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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: Cape Cod Regional Vocational Technical

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 10/20/2016.

**Mandatory One-Year Compliance Date:** **10/20/2017**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | 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:**  CR 3 Access to a full range of education programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documentation indicated that while the district's policy regarding access to a full range of education programs addresses the protected categories of race, color, sex, religion, gender identity, national origin, sexual orientation and disability, it does not include homelessness as a protected category. | | |
| **Description of Corrective Action:**  Cape Cod Regional technical high School will update the district policy to include homelessness as a protected class. | | |
| **Title/Role(s) of Responsible Persons:**  Principal | | **Expected Date of Completion:**  01/26/2017 |
| **Evidence of Completion of the Corrective Action:**  The District Policy will provide evidence of completion. This will be approved at School Committee on January 26, 2017. | | |
| **Description of Internal Monitoring Procedures:**  The district will review all documents to ensure all protected categories are addressed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By February 3, 2017, the district will submit to the Department a copy of the revised policy with regards to access to a full range of education programs that includes, specifically, homelessness within the protected categories. | | |
| **Progress Report Due Date(s):**  02/03/2017 | | |

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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:**  Partially Implemented |
| **Department CPR Findings:**  A review of documentation indicated that while the district's hiring and employment practices of prospective employers of students requires employers to sign a statement which addresses the protected categories of race, color, national origin, gender identity, religion, and sexual orientation, it does not include sex and handicap as protected categories. | | |
| **Description of Corrective Action:**  Include sex and handicap as protected categories on form that prospective employers of students are required to sign. | | |
| **Title/Role(s) of Responsible Persons:**  Principal | | **Expected Date of Completion:**  12/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Completed form will be printed and submitted in progress report. | | |
| **Description of Internal Monitoring Procedures:**  The district will review all documents to ensure that all protected classes are included on all forms provided to prospective employers. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By February 3, 2017, submit to the Department a copy of the district's updated hiring and employment practices of prospective employers of students that requires employers to sign a statement which addresses sex and handicap along with the other protected categories. | | |
| **Progress Report Due Date(s):**  02/03/2017 | | |

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

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documentation indicated that written materials used to publicize the school, specifically guidance brochures, do not include a notice that the school does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion, or sexual orientation. | | |
| **Description of Corrective Action:**  AN upload was provided on February 12, 2016 noting the revised guidance materials that did contain a statement that the school does not discriminate on the basis of color, race, national origin, sex, gender identity, disability, religion or sexual orientation. | | |
| **Title/Role(s) of Responsible Persons:**  Principal | | **Expected Date of Completion:**  10/18/2016 |
| **Evidence of Completion of the Corrective Action:**  Please see uploaded documents. | | |
| **Description of Internal Monitoring Procedures:**  Monitoring is complete, however the district will continue to review all documents to ensure all protected categories are addressed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2016  **Correction Status:** Corrected | |
| **Basis for Decision:**  On February 12, 2016, the district provided a copy of revised guidance materials that did contain a statement that the school does not discriminate on the basis of color, race, national origin, sex, gender identity, disability, religion or sexual orientation. | | |
| **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 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 documentation indicated that the district's physical restraint prevention and behavior support policy and procedures do not include the following information consistent with the new regulations under 603 CMR 46.00: 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 46.00; 5) a procedure for receiving and investigating complaints; 6) a description of the program's training requirements, reporting requirements, and follow-up procedures; 7) a procedure for conducting periodic review of data and documentation on the use of physical restraint as described in  603 CMR 46.06(5) and (6); 8) a procedure for implementing the reporting requirements as described in 603 CMR 46.06; 9) a procedure for making reasonable efforts to orally notify a parent of the use of restraint on a student within 24 hours of the restraint; and 10) a procedure for the use of time-out. | | |
| **Description of Corrective Action:**  Cape Cod Regional Technical High School will adopt the following policy:  Physical Restraint Policy, Procedures and Guidelines  Cape Cod Regional Technical High School (Cape Cod Tech) seeks to promote a safe and productive workplace and educational environment for its employees and students. In accordance with the Code of Massachusetts Regulations (603 C.M.R. 46.00), the law governing the use of physical restraint on students in public schools, Cape Cod Tech seeks to ensure that every student is free from the unreasonable use of physical restraint. Physical restraint shall only be used with extreme caution in emergency situations after other less intrusive alternatives have failed or been deemed inappropriate. See 603 C.M.R. 46.01(3).  School personnel shall only administer a physical restraint when it is needed to protect a student and/or a member of the school community from imminent, serious, physical harm. When a physical restraint is necessary, school personnel shall seek to prevent or minimize any harm to the student as a result of the use of the physical restraint.  Nothing in the Code of Massachusetts Regulations (603 C.M.R. 46.00) or the Cape Cod Tech Physical Restraint Policy, Procedures and Guidelines shall be construed to limit the protection afforded to publicly funded students under other federal and state laws, including those laws that provide for the rights of students who have been found eligible to receive special education services.  The Physical Restraint Policy, Procedures, and Guidelines does not preclude any teacher, employee or agent of a public education program from using reasonable force to protect students, other persons or themselves from assault or imminent serious physical harm.  To help prevent student violence, self-injurious behavior, and suicide, Cape Cod Tech has the following initiatives in place:  Delivery of Break Free from Depression curriculum to all students.  Availability of Social Learning Classes to students who struggle with social and emotional issues.  Onsite office hours for local mental health professionals to provide therapy to students who are patients.  A Committee consisting of guidance counselors, administrators, therapists and the school nurse meets weekly to discuss students who have been referred for being at-risk academically or emotionally. The committee identifies appropriate services and/or supports for students in need.  Interventions and alternative methods that may preclude the need for the use of physical restraint  There are a variety of appropriate responses to student behavior that may require immediate intervention. These alternative methods should be used first when seeking to prevent student violence or self-injurious behavior. Physical restraints only should be used in emergency situations after these other less intrusive alternatives have failed or been deemed inappropriate.  Examples of interventions and less intrusive methods that may preclude the need for the use of physical restraint include, but are not limited to, the following:  Verbal Prompt Communicating what is expected behavior by clearly stating instructions and expectations.  Full or Partial Physical Cue - Placing a hand or hands on a child without force for the purpose of redirecting the child.  Physical Escort A temporary touching or holding, without the use of force, of the hand, wrist, arm, shoulder, or back for the purpose of inducing a student who is agitated to walk to a safe location.  Time Out A behavioral support strategy developed pursuant to 603 CMR 46.04(1) in which a student temporarily separates from the learning activity or the classroom, either by choice or by direction from staff, for the purpose of calming. During time-out, a student will be continuously observed by a staff member. Staff shall be with the student or immediately available to the student at all times. The space used for time-out will be clean, safe, sanitary, and appropriate for the purpose of calming. Time-out will cease as soon as the student has calmed. Staffs that anticipate a need for a time-out for more than 30 minutes based on an individual student's continuing agitation must contact the Principal no later than 20 minutes after the time-out began for authorization and support.  General guidelines for de-escalating potentially dangerous behavior  Remain Calm To possibly help prevent the likelihood of a student experiencing distress from escalating his/her behavior use a neutral and level tone of voice, control one’s facial expressions and use a supportive non-threatening body language.  Obtain Assistance Whenever possible, school personnel should immediately take steps to notify school administrators, the school’s administrative response team and/or other school personnel of a potentially dangerous situation and to obtain additional assistance.  One Person Speaks - In order to minimize the likelihood of confusion and/or the likelihood of a student experiencing distress from escalating his/her behavior having one person providing overall direction to the response and the follow up procedures will be followed. This may be either the first trained staff person on the scene or the staff person with the most information about the particular situation.  Remove Student If feasible, have a student experiencing distress leave an area containing other students and move to another more private and safe area.  Remove Other Students If it is not feasible to have the student experiencing distress move to a more private and safe area, consider the feasibility of having other staff assist and monitor the removal of other students to another area within the school until the student de-escalates.  If all other less intrusive alternatives have failed or been deemed inappropriate to prevent student violence or self-injurious behavior, a physical restraint may be used. Physical restraint, including prone restraint where permitted is an emergency procedure of last resort when a student's behavior poses a threat of assault, or imminent serious physical harm to self or others and the student is not responsive to verbal directives or other lawful and less intrusive behavior interventions. Physical restraint must be limited to the use of such reasonable force as is necessary to protect a student or another member of the school community from assault or imminent serious physical harm. All physical restraints, including prone restraint where permitted, shall be administered in compliance with 603 CMR 46.05.  Restrictions and Prohibitions on Use of a Physical Restraint  Mechanical restraint is prohibited.  Mechanical Restraint is the use of any device or equipment to restrict a student's freedom of movement. The term does not include devices implemented by trained school personnel, or utilized by a student that have been prescribed by an appropriate medical or related services professional, and are used for the specific and approved positioning or protective purposes for which such devices were designed. Examples of such devices include: adaptive devices or mechanical supports used to achieve proper body position, balance, or alignment to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; vehicle safety restraints when used as intended during the transport of a student in a moving vehicle; restraints for medical immobilization; or orthopedically prescribed devices that permit a student to participate in activities without risk of harm.  Medication restraint is prohibited  Medication restraint is the administration of medication for the purpose of temporarily controlling behavior. Medication prescribed by a licensed physician and authorized by the parent for administration in the school setting is not medication restraint.  Seclusion is prohibited  Seclusion is the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving. Seclusion does not include a time-out as defined in 603 CMR 46.02.  Prone restraint is prohibited except on an individual student basis, and only under the following circumstances:  The student has a documented history of repeatedly causing serious self-injuries and/or injuries to other students or staff  All other forms of physical restraints have failed to ensure the safety of the student and/or the safety of others  There are no medical contraindications as documented by a licensed physician  There is psychological or behavioral justification for the use of prone restraint and there are no psychological or behavioral contraindications, as documented by a licensed mental health professional  The program has obtained consent to use prone restraint in an emergency as set out in 603 CMR 46.03(1)(b), such use has been approved in writing by the Principal and the program has documented 603 CMR 46.03(1)(b) 1 ? 5 in advance of the use of prone restraint and maintains the documentation.  Prone restraint is a physical restraint in which a student is placed face down on the floor or another surface, and physical pressure is applied to the student's body to keep the student in the face-down position.  Physical restraint shall not be used:  As a means of discipline or punishment  When the student cannot be safely restrained because it is medically contraindicated for reasons including, but not limited to, asthma, seizures, a cardiac condition, obesity, bronchitis, communication-related disabilities, or risk of vomiting  As a response to property destruction, disruption of school order, a student's refusal to comply with a public education program rule or staff directive, or verbal threats when those actions do not constitute a threat of assault, or imminent serious physical harm  As a standard response for any individual student. No written individual behavior plan or individualized education program (IEP) may include use of physical restraint as a standard response to any behavior. Physical restraint is an emergency procedure of last resort.  This Policy Does Not Prohibit:  The right of any individual to report to appropriate authorities a crime committed by a student or other individual  Law enforcement, judicial authorities or school security personnel from exercising their responsibilities, including the physical detainment of a student or other person alleged to have committed a crime or posing a security risk  The exercise of an individual's responsibilities as a mandated reporter pursuant to G.L. c. 119, § 51A. 603 CMR 46.00 shall not be used to deter any individual from reporting neglect or abuse to the appropriate state agency  Proper Administration of a Physical Restraint  Only personnel who have received training pursuant to 603 CMR 46.04(2) or 603 CMR 46.04(3) shall administer physical restraint on students. Whenever possible, the administration of a restraint shall be witnessed by at least one adult who does not participate in the restraint. The training requirements contained in 603 CMR 46.00 does not preclude a teacher, employee or agent of a public education program from using reasonable force to protect students, other persons or themselves from assault or imminent serious physical harm.  A person administering a physical restraint shall use only the amount of force necessary to protect the student or others from physical injury or harm.  A person administering physical restraint will use the safest method available and appropriate to the situation subject to the safety requirements set forth in 603 CMR 46.05(5). Floor restraints, including prone restraints otherwise permitted under 603 CMR 46.03(1)(b), shall be prohibited unless the staff members administering the restraint have received in-depth training according to the requirements of 603 CMR 46.043(3) and, in the judgment of the trained staff members, such method is required to provide safety for the student or others present.  All physical restraint must be terminated as soon as the student is no longer an immediate danger to himself or others, or the student indicates that he or she cannot breathe, or if the student is observed to be in severe distress, such as having difficulty breathing, or sustained or prolonged crying or coughing.  Follow-up Procedures and Reporting Requirements  At an appropriate time after a student has been released from a restraint the school will:  Review the restraint with the student to address the behavior that precipitated the restraint  Review the incident with school personnel who administered the restraint to discuss whether proper restraint procedures were followed  Consider whether any follow-up is appropriate for the students who witnessed the incident.  Reporting Requirements  Staff will notify the Principal of any physical restraint under five minutes and the Principal or designee must notify the parent/guardian, either verbally or in writing, of such physical restraint.  Any physical restraint of five minutes or longer and/or any physical restraint that results in an injury to a student or staff member must be reported.  The school staff member who administers a physical restraint of five minutes or longer and/or who administers any physical restraint that results in an injury to a student or staff shall verbally inform the Principal or his/her designee of the restraint as soon as possible and no later than the close of the school day in which the restraint was administered. A written report, in the form attached to these procedures and guidelines at Tab B, shall be completed and provided to the Principal of the school no later than the next working day after the restraint was administered.  The Principal of the school shall maintain an on-going record of all reported instances of physical restraint of five minutes or longer and/or any physical restraint that results in an injury to a student or staff. This record will be made available for review by the Massachusetts Department of Education upon its request.  The Principal or his/her designee must verbally inform the student’s parents or guardians of any physical restraint of five minutes or longer and/or any physical restraint that results in an injury to a student or staff as soon as possible and by a written report postmarked no later than three school working days following the use of the physical restraint of five minutes or longer and/or any physical restraint that results in an injury to a student or staff. This notice will be issued to the parents/guardians in English and in the home language of the student.  The Principal shall provide the Office of the Superintendent with a copy of the written report of a physical restraint when such restraint has resulted in a serious injury to a student or staff member, or when an extended restraint (20 minutes or longer) has been administered as well as a copy of the school’s on-going record of all reported instances of physical restraint for the thirty days preceding the reported physical restraint. A copy of the Massachusetts Department of Education Physical Restraint Report [603 CMR 46.06(5)] must be completed with respect to the administration of an extended restraint (20 minutes or longer). This documentation must be provided to the Office of the Superintendent by no later than one school working day after the written report is received by the Principal. The Office of the Superintendent will, in accordance with the requirements of 603 C.M.R. 46.06(5), provide this documentation to the Massachusetts Department of Education within three days of its receipt of the documentation.  Training  Within the first month of each school year, the Principal or designee of each school shall provide all program staff with training on Cape Cod Tech Physical Restraint Procedures and Guidelines. Additionally, for all new school employees that are hired after the start of the school year, the Principal or designee shall within the first month of their employment provide the new employees with training on this Cape Cod Tech Physical Restraint Procedures and Guidelines.  The training will consist of the following: (a) Cape Cod Tech Physical Restraint Procedures and Guidelines; (b) interventions that may preclude the need for restraint, including de-escalation of problematic behaviors; (c) types of restraints and related safety considerations, including information regarding the increased risk of injury to a student when an extended restraint is used; (d) administering physical restraint in accordance with known medical or psychological limitations and/or behavioral intervention plans applicable to an individual student; and (e) identification of program staff who have received in-depth training pursuant to 603 C.M.R. 46.03(3) in the use of physical restraint. See 603 C.M.R. 46.03(2).  Staff Authorized to Serve as A School-Wide Resource on the Proper Administration of Physical Restraints  At the beginning of each school year, the Principal or designee will identify program staffs that are authorized to serve as a school-wide resource to assist in ensuring proper administration of physical restraint. Such staff must have successfully completed the CPI Nonviolent Crisis Intervention Foundation Program.  Engaging Parents  Cape Cod Regional Technical High School Physical Restraint Policy, Procedures and Guidelines will be published in the Student Handbook and posted on the school website in both student and parent sections.  Within the first three months of each school year all parents will be invited to special session of the Parent Council in which the Physical Restraint Policy will be presented and discussed.  Complaint Procedures  Informal Resolution of Concern about Use of Physical Restraint  Before initiating a formal complaint procedure, a student or his/her parent/guardian who has concerns regarding a specific use of a physical restraint, may seek to resolve his/her concerns regarding a specific use of a physical restraint by raising the issue with the Principal of the school. The student and/or his/her parent/guardian should direct their concerns regarding a specific use of a physical restraint to the Principal within ten (10) days of the parent/guardian’s receipt of the written report from the school detailed above. The Principal shall attempt, within his/her authority to work with the individual to resolve the complaint fairly and expeditiously. If the student and/or his/her parent/guardian is not satisfied with the resolution, or if the student and/or his/her parent/guardian does not choose informal resolution, then the student and/or his/her parent/guardian may proceed with the formal complaint process.  Formal Resolution of Concern about Use of Physical Restraint  A student or his/her parent/guardian who has concerns regarding a specific use of a physical restraint, may seek to resolve his/her concerns regarding a specific use of a physical restraint by submitting a written complaint to the Office of the Superintendent. The student and/or his/her parent/guardian should submit this letter to the Office of the Superintendent within twenty (20) days of the parent/guardian’s receipt of the written report from the school detailed above. The written complaint shall include (a) the name of the student; (b) the name of the school where the physical restraint allegedly occurred; (c) the name of the individuals involved in the alleged physical restraint; (d) the basis of the complaint or concern; and (e) the corrective action being sought.  The Office of the Superintendent, through its designees, shall conduct an investigation into the complaint promptly after receiving the complaint. In the course of its investigation, the Office of the Superintendent and/or its designees shall contact those individuals that have been referred to as having pertinent information related to the complaint. Strict timelines cannot be set for conducting the investigation because each set of circumstances is different. The Office of the Superintendent and/or its designees will make sure that the complaint is handled as quickly as is feasible. After completing the formal investigation, the Office of the Superintendent shall contact the individual who filed the complaint regarding the outcome of its investigation and its determination as to whether any corrective action is warranted.  Other Complaint Processes Also Available  It should be noted that the provisions of this section does not preclude a student from using the complaint process set forth in the Cape Cod Tech ?Harassment Policy? to seek resolution of any complaints of discrimination or harassment that is based on a characteristic protected by law such as sex, race, color, ancestry, national origin, ethnicity, religion, age, disability, homelessness status, marital status or sexual orientation.  &#8195;  Cape Cod Tech  REPORTING FORM FOR INCIDENTS OF RESTRAINT CONFIDENTIAL  Student Restrained: SASID #:  Restraint by: Observed by: Reported by: Place of Restraint: Date & Time Restraint Began:  Date & Time Restraint Ended:  Name of School Administrator Who Received Report: Date & Time of Report:  Description of Activity in Which Restrained Student and Other Students & Staff in Vicinity Were Engaged Immediately Preceding Use of Physical Restraint:  Description of Behavior That Prompted Restraint:  Description of Efforts Made to De-Escalate Situation:  Reason for Initiating Physical Restraint:  Description of Restraint(s) Administered (e.g., holds used and why necessary, and student’s behavior and reaction during restraint):  Description of How the Restraint Ended:  Were there any injuries to student(s) and/or staff during restraint?  YES NO  If so, please identify name(s) of individual(s) injured, a brief description of the injury and what medical care, if any was provided:  Printed Name of Faculty Member Making the Report: Signature of Faculty Member Making the Report: Date:  Cape Cod Tech  WRITTEN REPORT TO PARENTS/GUARDIAN REGARDING PHYSICAL RESTRAINT  [Insert Date]  [Insert Name and Address of Parent/Guardian of Student]  Dear [Insert Name of Parent/Guardian],  This is to inform you that your son/daughter, [Name of Student], was restrained on [Date] by [Name & Title of Staff Member(s) Who Administered Restraint]. The restraint was observed by [Name & Title of Staff Member(s) Who Observed Restraint]. The restraint, which consisted of [Describe administration of restraint including holds used and why holds necessary] began at [Time] and ended at [Time]. Your son/daughter’s behavior and reactions during the restraint were as follows: [Describe Behavior and Reactions]. The restraint ended with [Describe How the Restraint Ended]. Following the restraint, [Name of Faculty Member] informed [Name of Administrator] that the restraint had taken place.  Immediately preceding the use of the physical restraint the staff and students were engaged in the [Identify Activity]. The behavior of your son/daughter that escalated the situation was [Identify Behavior]. Efforts to de-escalate the situation were attempted prior to initiating the physical restraint. These efforts included [Describe the alternatives to the restraint that were attempted, the outcome of those efforts and the justification for administering the restraint.] The reason for ultimately initiating the physical restraint was [Describe Reason of Initiating the Restraint].  USE EITHER ALTERNATIVE PARAGRAPH A OR PARAGRAPH B  ALTERNATIVE PARAGRAPH A: There was no injury to your son/daughter and/or to staff during the restraint.  ALTERNATIVE PARAGRAPH B: There was an injury to [Student or Faculty Member] during the restraint. As a result of this injury medical care was provided. [Student Only: A copy of the injury report is enclosed with this letter.]  If it is determined that the behavior which was the basis for this physical restraint is of a more serious nature as to warrant disciplinary action, you will be notified in writing of the date of the suspension hearing by a separate letter.  If you wish to meet with me to discuss the administration of the restraint, any disciplinary sanctions that may be imposed and/or any other related matter with respect to your son/daughter, please do not hesitate to contact me. Additionally, a copy of the Cape Cod Regional Technical High School Physical Restraint Policy, Procedures and Guidelines are enclosed for your reference.  Sincerely, Principal  Enclosure(s):  Cape Cod Regional Technical High School Physical Restraint Policy, Procedures and Guidelines [Injury Report if the Student was Injured]  Cc: Superintendent of Schools  Cape Cod Regional Technical High School  PHYSICAL RESTRAINT WAIVER FORM  In accordance with state regulations and Cape Cod Regional Technical High School policy, parent(s)/legal guardian(s) may waive the reporting requirements which are part of the restraint process if the restraint does not result in serious injury to the student or a program staff member, and does not constitute extended restraint.  The following conditions shall guide agreement to this waiver:   * The student presents a high risk of frequent, dangerous behavior that often requires the use of a restraint. * Parental signature on this waiver form shall in no way impact the student’s opportunity to gain access to or to receive services. * The parent(s)/legal guardian(s) may withdraw consent to this waiver at any time without penalty. * Extended restraints and restraints that result in serious injury to a student or program staff member must be reported as described in the policy of the Cape Cod Regional Technical High School.   The parent(s)/legal will be informed of all restraints administered for the student. This communication of information will take place by (please check all that apply):  &#61551; letter  &#61551; phone call  &#61551; meeting  &#61551; other:  within: days of the restraint.  I agree to the waiver of the reporting requirement which is part of the physical restraint process and understand and agree to the afore-mentioned conditions which are part of this waiver.  Parent(s)/Legal Guardian(s) Building Principal or Designee  Date  A copy of this form will be maintained in the student’s Cumulative Folder and will be made available for inspection to the Department of Education upon request. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Principal | | **Expected Date of Completion:**  01/26/2017 |
| **Evidence of Completion of the Corrective Action:**  Cape Cod Regional Technical High School will submit monthly and end of year reports to the Principal and Superintendent recording all physical restraints occurring in the school community. | | |
| **Description of Internal Monitoring Procedures:**  Cape Cod Regional Technical High School will continue monitoring the physical restraint policy through monthly and end of year reports submitted to the Principal and Superintendent. | | |
| 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:** Partially Approved  **Status Date:** 12/15/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district submitted a Corrective Action Plan proposal for CR 17A. The proposal addresses sub-topics: 1); 2); 3); 4); 5); 6); 7); 8); and 10); omitted was 9). The omitted sub-topic addresses a procedure for making reasonable efforts to orally notify a parent of the use of restraint on a student within 24 hours of the restraint. | | |
| **Department Order of Corrective Action:**  Submit to the Department a copy of the updated policies and procedures on the use of physical restraint on any student enrolled in a publicly-funded education program with the new regulations under 603 CMR 46.00 that includes: a procedure for making reasonable efforts to orally notify a parent on the use of restraint on a student within 24 hours of the restraint. | | |
| **Required Elements of Progress Report(s):**  By February 3, 2016, the district will submit to the Department a copy of the updated policies and procedures on the use of physical restraint on any student enrolled in a publicly-funded education program with the new regulations under 603 CMR 46.00 that includes a procedure for making reasonable efforts to orally notify a parent on the use of restraint on a student within 24 hours of the restraint. | | |
| **Progress Report Due Date(s):**  02/03/2017 | | |

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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:**  A review of documentation indicated that the district does not evaluate all aspects of its 9-12 program 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:**  Cape Cod Regional Technical High School will evaluates all aspects of its 9-12 program 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. The evaluation will include:  Developing a goal to ensure that we evaluates all aspects of its K-12 program 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.  Review all End of Year Reports to ensure that we meet the goal  Review all academic and technical curriculums on a yearly basis to ensure that they are meeting the goal.  Review all extracurricular and co-curricular programs on a yearly basis to ensure that they are meeting the goal.  Develop a survey to assess cultural proficiency and protection of all protected classes  o Distribute the survey to parents and analyze results  o Disseminate the survey to students and analyze results  o Distribute the survey to faculty and staff and analyze results  o Distribute the survey to community leaders and student employers and analyze results  Make appropriate changes to programs, curriculum and protocols to ensure all aspects of its K-12 program 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. | | |
| **Title/Role(s) of Responsible Persons:**  Principal | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Cape Cod Regional Technical High School's will 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. This will be evident in sequential end of year reports, curriculum reviews, extracurricular and co-curricular program reviews, as well as the surveys used in the internal monitoring process | | |
| **Description of Internal Monitoring Procedures:**  In order to continue equitable monitoring Cape Cod Regional Technical High School will:  Review all End of Year Reports to ensure that the school is meeting the goal  Review all academic and technical curriculums on a yearly basis to ensure that the school is meeting the goal.  Review all extracurricular and co-curricular programs on a yearly basis to ensure that the school is meeting the goal.  Redistribute the survey to all stake holders and analyze the results, making necessary changes to programs. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By February 3, 2017, submit to the Department examples of any instruments such as surveys and data that will be used for the purposes of a civil rights institutional self-evaluation. By June 9, 2017, the district will submit to the Department the results of its institutional self-evaluation. | | |
| **Progress Report Due Date(s):**  02/03/2017  06/09/2017 | | |

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

Charter School: Cape Cod Regional Vocational Technical School

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Kate Clemens – Director Student Services

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

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

**Mandatory One-Year Compliance Date: September 4, 2017**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 1 Annual English Language Proficiency Assessment | | | **Rating:** Not Implemented |
| **Department CPR Finding:** *A review of ACCESS participation rates as shown in the state database revealed that the district assessed the English proficiency of 93 % of the ELL students in the district.* | | | |
| **Narrative Description of Corrective Action:** Cape Cod Tech prides itself on 100% participation with ACCESS and MCAS testing for ELLs.During the 2015-2016 testing window – all but one ELL student participated in ACCESS testing, resulting in 93% compliance. The student’s return to school was outside the testing window. CCT requested and was denied an extension of the testing window in order to give the student an opportunity to be assessed. CCT will continue to utilize parent outreach /notification regarding ACCESS testing. CCT will also work with school administration and our ELL student body to ensure that students are present in school for ACCESS testing. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** K. Clemens | | **Expected Date of Completion for Each Corrective Action Activity:** Annual ACCESS testing window | |
| **Evidence of Completion of the Corrective Action:**      100% participation of ELL students in ACCESS Testing. | | | |
| **Description of Internal Monitoring Procedures:**      Director of Student Services will monitor ELL participation. ACCESS testing dates at CCT will occur earlier in the state provided testing window –Thus providing a lengthier period of time for make-up testing sessions, to accommodate any ELL’s who had been absent during the original ACCESS testing period. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 1 | **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):**  Please submit a roster of the ELs who have been administered ACCESS for ELLs in 2017. Please specify if they have been tested in four domains. Provided that there are students who have not been tested with ACCESS for ELLs and in all four domains, determine the root cause of the non-compliance and provide the district’s plan to remedy it. | | | |
| **Progress Report Due Date(s): March 17, 2017** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 17 Program Evaluation | | | **Rating:** Not Implemented |
| **Department CPR Finding:** *Document review indicated that the district does not have a formal process for evaluating the effectiveness of its ELE programming and does not document steps taken to make appropriate program adjustments or changes, if needed. Please see* [*http://www.doe.mass.edu/ell/ProgramEvaluation.pdf*](http://www.doe.mass.edu/ell/ProgramEvaluation.pdf) | | | |
| **Narrative Description of Corrective Action:**       The Superintendent, Principal, Director of Student Services, Data Specialist and ESL teacher will work as a team to complete a formal evaluation of the efficacy of Cape Cod Tech’s ELE program. The team will meet monthly to work collaboratively on the evaluation process. Completion of the evaluation will be on or before May 16, 2017. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  Superintendent – Robert Sanborn  Director of Student Services – Kate Clemens | | **Expected Date of Completion for Each Corrective Action Activity:**      Monthly meeting – 3rd Tuesday of the month. | |
| **Evidence of Completion of the Corrective Action:**      Submission of completed program evaluation, by May 16, 2017. | | | |
| **Description of Internal Monitoring Procedures:**       Minutes of monthly ELL evaluation meeting maintained by the Director of Student Services. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 17 | **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):**   * Please provide the following information by **March 17, 2017:**   + names and the assignments of the staff members who will be involved in the district’s program evaluation,;   + qualitative and quantitative data that will be analyzed;   + meeting dates and agendas including a timeline for the process. * Please complete a comprehensive program evaluation considering a variety of data to evaluate the effectiveness of the district’s ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the district’s educational program by **June 29, 2017**. Please see <http://www.doe.mass.edu/ell/ProgramEvaluation.pdf> * Please provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation by **June 29, 2017** . | | | |
| **Progress Report Due Date(s): March 17, 2017; June 29, 2017** | | | |