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

##### COORDINATED PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Lowell Community Charter Public (District)

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 04/12/2016.

**Mandatory One-Year Compliance Date:** **04/12/2017**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 2 | Required and optional assessments | 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 |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially 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 15 | Non-discriminatory administration of scholarships, prizes and awards | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records demonstrated that the charter school does not consistently provide all required assessments consented to by the parent, specifically a history of the student's educational progress in the general curriculum and a teacher assessment of the student's attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final Report, the Director of Student Support Services reviewed student files to document that all required assessment that were consented by the parent , were completed. Also a review of information that could be collected using Educational Assessment; Part A and Part B (603.CMR28.04) was reviewed. It was determined that the evaluators did not consistently complete the required assessments or collect information on the student's educational progress in the general curriculum | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Support Services | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The Director of Student Services will conduct a training for all Special Education Liaisons and the Administrative Assistant to ensure their understand of the requirements for SE2 and LCCPS procedure and policy to meet this mandate. Once a testing recommendation is sent to the Liaison a copy of the Educational Part A and Part B will be included and returned to the Student Support Services Office. The Administrative Assistant will track the submission of assessments on a daily spreadsheet. | | |
| **Description of Internal Monitoring Procedures:**  An internal review will be conducted tri-annually (which follows our progress and grading timelines) to ensure that all consented assessments and Educational Assessment A & B information is included when a student has completed an evaluation cycle. Tri-annually , an internal review of 25% of records for students who have had an evaluation will be conducted. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016 submit the procedures for completing the two components of an educational assessment for initial or re-evaluations, which include a history of the student's educational progress in the general curriculum; and an assessment by a teacher with current knowledge of the student's specific abilities in relation to learning standards of the Massachusetts Curriculum Frameworks and the district's general education curriculum, as well as an assessment of the student's attention skills, participation behaviors, communication skills, memory, and social relations with groups, peers, and adults.  By November 15, 2016 submit the completed assessments for students AN and CC as indicated on the student issues worksheet, along with a narrative description of the district's actions.  By November 15, 2016 submit evidence of training for Team chairpersons, special education staff, and general education teachers on the required components of educational assessments to be completed as part of an evaluation, including an agenda, signed attendance sheet, name and role of presenter and a sample of training materials.  By February 10, 2017 submit the results of an internal review of approximately 5-10 records of students with evaluations conducted subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed and the number with evidence of educational assessments including a history of the student's educational progress in the general curriculum and an assessment by a teacher with current knowledge of the student's attention skills, participation behaviors, communication skills, memory and social relations. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/15/2016  02/10/2017 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the IEP Teams do not consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final report, the Director of Student Support Services reviewed students files to identify if IEP Teams documented why a student was removed from the general education program and the purpose of a more restrictive program. It was determined that the team did not consistently document why the least restrictive program was recommended for the student. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Support Services | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The Director of Student Services will conduct a training for the Special Education Department and ensure their understanding of the requirements for SE20 . Also an LCCPS procedure and policy will be developed to meet this mandate. The Liaison will be responsible for completing this task when writing the IEP. The Director of Student Support Services will review this section of the IEP before signing as the LEA Representative. | | |
| **Description of Internal Monitoring Procedures:**  An internal review will be conducted tri-annually (which follows our progress and grading timelines) to ensure that the Least restrictive program is selected . Tri-annually , an internal review of 25% of IEP's developed during that time frame will be selected for review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016 submit evidence of Team chairperson training on the development of non-participation justification statements that state why the removal from the general education classroom is critical to the student's program, including the agenda, signed attendance sheet, name and role of presenter, and training materials.  By February 10 2016 submit the results of an internal review of approximately 10 records of students with IEP development subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed and the number where IEP Teams appropriated justified why the student was removed from the general education classroom. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/15/2016  02/10/2017 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records demonstrated that Notices of Proposed School District Action (N1s) to propose the IEP and summarize the Team's decisions and considerations do not consistently contain the following federally required information: 1) a description of any other options that the charter school considered and the reasons why those options were rejected; 2) a description of each evaluation procedure, test, record, or report the agency used as a basis for the proposed or refused action; and 3) a description of any other factors that were relevant to the agency's proposal or refusal. | | |
| **Description of Corrective Action:**  for the CPR final Report, the Director of Student Support Services reviewed student files to document that all required questions in the N1 are answered. It was determined that the N1s questions did not consistently contain the federally required information. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Support Services | | **Expected Date of Completion:**  09/16/2016 |
| **Evidence of Completion of the Corrective Action:**  The Director of Student Services will conduct a training for the Special Education Department and ensure their understanding of the requirements for SE24 . Also, a LCCPS procedure and policy will be developed to meet this mandate. The Chairperson for the meeting will be expected to fully answer the 6 questions to summarize the Team's decisions. The Director of Student Support Services will review this section of the IEP before signing as the LEA Representative. | | |
| **Description of Internal Monitoring Procedures:**  An internal review will be conducted tri-annually (which follows our progress and grading timelines) to ensure that all federally required information is documented in the N1s. Tri-annually, an internal review of 25% of IEP's develop during this time frame will be reviewed for 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:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016, submit evidence of Team Chairperson training on the procedures to ensure that Notices of Proposed School District Action (N1) consistently include a description of any other options that the Team considered and the reasons why those options were rejected and a description of each evaluation procedure, test, record, report, and a description of any other factors that were relevant to the agency's proposal or refusal, along with the agenda, signed attendance sheet, name and role of presenter, and training materials.  By February 10, 2017 submit the results of an internal review of approximately 10 records of students with IEP development subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed, the number with N1s that include a description of any other options that the Team considered and the reasons why those options were rejected and a description of each evaluation procedure, test, record, report, or other factors the Team used as a basis for the proposed or refused action. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/15/2016  02/10/2017 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 3 Access to a full range of education programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Although a review of documents indicated that the charter school has a policy that ensures equal access to a full range of education programs for all students, regardless of race, color, sex, religion, national origin, or sexual orientation, this policy does not address the protected categories of gender identity, disability, and homelessness. Additionally, a review of the enrollment policy indicated that the charter school's introduction statement does not include homelessness in its non-discrimination statement. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final Report, the Head of School and Assistant Head of School reviewed the handbook, and enrollment policies. It is determined that the policies must be updated to include the protected categories. | | |
| **Title/Role(s) of Responsible Persons:**  Registrar, Director of Student Engagement and the Head of School. | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  The non-discrimination statement in the student and family handbook will be amended to include the protected categories of gender identity, disability and homelessness. This change will be made for the 2016-2017 school year. The enrollment policy will be amended to include homelessness. Per DESE regulations, the amended enrollment policy will be submitted for approval to the Board of Trustees and then to DESE. Both documents will be uploaded to the website following approval | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Engagement will review the handbook, including the non-discrimination policy, annually. The Registrar will review the Enrollment Policy annually.(The Enrollment Policy has to be approved by DESE before implementation) | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016, submit a revised nondiscrimination policy that includes the protected categories of gender identity, disability, and homelessness and a revised enrollment policy that includes the protected category of homelessness in its non-discrimination statement. Submit evidence of dissemination and staff training that includes a training agenda, signed attendance sheets and copies of the materials. | | |
| **Progress Report Due Date(s):**  11/15/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 8 Accessibility of extracurricular activities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Although a review of documents indicated that the charter school has a policy that ensures equal access to extracurricular activities for all students, regardless of race, color, sex, religion, national origin, or sexual orientation, this policy does not address the protected categories of gender identity, disability and homelessness. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final Report , the Head of School and Assistant Head of School reviewed handbook policy that ensures equal access to extracurricular activities for all students, regardless of race, color, sex, religion national origin, or sexual orientation It is determined that the policies must be updated to include the protected categories. | | |
| **Title/Role(s) of Responsible Persons:**  The Director of Student Engagement and Assistant Head of School | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The Accessibility of extracurricular activities policy will be amended to include the protected categories of gender identify, disability and homelessness. This change will be made for the 2016-2017 school year. Per regulations, the handbook policy will submitted for approval to the Boards of Trustees. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Engagement will review the handbook, including the accessibility of extracurricular activities annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016, provide evidence of dissemination and training for staff on the updated nondiscrimination statement with the added category of gender identity, disability and homelessness in district policies & documents on extracurricular activities, including a training agenda, signed attendance sheets and copies of the materials. | | |
| **Progress Report Due Date(s):**  11/15/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the charter school's code of conduct does not have a procedure for accepting, investigating and resolving complaints alleging discrimination or harassment on the bases of race, color, national origin, sex, gender identity, religion, or sexual orientation or the disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final Report, the Head of School and Assistant Head of School reviewed the student handbook, and codes of conduct. It is determined that the policies must be updated to include the protected categories, a procedure for accepting, investigating and resolving complaints alleging discrimination or harassment and the disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Engagement and the Head of School | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The code of conduct in the student handbook will be amended to include the protected categories, a procedure for accepting, investigating and resolving complaints alleging discrimination or harassment and the disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred. . This change will be made for the 2016-2017 school year. , The amended codes of conduct policy will be submitted for approval to the Board of Trustees | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Engagement will review the student handbook, including the code of conduct, annually. The Registrar will review the Enrollment Policy annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016, submit a revised code of conduct code that includes procedures for accepting, investigating and resolving complaints alleging discrimination or harassment on the bases of race, color, national origin, sex, gender identity, religion, or sexual orientation or the disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred.  Report the actions taken (school website update, faculty meeting agendas, parent communications) to disseminate the revised content required in code of conduct to parents, staff and students and how this is communicated to non or limited English speakers.  In lieu of a copy of the handbook, the district may provide a link to the handbook from its website. | | |
| **Progress Report Due Date(s):**  11/15/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Although a review of documents indicated that the charter school has a Bullying Prevention and Intervention Plan, the Plan does not contain amendments that extend protections to students who are bullied by a member of the school staff, which includes, but is not limited to, educators, administrators, school nurses, cafeteria workers, custodians, bus drivers, athletic coaches, advisors to extracurricular activities, or paraprofessionals. Additionally, because the charter school's current student handbook/code of conduct and website do not include the amended Plan, the district has not given parents and guardians annual written notice of the student-related sections of the Plan. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final Report, the Head of School and Assistant Head of School reviewed the handbook Bullying Intervention and Prevention policies. It is determined that the policies must be updated to contain amendments that extend protections to students who are bullied by member of the school staff. Additionally the student handbook and website do not include the amended Plan, and LSSPS has not given parents and guardians annual written notice of the student related sections of the Plan. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Engagement and the Head of School. | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The handbook will be amended to include Plans that extends protection to students who are bullied by a member of the school staff. Additionally the plan will be included on the website and the district will provide parents and guardian annual written notice of the student-related sections of the Plan. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Engagement will review the handbook, including the Bullying Intervention and Prevention Plan, annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016, submit the revised handbook that includes amendments to the district's Bullying Prevention and Intervention Plan that extend protections to students who are bullied by a member of the school staff which includes, but is not limited to, educators, administrators, school nurses, cafeteria workers, custodians, bus drivers, athletic coaches, advisors to extracurricular activities, or paraprofessionals.  Report the actions taken (school website update, faculty meeting agendas, parent communications) to disseminate the revised Bullying Prevention and Intervention Plan to parents, staff and students and how this is communicated to non or limited English speakers.  In lieu of a copy of the handbook, the district may provide a link to the handbook from its website, citing the relevant pages. | | |
| **Progress Report Due Date(s):**  11/15/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the charter school's disciplinary policies and procedures do not address requirements related to the newly adopted legislation M.G.L. c. 71, section 37H ¾, including the following: 1) a notice of suspension and hearing; 2) procedures for emergency removal;  3) procedures for principal hearings for both short and long-term suspension; 4) procedures for in-school suspension; 5) procedures for superintendent hearing; 6) procedures for education services and academic progress (School-wide Education Service Plan); and 7) alternatives to suspension. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final Report, the Head of School and Assistant Head of School reviewed the handbook, and student Discipline policies. It is determined that the policies must be updated to include the newly adopted legislation M.G.L. c.71 section 37H3/4 . | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Engagement and the Head of School. | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The Handbooks will updated to add the newly adopted Legislation M.G.L. c.71 section 37 H 3/4 including the following: 1) a notice of suspension and hearing; 2) procedures for emergency removal; 3) procedures for principal hearings for both short and long-term suspension; 4) procedures for in-school suspension; 5) procedures for superintendent hearing; 6) procedures for education services and academic progress (School-wide Education Service Plan); and 7) alternatives to suspension will be submitted for approval to the Board of Trustees | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Engagement will review the handbook, including student discipline annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016, submit the district's revised suspension policy and procedures that include: 1) a notice of suspension and hearing; 2) procedures for emergency removal; 3) procedures for principal hearings for both short and long-term suspension; 4) procedures for in-school suspension; 5) procedures for superintendent hearing; 6) procedures for education services and academic progress (School-wide Education Service Plan); and 7) alternatives to suspension.  Report the actions taken (school website update, faculty meeting agendas, parent communications) to disseminate the revised suspension procedures to parents, staff and students and how this is communicated to non or limited English speakers. | | |
| **Progress Report Due Date(s):**  11/15/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Although a review of documents indicated that the charter school has a policy that ensures equal access to scholarships for all students, regardless of race, color, sex, religion, national origin, or sexual orientation, this policy does not address the protected categories of gender identity and disability. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final Report, the Head of School and Assistant Head of School reviewed the handbook, and non-discriminatory administration of scholarships, prizes and awards. It is determined that the policies must be updated to include the protected categories. | | |
| **Title/Role(s) of Responsible Persons:**  , Director of Student Engagement and the Head of School | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The non-discrimination administration of scholarships, prizes and awards statement in the student and family handbook will be amended to include the protected categories of gender identity and disability This change will be made for the 2016-2017 school year and will be submitted for approval to the Board of Trustees | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Engagement will review the handbook, including the non-discrimination policy of scholarships, prizes and awards, annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016 provide evidence of dissemination and training for staff on the updated non-discrimination statement with the added protected categories of gender identity and disability in the district's scholarship policies & procedures, including a training agenda, signed attendance sheets and copies of the materials.  In lieu of a copy of the handbook, the district may provide a link to the handbook from its website, citing the relevant pages. | | |
| **Progress Report Due Date(s):**  11/15/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents demonstrated that the charter school's physical restraint prevention and behavior support policy and procedures do not include the following: 1) methods for preventing student violence, self-injurious behavior, and suicide; 2) methods for engaging parents and youth in discussions about restraint prevention and use; 3) a description and explanation of the program's alternatives to physical restraint and method of physical restraint in emergency situations; 4) a statement prohibiting medication restraint, mechanical restraint, prone restraint unless permitted pursuant to 603 CMR 46.03(1)(b), seclusion, and the use of restraint inconsistent with 603 CMR 46.03; 5) a procedure for receiving and investigating complaints; 6) a procedure for conducting periodic review of data and documentation on the school's use of restraint; 7) a procedure for making both oral and written notification to the parent; and 8) a procedure for the use of time-out. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final Report, the Head of School and Assistant Head of School reviewed the handbook, and use of physical restraint on any student enrolled in a publicly-funded education program. It is determined that the school's physical restraint prevention and behavior support policy and procedures need to be amended. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Engagement and the Head of School. | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The charter school's physical restraint prevention and behavior support policy and procedures will be amended to include the 7 areas recommend by the corrective action plan. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Engagement will review the handbook, including the non-discrimination policy, annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016 submit the revised physical restraint policy and procedures consistent with amendments in 603 CMR 46.00 that took effect on January 1, 2016 that include: 1) methods for preventing student violence, self-injurious behavior, and suicide; 2) methods for engaging parents and youth in discussions about restraint prevention and use; 3) a description and explanation of the program's alternatives to physical restraint and method of physical restraint in emergency situations; 4) a statement prohibiting medication restraint, mechanical restraint, prone restraint unless permitted pursuant to 603 CMR 46.03(1)(b), seclusion, and the use of restraint inconsistent with 603 CMR 46.03; 5) a procedure for receiving and investigating complaints; 6) a procedure for conducting periodic review of data and documentation on the school's use of restraint; 7) a procedure for making both oral and written notification to the parent; and 8) a procedure for the use of time-out.  By November 15, 2016 submit minutes or other evidence documenting that the revised physical restraint policy and procedures have been approved by the Board of Trustee  By November 15, 2016 submit evidence, including an agenda, training materials, signed attendance sheets, name and role of presenter, that all staff have been trained on the updated restraint policy; a report on the actions taken (school website update, faculty meeting agendas, parent communications) to disseminate the charter school's revised physical restraint policy to parents, staff and students, and how this is communicated to non or limited English speakers. | | |
| **Progress Report Due Date(s):**  11/15/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 21 Staff training regarding civil rights responsibilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that although the charter school provides annual training for all school personnel regarding civil rights responsibilities, this training does not address the prevention of discrimination and harassment on the basis of gender identity. | | |
| **Description of Corrective Action:**  Upon receipt for the CPR final Report , the Head of School and Assistant Head of School reviewed the staff training regarding civil rights responsibilities. It is determined that the policies must be updated to address the prevention of discrimination and harassment on the basis of gender identity. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Human Resources and Diversity | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The annual civil rights training for school personnel will address the prevention of discrimination and harassment on the basis of gender identity | | |
| **Description of Internal Monitoring Procedures:**  The Director of Human Resources and Diversity will review the staff training regarding civil rights responsibilities annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016, submit evidence of staff training, including an agenda, training materials, signed attendance sheets, name and role of presenter, on the prevention of discrimination and harassment on the basis of gender identity. | | |
| **Progress Report Due Date(s):**  11/15/2016 | | |

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

|  |  |  |
| --- | --- | --- |
| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of documents indicated that the charter school does not evaluate all aspects of its K-8 programming annually 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:**  Upon receipt for the CPR final Report , the Head of School and Assistant Head of School and Director of Student Support Services reviewed LCCPS Institutional self Evaluation and found that there has not been a self evaluation of all aspects of our K-8 programming annually to ensure that all students have equal access to all program including athletics and other extracurricular activities. | | |
| **Title/Role(s) of Responsible Persons:**  Head of School and Leadership Team | | **Expected Date of Completion:**  09/30/2016 |
| **Evidence of Completion of the Corrective Action:**  Analysis of distribution of students in programs, including athletics and extracurricular activities, by race/ethnicity, gender, LEP status, IEP/504 plan status, and housing status. This analysis might be combined with review, e.g., of  --entrance criteria for remedial or advanced classes,  --supports for students taking advanced classes,  --scheduling conflicts,  --athletic policies,  --publicity for extracurricular activities,  --complaints or concerns about the accessibility of programs, including athletics and other extracurricular activities. | | |
| **Description of Internal Monitoring Procedures:**  The Head of School and Leadership team will review the analysis annually and document conclusion reached on the basis of the analysis and the steps taken t resolve any identified problems. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 05/24/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2016, submit evaluation tools that includes athletics and other extracurricular activities; the timeline for implementation; and the name(s) and role(s) of the person(s) responsible for the institutional self-evaluation to ensure equal access to all programming across all grades K-8.  By February 10, 2017, submit the results of the self-evaluation and if any barriers to equal access are identified, a plan to remedy it with expected timelines for implementation. | | |
| **Progress Report Due Date(s):**  11/15/2016  02/10/2017 | | |

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

**Charter School: Lowell Community Charter Public School**

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Lowell Community Charter Public School/Carey Reeve-Hildebrant

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

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

**Mandatory One-Year Compliance Date: May 15, 2017**

|  |  |  |  |
| --- | --- | --- | --- |
| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 10 Parent Notification | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of student records indicated that although the charter school sends progress reports including, but not limited to, progress in becoming proficient in using English language and other school communications to the parents or legal guardians of students in the English learners programs in the same manner and the frequency as report cards and progress reports to the other students enrolled in the school, the progress reports are not consistently translated into the home language of the parent/guardian.* | | | |
| **Narrative Description of Corrective Action:** The corrective action plan is divided into four main components:   1. **Review of Progress Report Template**: The progress report template will be reviewed by the ELL team including the Director of Curriculum, Instruction and Assessment and any proposed changes or modifications will be made. This will include a review of templates from other schools and a discussion with Elevations regarding what they can offer. The school has a template currently in use but will be doing a thorough review of the options as part of the school’s ELL documentation review. 2. **Translation of Progress Report Template**: The progress report will be translated into the school’s three core languages: Khmer, Spanish, and Portuguese. Other language needs will be dealt with on an as needed basis. 3. **Identification of Translation Request**: Using the home language survey and any updated information in Rediker, a list will be made at the beginning of the year of all of the families requesting translated progress reports/school documents. ELL Teachers and homeroom teachers will follow up with these requests to gather any updated and current information. 4. **Completion and Filing of Progress Reports**: ELL teachers will complete their progress reports following the schedule outlined in the annual LCCPS Assessment calendar. All progress reports will be completed in English. An additional translated form will be completed for parents requesting translation. A copy of the forms will be filed in the students’ yellow ELL folders in the main office.   This process will continue annually. The progress report template will be reviewed as part of the ongoing ELL documentation review. The translated templates will be updated as needed. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  Carey Reeve Hildebrant/Director of Curriculum, Instruction and Assessment in conjunction with the ELL team (Danielle Lavoie, Mary Morash, Karen Bondi) | | **Expected Date of Completion for Each Corrective Action Activity:**  Action One: Review of Progress Report Template   * Expected Date of Completion: September 30, 2016 * Subsequent reviews as necessary as part of ELL documentation review   Action Two: Translation of Progress Report Template   * Expected Date of Completion: October 30, 2016 - to be used starting in the 2016-17 school year at the end of Trimester One.   Action Three: Identification of Translation Request   * Expected Date of Completion: October 1, 2016 * Ongoing each new school year   Action Four: Completion and Filing of Progress Reports   * Expected Date of Completion: Progress reports to be completed and filed at the end of each trimester during the 2016-17 school year * Ongoing each new school year | |
| **Evidence of Completion of the Corrective Action:** Evidence of correction for the finding of ELE 10 Parent Notification will include translated progress reports (as needed) as part of a student’s ELL record. English and translated progress report templates will be available as part of school’s ELL documents. | | | |
| **Description of Internal Monitoring Procedures:** Progress report templates will be reviewed and updated (if needed) annually. This includes the English template and translations. ELL teachers and/or the main office staff will be responsible for filing the progress reports within the yellow ELL folder as part of a student’s cumulative file. A brief audit of the ELL files will happen annually as directed by the Director of Curriculum, Instruction and Assessment to ensure compliance. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 10 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Not Applicable | | | |
| **Department Order of Corrective Action:** Not Applicable | | | |
| **Required Elements of Progress Report(s):**  **By September 30, 2016,** submit evidence that training was conducted using the progress report and ensuring it will be translated into the school’s three core languages of Khmer, Spanish, and Portuguese as identified on the Home Language Survey (HLS). Please include the revised progress report template, the training agenda, signed attendance sheets, and examples of training materials.  **By January 30, 2017**, submit a copy of the progress report template translated into Khmer, Spanish, and Portuguese.  **By January 30, 2017**, conduct an internal record review of English Language Learner files, including students from Khmer, Spanish, and Portuguese families, to ensure that progress reports are translated for families whose HLS indicates translated documents are required. For any records found to be noncompliant, identify the root cause for the noncompliance and any steps that the district has taken to remedy the file(s).  **\*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review, their role(s) and signature(s).** | | | |
| **Progress Report Due Date(s): September 30, 2016; January 30, 2017** | | | |