bullied by a member of the school staff, which includes, but is not limited to, an educator, administrator, school nurse, cafeteria worker, custodian, bus driver, athletic coach, advisor to an extracurricular activity or paraprofessional. Also submit a description of how the content of this revised policy was shared with students, staff, and parents. Such evidence may include a link to the district website where revised procedures are posted, the text of an All-Call message sent to parents, agenda and sign in sheet at staff meeting(s), copy of a school newsletter, or other methods to reach all students, staff, and parents. | | |
| **Progress Report Due Date(s):**  12/23/2016 | | |

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

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates that the school committee has approved a policy on the discipline of students that does not contain all required information. Specifically, procedures for in-school suspension do not address the principal's responsibility to:  1) inform the student of the disciplinary charge and provide the student the opportunity to dispute the charge and explain the circumstances;  2) inform the student of the length of the suspension, which may not exceed ten days cumulatively or consecutively in a school year, if the principal determines that the student committed the offense;  3) orally inform the parent of the disciplinary offense, the reasons for concluding that the student committed the infraction and the length of the in-school suspension;  4) invite the parent or guardian to a meeting to discuss the student's academic performance and behavior, strategies for student engagement, and possible responses to the behavior;  5) schedule a meeting with the parent or guardian for the day of the suspension or as soon as possible, and document at least two attempts to reach the parent for the purpose of orally informing the parent; and  6) deliver written notice on the day of the in-school suspension to the student and the parent or guardian about the suspension; invite the parent to a meeting if such meeting has not occurred.  Procedures for the periodic review of discipline data do not address the principal's need to assess the extent, and impact, of disciplinary action on selected student populations to determine whether it is appropriate to modify disciplinary practices due to an over-reliance on in-school or short- and long-term suspensions, expulsions, and emergency removals of selected populations of students.  Additionally, the district has not developed a Notice of Suspension and Hearing or a School-Wide Education Service Plan. | | |
| **Description of Corrective Action:**  The district's notice of Suspension and Hearing were available, but not accessed by the Review team; causes for this are under investigation. The lack of a School Wide Educational Services Plan was due to it not having been codified prior to the Review; this has since been remedied. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Assistant Superintendent, Principals | | **Expected Date of Completion:**  12/31/2016 |
| **Evidence of Completion of the Corrective Action:**  The district's Notice of Suspension and Hearing are properly updated and in use. Similarly, the District's School Wide Educational Services Plan is completed as required. | | |
| **Description of Internal Monitoring Procedures:**  All of these documents will be reviewed each school year as part of an on-going systemic analysis of our policies and practices. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district did not address procedures for in-school suspensions, or procedures for the periodic review of discipline data that address the principal's need to assess the extent, and impact, of disciplinary action on selected student populations to determine whether it is appropriate to modify disciplinary practices due to an over-reliance on in-school or short- and long-term suspensions, expulsions, and emergency removals of selected populations of students. | | |
| **Department Order of Corrective Action:**  Provided the updated policy on the discipline of students that includes procedures for in-school suspension, and provide procedures for the periodic review of discipline data. | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit a policy on the discipline of students that includes procedures for in-school suspension that address the principal's responsibility to:  1) inform the student of the disciplinary charge and provide the student the opportunity to dispute the charge and explain the circumstances;  2) inform the student of the length of the suspension, which may not exceed ten days cumulatively or consecutively in a school year, if the principal determines that the student committed the offense;  3) orally inform the parent of the disciplinary offense, the reasons for concluding that the student committed the infraction and the length of the in-school suspension;  4) invite the parent or guardian to a meeting to discuss the student's academic performance and behavior, strategies for student engagement, and possible responses to the behavior;  5) schedule a meeting with the parent or guardian for the day of the suspension or as soon as possible, and document at least two attempts to reach the parent for the purpose of orally informing the parent; and  6) deliver written notice on the day of the in-school suspension to the student and the parent or guardian about the suspension; invite the parent to a meeting if such meeting has not occurred;  By December 23, 2016, submit procedures for the periodic review of discipline data that address the principal's need to assess the extent, and impact, of disciplinary action on selected student populations to determine whether it is appropriate to modify disciplinary practices due to an over-reliance on in-school or short- and long-term suspensions, expulsions, and emergency removals of selected populations of students.  By December 23, 2016, submit a School-wide Education Service Plan that describes educational services the school will make available to ensure that students who are suspended or expelled for more than 10 consecutive days have the opportunity to make academic progress during the period of removal, or that educational services will be based on, and provided, in a manner consistent with academic standards for all students. The Education Service Plan must address the principal's responsibility to notify the student and their parents of the opportunity to receive education services, arrange for education services when the student is expelled or placed in long-term suspension, and verify the student's enrollment in educational services.  By December 23, 2016, Also submit the written notice of suspension and hearing that will be given to parents and students and includes: the disciplinary offense, the basis for the charges, potential consequences, opportunity for a hearing at a specific date, time, and location to dispute the charges and present an explanation, the right to an interpreter, and the right to appeal to the superintendent if the student may be placed on long-term suspension.  By December 23, 2016, submit a description of how the content of the revised student discipline policy was shared with students, staff, and parents. Such evidence may include a link to the website where the district has posted revised procedures, the text of an All-Call message sent to parents, agenda and sign in sheet at staff meeting(s), copy of a district-wide or school newsletters, or other methods to reach all students, staff, and parents. | | |
| **Progress Report Due Date(s):**  12/23/2016 | | |

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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:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates that the district is not sending a notice addressed to students age 16 or older, and their parents, within five days of the student's tenth consecutive absence. The notice does not offer at least two dates and times for an exit interview to discuss reasons for the student permanently leaving school and alternative education programs and services, or state that the parent may request to extend the time and date for the exit interview for 14 days. | | |
| **Description of Corrective Action:**  A letter was on file in the guidance and counseling department, but this letter was not being used with 100% fidelity. The letter also lacked some requisite information, but has since been updated to reflect the necessary standards. | | |
| **Title/Role(s) of Responsible Persons:**  High School Principal  High School Asst Principals  Members of the Guidance & Counseling Department | | **Expected Date of Completion:**  09/29/2017 |
| **Evidence of Completion of the Corrective Action:**  A standard letter has been developed to conform with these obligations and to inform the student and his/her parents extending an offer of two meeting dates to discuss the reason the student is leaving and also the alternative programs and services that may be accessed.  Copy of the letter/template | | |
| **Description of Internal Monitoring Procedures:**  Periodic administrative review of attendance records and files. | | |
| 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:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit a template of the notice that will be sent to students age 16 or older, and their parents, within five days of the student's tenth consecutive absence.  By March 1, 2017, provide the agenda, sign-in sheet and handouts for the training(s) attended by the high school principal, assistant principal, and guidance counselors on procedures for ensuring that a notice is provided within five days of the student's tenth consecutive absence, and on the purpose and content of the exit interview. Please review http://www.doe.mass.edu/dropout/default.html, for the High School Exit Intervention Model Protocol.  By March 1, 2017, also submit copies of completed notices to students and their parents provided within five days of a student's tenth absence, if any. | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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

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| **Criterion & Topic:**  CR 22 Accessibility of district programs and services for students with disabilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review, interviews and observations indicate that the Cowing Alternative School approved public day program, serving students in grades K-8 with emotional/behavioral needs, is located on the second floor of the Cowing School, which does not have an elevator, thus preventing students with mobility impairments from accessing the program. | | |
| **Description of Corrective Action:**  Long Term Solution: The construction of a new Coburn School - immediately next door to Cowing - which would include accessible space for the CAS program. This project has been approved by the Massachusetts School Building Authority to move forward towards construction and is currently in the Eligibility Phase of their process. The inclusion of the CAS program will be addressed in the next phase of the process, the Feasibility Phase.  Medium Term Solution: The relocation of the program to temporary and accessible swing space during the construction project.  Short Term Solution: We have identified rooms #1 and#7 on the first floor of Cowing School for to which classes from the Cowing Alternative School program would be relocated if a mobility-impaired student were to be assigned to the CAS before more permanent accessible facilities are ready for occupation. (Note: This will necessitate displacement of two other programs from the first floor to elsewhere in the building.) | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent  Director of Special Services | | **Expected Date of Completion:**  10/28/2016 |
| **Evidence of Completion of the Corrective Action:**  Memorandum of Understanding that identified corrective action will be implemented prior to the assignment of any mobility-impaired student to the CAS program. | | |
| **Description of Internal Monitoring Procedures:**  Short Term Solution: The Special Services Department will notify the Assistant Superintendent when a mobility-impaired student has been identified by the Team for assignment to the CAS program. The Assistant Superintendent will immediately arrange for the physical move of the necessary furniture and equipment to the new location. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 22 Accessibility of district programs and services for students with disabilities | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit a Memorandum of Understanding from the superintendent, school principal and CAS program director, that the identified corrective action will be implemented prior to the assignment of any mobility-impaired student to the CAS program. | | |
| **Progress Report Due Date(s):**  12/23/2016 | | |

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

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| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:** Document review and interviews indicate that the district does not have a process in place to ensure that individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | |
| **Description of Corrective Action:** The district was without a Curriculum Director for many years. During this time, curricular review lapsed. In July 2015, a new director was hired and a cycle of curriculum review was included in the District Improvement Plan (2016-2018). | | |
| **Title/Role(s) of Responsible Persons:**  Director of Curriculum, Instruction and Assessment | | **Expected Date of Completion:**  09/29/2017 |
| **Evidence of Completion of the Corrective Action:** Principals will annually address with all faculty the need to review all educational materials for simplistic and demeaning generalizations on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation as part of the start of school procedures. The topic will also be addressed during new teacher orientation.  Such a review will also be added to our Evaluation checklist for all new curriculum materials. for new teacher orientation and start-of-year faculty meetings. The curriculum adoption document was updated in October 2016 to include checking for these issues. | | |
| **Description of Internal Monitoring Procedures:** Director of Curriculum, Instruction and Assessment to address annually with all Administrators before the new school year starts. This review process will also be codified as part of the curriculum adoption process so that any "new" materials will be subject to the same review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** By December 23, 2016, submit a copy of the Evaluation Checklist for all new curriculum material that includes the requirement to review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation.  By December 23, 2016, submit the curriculum adoption document that was updated in October 2016, to include checking for these issues.  By December 23, 2016, submit evidence of staff training on the requirement for individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | |
| **Progress Report Due Date(s):**  12/23/2016 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicate the district has not evaluated all aspects of its K-12 program to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. | | |
| **Description of Corrective Action:**  The last time that this self-evaluation took place was in or around 2010. During the transition of Superintendents, this process was missed. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Assistant Superintendent, District Social Worker | | **Expected Date of Completion:**  09/29/2017 |
| **Evidence of Completion of the Corrective Action:**  A random survey of families at all levels (elementary, middle, and high school) across the district will generate an understanding of what obstacles, if any, exist for students seeking to access our comprehensive programming. This survey will be written by members of the administration in conjunction with our school social worker. A random generation of students' names will determine who will receive the survey, but attention will be given to ensure that there is representation from all demographics. | | |
| **Description of Internal Monitoring Procedures:**  This survey will be administered annually beginning in 2017. Results will be compiled and analyzed by district staff, no later than November 1, to ensure that equal access is available for all students. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/28/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's plan does not include survey of all students, parents, and staff on equal access to all academic programs, athletics, and other extracurricular activities regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status. | | |
| **Department Order of Corrective Action:**  Describe how the district will survey all students, parents, and staff on their experience or observation regarding equal access to all academic programs, athletics, and other extracurricular activities for all protected categories. | | |
| **Required Elements of Progress Report(s):**  By December 23, 2016, submit the text of survey questions that will be used to evaluate the district's academic programs, athletic programs, and extracurricular activities for equal access of students regardless of each of the following protected categories: race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, and housing status. Also describe how the survey questions will be distributed to parents, students, and staff.  By March 1, 2017, provide a copy of evaluation of survey results, conclusions reached, and resolution of any identified issues. | | |
| **Progress Report Due Date(s):**  12/23/2016  03/01/2017 | | |

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

District: West Springfield Public Schools

Corrective Action Plan

Program Area: English Learner Education

Prepared by: West Springfield Public Schools - Colleen Marcus, ELL Director

Riki Landers, Assistant 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: October 4, 2017**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 6 Program Exit and Readiness | | | **Rating: Partially Implemented** |
| **Department CPR Finding:**  *The documentation submitted by the district indicates that 75 of 132 students who are in their first and second monitoring years have been reclassified as Former English Learners (FEL) before they met the minimum exit criteria provided in the “Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners”. Some of these students are at the WIDA proficiency level as low as 1.1 and require significant support to access content area instruction delivered in English. The district’s current reclassification procedures are not in compliance with 603 CMR 14.02 that requires districts to establish exit criteria in accordance with the Department’s guidelines. Please see the “Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners” as found at* [*http://www.doe.mass.edu/ell/guidance/guidance.pdf*](http://www.doe.mass.edu/ell/guidance/guidance.pdf) *.* | | | |
| **Narrative Description of Corrective Action:**  Although the CPR review of FEL students showed that 75 of 132 students who were reclassified did not meet the minimum exit criteria provided in the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" that data does not reflect the District's adherence to the policy beginning with the reclassification of students in the spring of 2016.  1. In September of 2015, the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" booklet was shared with all ESL and SEI teachers as well as district and school administrators. The ELL Director and Assistant Director met with ESL and SEI teachers throughout the district to review the contents and changes outlined in the new guidance document and to ensure that district teachers were aware of the new Reclassification Policy.  2. Reclassification guidelines were reinforced and disseminated to all staff members at school level meetings held in the spring of 2016.  3. 100% of the students reclassified in the spring of 2016 had an overall ACCESS score in the Bridging or Reaching category (5.0 and above).  4. The district ELL policy, which includes reclassification and monitoring, was updated in the fall of 2016 to align with the Department's guidelines as the law requires (603CMR14.2). The Reclassification Form update includes language specific to only considering students who score 5.0 or above in all four domains as well as overall. In addition, FEL forms were updated to include monitoring for 4 years.   * ELL Director and Assistant Director have updated the policy * The policy is going to the Policy Sub-committee of the School Committee for approval * The policy will then go to the School Committee for approval * The updated policy will replace the existing policy in the District Policy Manual.   See attached revised ELL Policy (in process of being approved)  5. District ELL Administration will share the revised policy and supporting reclassification and monitoring documents with district-wide ESL and SEI teachers on November 8.  6. In the spring the District ELL Administration will once again review the reclassification policy in preparation for reviewing of ACCESS scores and Reclassification Team Meetings.  7. District ELL Administration will annually review all Reclassification Forms to ensure adherence to the minimum exit criteria provided in the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners". | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  Colleen Marcus, ELL Director and Riki Landers, Assistant ELL Director,  ESL and SEI teachers at all levels | | **Expected Date of Completion for Each Corrective Action Activity:**  #3 - June 2016  #4 - December 2016  #5 - November 8, 2016  #6 - May 2017  #7 - June 2017 and on-going | |
| **Evidence of Completion of the Corrective Action:**   * 2016 List of Reclassified Students along with ACCESS scores * Copy of the updated ELL policy including updated Reclassification and Monitoring Forms. * November 8 and May 2017 staff meeting agendas * 2017 List of Reclassified Students along with ACCESS scores | | | |
| **Description of Internal Monitoring Procedures:**   * ELL Administration will oversee the reclassification of all students. This will include attending Reclassification Meetings at all levels and reviewing Reclassification Forms annually before any student is officially reclassified. * The ELL Administration is responsible for ensuring that students are properly coded in SIMS. This coding includes recoding students as FEL. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion & Topic:** ELE 6 Program Exit and Readiness | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:**  The Department appreciates the district’s quick response to the Department’s finding regarding the reclassification of ELs. Please submit the documentation below by the progress report due date. | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  1-Please provide information regarding the training opportunities provided to the staff involved in the reclassification process to keep them informed about the revised policy and procedures. Please include materials presented, meeting dates, minutes and sign-in sheets.  2- SY2016 List of Reclassified Students along with ACCESS scores | | | |
| **Progress Report Due Date(s): January 30, 2017** | | | |

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| 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:**  *Document review and student record review indicate that the Parent Notification letter provided to parents upon identification of a student as an English language learner and annually thereafter, does not use the current ACCESS English Proficiency Levels of Entering, Emerging, Developing, Expanding, Bridging and Reaching.* | | | |
| **Narrative Description of Corrective Action:**  1.The Parent Notification letters (Initial/Annual Parent Notification of ELL and Title III program Placement) that the West Springfield ELL department uses were updated in the fall of 2015 to include the current ACCESS English Proficiency Levels of Entering, Emerging, Developing, Expanding, Bridging and Reaching. The forms used are the ones provided by DESE. Prior to the fall of 2015 the forms used had the Beginner, Early Intermediate, Intermediate, High Intermediate, Transitioning and English Proficient wording.  2 In addition, in an effort to ensure that all languages represented in West Springfield have the most updated and translated version of the form, West Springfield had the updated form translated into Nepali since the DESE resources did not include a Nepali translation.  3. Outdated forms (the forms with the Beginner, Early Intermediate, Intermediate, High Intermediate, Transitioning and English Proficient wording) were removed from ELL Forms Resource binders and electronic folders. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Colleen Marcus, ELL Director and Riki Landers, Assistant ELL Director | | **Expected Date of Completion for Each Corrective Action Activity:**  #1 - September 2015  #2 - September 2015  #3 - Fall 2015 | |
| **Evidence of Completion of the Corrective Action:**  The Parent Notification letters (Initial/Annual Parent Notification of ELL and Title III program Placement) | | | |
| **Description of Internal Monitoring Procedures:**  The ELL Administration is responsible for copying and mailing out the Parent Notification Letters (Initial/Annual Parent Notification of ELL and Title III program Placement). The updated forms are the only forms made available. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion & Topic:** ELE 10 Parent Notification | **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):**  By January 30, 2017, submit the results of an administrative review of ELE student records from across all schools and grade levels, to ensure that initial and annual Parent Notification letters record the current ACCESS English Proficiency Levels of Entering, Emerging, Developing, Expanding, Bridging and Reaching. Indicate the number of records reviewed and the number found in compliance. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s): January 30, 2017** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 12 Equal Access to Nonacademic and Extracurricular Programs | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *Interviews indicate that the district does not have a procedure in place to inform classroom teachers which of their students have parents that need translations or an interpreter, as determined by the Home Language Survey. As a result, teachers learn that parents need translations or an interpreter when they telephone parents, or by asking students whether their parents will understand notices in English.* | | | |
| **Narrative Description of Corrective Action:**  #1. Any student identified through the Home Language Survey as having a home language other than English has (and has always had) a blue ELL folder within their regular cumulative folder. This blue folder contains all relevant ELL information, including the Home Language Survey. At the beginning of the year ESL/SEI teacher meetings at all grade levels, teachers were given a reminder memo outlining the expectation that they know the contents of each of their student cumulative folders, including the contents of the blue folder in each cumulative folder. Teachers were asked to ensure they know the language of their students and the language that parents requested for both oral and written communication. (see attached memo).  #2. Beginning in September 2016, ESL teachers reviewed the contents of these folders and created classroom google.docs which contain each student's name, home language, whether parents requested for information sent home to be translated and whether they need translation during conferences or meetings. These google.docs have been shared with all teachers and staff who work within the student's classroom. (see attached document)  #3. ELL Administrators met with the district Data Systems Manager, to develop an option within Power School's (online student management system) "Parent Information" tab to include Home Language, Language for Written and Oral Communication information. Teachers would have access to this information for all students in their class.  #3. At the November 8, 2016 ESL/SEI professional development meeting, teachers will be informed of the plan to update PowerSchool to include this essential home language/communication information. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Colleen Marcus, ELL Director and Riki Landers, Assistant ELL Director, Lois Wright, District Data Systems Manager | | **Expected Date of Completion for Each Corrective Action Activity:**  #1. Beginning of September 2016  #2. End of October 2016  #3. January 2017  #4. November 2016 | |
| **Evidence of Completion of the Corrective Action:**  #1. Teacher Memo  #2. Google documents with Home Language Survey information.  #3. PowerSchool updated with Home Language information  #4. November 8, 2016 agenda and sign in sheet.  #5. All teachers will send written communication to, and have oral communication with, parents in the requested language. | | | |
| **Description of Internal Monitoring Procedures:**  #1. ELL Administration created the memo outlining the expectations to review the cumulative and blue folders for their students and ensured all teachers read and understood its contents.  #2. ELL Administration will review and share all google.docs with all staff working with each class of ESL/SEI students.  #3. ELL Administration will monitor the development of the PowerSchool parent language information tab. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 12 Equal Access to Nonacademic and Extracurricular Programs | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval: N/A** | | | |
| **Department Order of Corrective Action:** N/A  The district provided the following:   1. Copy of August 2016 memo sent to all teachers regarding how to access Google Documents information from the Home Language Survey for each student in their classes. 2. Agenda from November 8, 2016, staff meeting where teachers received information on accessing information about parent request for translations and interpretations in their home language and district procedures to request translated documents or an interpreter for parents. | | | |
| **Required Elements of Progress Report(s): No further progress reporting is required.** | | | |
| **Progress Report Due Date(s): N/A** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 18 Records of LEP Students | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *Student record review and interviews indicate that the district is not consistently using the current form of the Home Language Survey that is required by the Department. ACCESS results, PARCC results, and report cards are not consistently translated into the language of the home when translation has been requested on the Home Language Survey.* | | | |
| **Narrative Description of Corrective Action:**  Although the district has always used a Home Language Survey, it did not begin using the current form of the Home Language Survey until the release in August 2015 of the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" .  1. In September of 2015, following the release of the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" booklet, the district updated their Home Language Survey to the current form which DESE requires and is included in the guidance document.  2. In September 2015 the district included the Home Language Survey in all enrollment packets completed at Central Enrollment. Home Language Surveys in all languages are available at Central Enrollment.   * Any parent who indicates on the Home Language Survey that any language is spoken in the home other than English immediately is referred to the ELL Department for ELL screening. At the screening the Assistant ELL Director reviews the Home Language Survey with the parent to ensure it is completed accurately.   3. See above for the steps being taken to ensure teachers and staff members know the home language and language communication requests of all parents.  4. Translated versions supplied by ACCESS and PARCC have always been sent home with students.   * The English version of the results is what has always been put in the cumulative folders of all students including ELL students. Beginning in the spring of 2017 the translated copies of ACCESS results and PARCC results will be photocopied and included in the cumulative folders along with the English copy.   5. Translated report cards are available at all levels in Russian, Spanish, Arabic and Nepali. In addition, report card comments are always translated into those same languages. (This information was communicated in the CPR and has been on-going. It has been over 15 years that report cards have been translated into Russian and Spanish and in the last 3 years report cards have been translated into Arabic and Nepali as well). As a district with a number of languages represented in our ELL population we have sought to find translators for as many languages as possible. (see attached). The low incidence translators will be used to provide oral translations of report cards as well as ACCESS and PARCC reports for any parent requesting such translation. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Colleen Marcus, ELL Director and Riki Landers, Assistant ELL Director,  ESL and SEI teachers at all levels, building administration at all levels | | **Expected Date of Completion for Each Corrective Action Activity:**  #1. September 2015  #2. September 2015  #3. October 2016 - January 2017  #4. June - September 2017  #5. November 2016 and ongoing | |
| **Evidence of Completion of the Corrective Action:**  #1. and #2. Cumulative folders containing Home Language Survey  #3. Google documents with Home Language Survey information and PowerSchool updated with Home Language information.  #4. Copies of translated ACCESS and PARCC and report card comments in cumulative folders  #5. Copies of orally translated documents will include the name and signature of the translator along with the translation date and will be included in the student's cumulative folder. | | | |
| **Description of Internal Monitoring Procedures:**  #1. and #2. ELL Administration reviews Home Language Surveys with all parents referred for ELL screening.  #3. ELL Administration will review and share all google.docs with all staff working with each class of ESL/SEI students. ELL Administration will monitor the development of the PowerSchool parent language information tab.  #4. In June, with the release of ACCESS scores and again in September with the release of MCAS 2.0 scores, the ELL administration will send a reminder notice to all building administrators and ELL/SEI teachers that ACCESS and MCAS 2.0 translations must be included in each student's cumulative folder.  #5. ELL Administration will continue to seek low incidence translators. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 18 Records of LEP Students | **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):**  By January 30, 2017, subsequent to all corrective actions, submit the results of an administrative review of student records for students that enrolled in the district in the 2016-2017 school year and attend a variety of schools and grades in district. Review records for inclusion of the current HLS, translated ACCESS results, PARCC results, and report cards or notation of oral interpretations. Indicate the number of records reviewed and the number found in compliance. For any records not in compliance, determine the root cause of that non-compliance and provide a detailed description of the district's plan to remedy any remaining 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, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s): January 30, 2017** | | | |