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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: Wakefield

CPR Onsite Year: 2016-2017

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 06/05/2017.

**Mandatory One-Year Compliance Date:** **06/05/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| SE 56 | Special education programs and services are evaluated | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 7C | Early release of high school seniors | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10C | Student Discipline | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 22 | Accessibility of district programs and services for students with disabilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |
| ELE 18 | Records of ELL students | Partially Implemented |

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| **Criterion & Topic:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that the district does not consistently inform students and parents at least one year prior to the student reaching age 18 of the rights that will transfer from the parent to the student upon the student's 18th birthday. | | |
| **Description of Corrective Action:**  Wakefield Public Schools has consistently discussed the transfer of rights for students at age 18, during the year before they turn 18 however WPS has not always consistently documented this process during the year before students turn 17. When staff has discussed the transfer of rights during the year prior to the student turning 17, WPS has not traditionally documented the discussion in the additional information, the N1 or on a district created form. The district also has not regularly called newly 18 year old students down to the special education office to have them sign their IEPs, along with their parents' signatures if already signed.  The Action Steps around this finding will be:  1.) In September, the Secondary Special Education Coordinator and the Special Education Secretary for the High School will provide liaison lists to each liaison which includes the students' date of birth in order to plan for the letter prior to the 17th birthday and the transfer of rights at the 18th birthday.  2.) The Secondary Special Education Coordinator will hold a department meeting at the beginning of the year to discuss the refined process and the necessary documentation.  3.) The liaison for all 16 year old students will discuss the details of transfer of rights upon the student's 18th birthday at the student's IEP meeting during the year when they are 16. The liaison will document the discussion and the date on the letter with the student and parent's signature.  4.) The liaison will make a copy of the signed letter and place the copy in the student's file in the Special Education Office.  5.) Liaisons will discuss the transfer of rights during the year when the student is 17, will document the discussion in additional information. Liaisons will have students and parents sign the Age of Majority Notice at the meeting and will place a copy in the file. On the N1, the liaison will list the dates when the transfer of rights were discussed and the forms were signed.  6.) Liaisons will provide a copy of the Age of Consent Decision Form to the student and parent during the IEP meeting held when the student is 17 years old. Liaisons will explain the next steps including returning the form signed on or before the student's 18th birthday  6.) When the student turns 18 years old, the liaison will direct the student to the Special Education Office where the secretarial staff will have the student sign and date their IEP. If the Age of Consent Decision Form has not been returned, the Special Education Office will have them sign that form as well. | | |
| **Title/Role(s) of Responsible Persons:**  Administrator of Special Education, Secondary Special Education Coordinator, High School Liaisons | | **Expected Date of Completion:**  12/15/2017 |
| **Evidence of Completion of the Corrective Action:**  \*Liaison lists with birth dates of students for the school year 2017-2018.  \*Department agenda outlining the refined process.  \*Sample IEP with student signature upon turning 18 years old. | | |
| **Description of Internal Monitoring Procedures:**  The Administrator of Special Education will meet quarterly with the two Special Education secretaries to ensure that the established process is being followed. The Secondary Special Education Coordinator will ensure upon signing the IEP that all components of Transfer of Rights has been completed. The office staff will keep copies of the lists and will cross reference and double check accuracy and completion on a quarterly basis. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017, submit evidence of special education staff training on the district's  Age of Majority procedures including the agenda, signed attendance sheet, name and role of presenter, and training materials.  By March 16, 2018, submit the results of an internal review of a sample of students who turned 17 subsequent to the implementation of all corrective actions that notification of the transfer of rights is documented in the student record. Provide a detailed narrative summary of the review including the number of records reviewed and the number with student consent as appropriate. 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):**  10/31/2017  03/16/2018 | | |

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that parents leave with summary notes at the conclusion of the IEP Team meeting, which include a completed IEP service delivery grid describing the types and amounts of special education and related services proposed by the school and a statement of the major goal areas associated with these services. However, the district does not consistently provide the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice within two calendar weeks of the Team meeting. | | |
| **Description of Corrective Action:**  Wakefield Public Schools intends to correct its practice of sending IEPs to parents for signature. Currently, the office has been sending one copy of the document with 2 copies of the signature pages so that parents can sign and return one signature page. The copy of the IEP stays with the parent for their records.  Action Steps will include:  1.) In June, 2017 the Administrator of Special Education and Student Services met with all Special Education Coordinators and the three Special Education Secretaries to review the protocol for sending out IEPs.  2.) As of July 1, 2017, the office staff will send 2 copies of both the IEP document as well as the signature pages with an N1 stating that the parents should sign one copy of the signature page and placement page and return just those pages to our office.  3.) If parents prefer electronic copies of their IEPs, they will be required to put that request in writing. The office staff will make a note in the file and place the request in the student's file as a record. | | |
| **Title/Role(s) of Responsible Persons:**  Administrator of Special Education and Student Services, Special Education Secretarial Staff | | **Expected Date of Completion:**  07/31/2017 |
| **Evidence of Completion of the Corrective Action:**  \*Agenda from June staff meeting.  \*Sample N1 letter. | | |
| **Description of Internal Monitoring Procedures:**  The Administrator of Special Education and Student Services or designee will conduct quarterly check in with the office staff to ensure compliance in this area. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017, submit evidence of the Special Education Coordinator training on the procedures for provision of two (2) copies of the IEP to the parent, including the agenda, signed attendance sheet, and training materials.  By March 16, 2018, submit the results of an internal review of approximately 10 records for students across grade levels with IEP Team meetings conducted subsequent to implementation of all corrective actions. Provide a narrative summary of the review including the number of records reviewed, and the number with evidence that 2 copies of the proposed IEP and placement were provided to the parent. If any noncompliance 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 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 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):**  10/31/2017  03/16/2018 | | |

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff and parent interviews indicated that the parent advisory council for special education has not established by-laws regarding officers and operational procedures, does not advise the district on matters that pertain to the education and safety of students with disabilities, and does not meet regularly with school officials to participate in the planning, development, and evaluation of the school district's special education programs. | | |
| **Description of Corrective Action:**  Wakefield's SEPAC is comprised of one lead parent, two participant parents and the Administrator of Special Education. While we are a functional group that works together to put on consistent programming such as an annual basic rights presentation and several presentations with varied topics throughout the year, the parents are not interested in formalizing the SEPAC organization. They fear that too much responsibility and accountability will be placed upon their shoulders. Therefore, there are no officers nor by-laws.  The Action Steps will be:  1.) The Administrator of Special Education will enroll the local SEPAC in the MASSPAC organization.  2.) The Administrator of Special Education will research neighboring communities' SEPAC by-laws.  3.) The Administrator of Special Education will provide the parent volunteers with an outline of by-laws.  4.) The Administrator of Special Education will ask for feedback from parent volunteers, explaining that we must vote on by-laws.  5.) The Administrator of Special Education will present the final draft of the proposed by-laws to the participants at the basic rights presentation during the fall of 2017.  6.) The participants will vote to adopt the proposed by-laws during the basic rights presentation. | | |
| **Title/Role(s) of Responsible Persons:**  Administrator of Special Education, parent members of the SEPAC | | **Expected Date of Completion:**  12/15/2017 |
| **Evidence of Completion of the Corrective Action:**  \*Copy of the approved by-laws. | | |
| **Description of Internal Monitoring Procedures:**  No monitoring process is needed. Established by-laws will be printed and available for review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The corrective actions did not include a plan for involving the SEPAC in the planning, development, and evaluation of its special education programs. | | |
| **Department Order of Corrective Action:**  Develop a plan for the SEPAC's participation in the planning, development and evaluation of the district's special education programs; and events such as the annual parents' rights workshop. Please see the Guidance for Special Education Parent Advisory Councils at http://www.doe.mass.edu/sped/pac/default.html for direction. | | |
| **Required Elements of Progress Report(s):**  By January 17, 2018 submit the Special Education Parent Advisory Council (SEPAC) by-laws regarding officers and operational procedures, approved by the SEPAC membership.  By January 17, 2018 submit the plan for involving the SEPAC in the planning, development and evaluation of special education programs. | | |
| **Progress Report Due Date(s):**  01/17/2018 | | |

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Observations indicated that a substantially separate classroom at the Galvin Middle School is identified as "Life Skills" with a permanently installed sign, thereby stigmatizing students attending the program. | | |
| **Description of Corrective Action:**  Wakefield Public Schools never intends to stigmatize students who are in Special Education, therefore the sign identifying a classroom as "Life Skills" has been removed.  Actions were:  1.) Draft CPR report was received by the district indicating the Life Skills sign identified a special education classroom.  2.) Administrator of Special Education informed the school principal and the middle school special education coordinator of this issue.  3.) School principal and coordinator requested that the sign be removed.  4.) School custodian removed the sign. | | |
| **Title/Role(s) of Responsible Persons:**  Administrator of Special Education, Middle School Principal | | **Expected Date of Completion:**  06/23/2017 |
| **Evidence of Completion of the Corrective Action:**  \*Sign is no longer present on the side of the entrance to the classroom. | | |
| **Description of Internal Monitoring Procedures:**  No monitoring process necessary. The sign has already been removed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017 a Department representative will arrange for a follow-up visit to the Life Skills classroom at Galvin Middle School. | | |
| **Progress Report Due Date(s):**  10/31/2017 | | |

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| **Criterion & Topic:**  SE 56 Special education programs and services are evaluated | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Staff interviews indicated that although special education staff members informally analyze outcome data to assess student progress by placement and make programmatic changes as a result, a review of documents indicated that the district does not regularly evaluate its special education programs and services. | | |
| **Description of Corrective Action:**  Although Wakefield Public Schools has continually monitored the statistics around special education internally and has aggressively moved to a more inclusive model for instruction, WPS has not commissioned an outside agency or consultant to conduct an independent program evaluation. WPS has throughout the last four years, moved from a disproportionate amount of students being serviced in substantially separate programming to an inclusive model where students are receiving instruction in the least restrictive setting.  Action steps around this issue will be:  1.) The Administrator of Special Education will identify potential vendors, agencies or consultants who are available to perform a special education program evaluation.  2.) The Administrator of Special Education will present viable options to the executive team (Supt., Asst. Supt., Business Administrator) for their feedback on hiring.  3.) The Administrator of Special Education will hire a consultant to conduct a program evaluation.  4.) Evaluation will be conducted.  5.) Results will be reviewed and presented to the Executive Team and the School Committee.  6.) Recommendations will be implemented. | | |
| **Title/Role(s) of Responsible Persons:**  Administrator of Special Education | | **Expected Date of Completion:**  06/15/2018 |
| **Evidence of Completion of the Corrective Action:**  \*Agenda from Executive Team  \*Completed document from program evaluation.  \*Recommendations from program evaluation. | | |
| **Description of Internal Monitoring Procedures:**  The Administrator of Special Education will meet with the Special Education Coordinators at each level (Elementary, Middle and High) as well as the Superintendent to provide check in with regard to the progress of the program evaluation. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 56 Special education programs and services are evaluated | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017 submit a description of the district's proposed evaluation plan, the timeline for implementation, and the staff responsible.  By March 16, 2018 submit the special education program evaluation including an analysis of the survey data, a summary of the results, and an action plan for any recommendations based on the results. | | |
| **Progress Report Due Date(s):**  10/31/2017  03/16/2018 | | |

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the district does not consistently translate important information and documents, such as handbooks and codes of conduct, into its major languages of Spanish and Portuguese. The district website has an online translation option, but the translator is not functional for linked documents such as the Bullying Prevention and Intervention Plan and code of conduct. | | |
| **Description of Corrective Action:**  The District will partner with SEEM Collaborative and neighboring districts to translate student and parent handbooks, bullying and harassment forms, as well as contact information. Once that is complete, will send to translator for translation. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  08/31/2017 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will be the translated documents. | | |
| **Description of Internal Monitoring Procedures:**  Will coordinate with vendor to ensure translations are being done in a timely manner. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017 submit web links to Spanish and Portuguese translations of the district's code of conduct, high school handbook, and Bullying Prevention and Intervention Plan demonstrating their accessibility to families. | | |
| **Progress Report Due Date(s):**  10/31/2017 | | |

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| **Criterion & Topic:**  CR 7C Early release of high school seniors | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of the school calendar and staff interviews indicated that after final exams are completed, any additional days of attendance are optional for seniors; therefore, the conclusion of the seniors' school year is more than 12 school days before the regular scheduled closing date of the high school. | | |
| **Description of Corrective Action:**  In an effort to respond to the need for corrective action regarding the number of days seniors are expected to be in school comparative to the last day of school for 9th-11th grades, Wakefield Memorial High School is instituting a number of activities, the week previous to graduation, that seniors will be expected to attend and participate in. We will not only hold our optional evening activities of prom and senior night, but we will also engage students in a service project associated with the school community and beyond. Additionally, students will have to fulfill a number of requirements associated with planning for graduation and completing their academic classes (project-based assessments etc.). Their last official day is Friday, June 1st. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will be the fulfillment of the requirements for graduation. In addition, the last day of school for seniors will be June 1, which will be 12 days before the end of the regular school year which ends on June 19. | | |
| **Description of Internal Monitoring Procedures:**  Ongoing oversight of student's attendance and completion of requirements. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7C Early release of high school seniors | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 17, 2018 submit an official calendar or published memorandum demonstrating that attendance is required for seniors until no earlier than June 1 or twelve (12) days before the last scheduled day for students in grades 1-11. | | |
| **Progress Report Due Date(s):**  01/17/2018 | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the non-discrimination policy in the student handbooks does not address gender identity as a protected category. | | |
| **Description of Corrective Action:**  Change has been made in non-discrimination policy in handbooks. Changes were presented to School Committee for approval on June 27, 2017. Once approved by School Committee, documents will be updated online by August 15, 2017. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will be the updated handbooks, with gender identity included as a protected category in the non-discrimination policy. | | |
| **Description of Internal Monitoring Procedures:**  Handbooks will be reviewed before being published on August 15. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017 submit web links to the student handbooks, revised to include gender identity in the non-discrimination statement. | | |
| **Progress Report Due Date(s):**  10/31/2017 | | |

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district's discipline policy does not include the provision that a student suspended for ten (10) consecutive days or less has the right to make up tests and other assignments and do such other work as necessary to make academic progress during that period. In addition, the district does not provide educational services to students suspended or expelled for more than ten (10) consecutive days to allow them to continue to make academic progress toward state and local requirements. | | |
| **Description of Corrective Action:**  The District's discipline policy will be updated to include the provision that a student suspended for ten (10) consecutive days or less has the right to make up tests and other assignments and do such other work as necessary to make academic progress during that period, as well as to provide educational services to students suspended or expelled for more than ten (10) consecutive days to allow them to continue to make academic progress. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  08/30/2017 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will be the updated discipline policy which will include provisions for suspended students to continue to make academic progress. | | |
| **Description of Internal Monitoring Procedures:**  Coordinate with attorney to ensure changes are made. Attorney will review by August 15; changes will be complete by August 31. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017 submit the revised discipline policy that provides students who are suspended for up to ten (10) consecutive days the right to make up tests and other assignments, and students suspended for more than ten (10) consecutive days will be provided educational services options to allow them to continue to make academic progress toward state and local requirements.  By October 31, 2017 submit evidence of dissemination of the revised policy to students and families. | | |
| **Progress Report Due Date(s):**  10/31/2017 | | |

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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 documents and staff interviews indicated that the district has not developed and implemented written restraint prevention and behavior support policy and procedures consistent with regulations under 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. The district has thereby not provided staff with training on the new regulations, provided staff with a copy of the policy and procedures, or made the policy and procedures available to parents. A review of documents and staff interviews indicated that the district has identified program staff to serve as school-wide resources for the administration of restraint and provided school-wide resource staff with in-depth training on the use of physical restraint. | | |
| **Description of Corrective Action:**  Wakefield Public Schools has provided a varied menu for staff training round the new restraint regulations. Training includes district-wide administrator training on the legal responsibilities of building and district leaders for tracking, logging and reporting restraints. WPS also provides training for groups of staff from each building with our district-wide trainer for Safety Care so that we have an appropriate number of people who can de-escalate situations and administer hands on restraints when required. WPS has also contracted with a Behavior Consultant over the course of 5+ years to provide resources, strategies and intervention to classroom teachers and staff when students are in need. The Consultant has worked for 3 hours per week on Wednesdays and is available to staff when needed. WPS does a nice job responding when student behavior arises, however the district also wants to provide training for staff to confidently utilize de-escalation techniques and behavior management strategies when student behavior has indicated the need for such.  The Action Steps to address this need are:  1.) During the 2016-2017 school year, the PD menu series included one session on managing student behavior in the classroom.  2.) During the 2017-2018 school year, the PD menu series will include a four part series on managing student behavior in the classroom so that staff can dig deeper into the strategies available.  3.) The FY '18 school budget includes a new half time position of "Behavior Coach" which will provide opportunities for school based trainings to be scheduled throughout the school year for staff.  4.) The Behavior Coach will also provide case management to students who are in need of behavioral intervention (plans, systems, token rewards, charts) so that a model is provided to teachers.  5.) The Behavior Coach will participate in Collaborative Problem Solving training and apply those strategies to students in need.  6.) The district will also continue its relationship with SEEM Collaborative's Bridge Program which provides wrap around social emotional services for students, their families as well as the school staff. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, Administrator of Special Education | | **Expected Date of Completion:**  06/05/2018 |
| **Evidence of Completion of the Corrective Action:**  \* PD calendar indicating the Behavior PD sessions.  \* Job description for Behavior Coach.  \* Agenda for school based trainings.  \* Sample referral form for the Bridge Program. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent and the Administrator of Special Education monitor this progress together. The Asst. Superintendent will send out surveys to participants in the PD sessions to gauge the effectiveness of the content presented. The Administrator of Special Education will track the requests for support from the Behavior Coach by schools and staff and the number of referrals to the Bridge Program. With the resources from the Coach and the Bridge, the amount of special education services and number of restraints reported should decrease. This will be monitored on a quarterly basis. | | |
| 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:** 07/06/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017 submit the revised restraint prevention and behavior support policy and procedures regarding appropriate responses to student behavior that may require immediate intervention.  By October 31, 2017 submit a calendar of 2017-2018 professional development sessions required for all staff on de-escalation restraint prevention strategies.  By January 17, 2018 submit agenda, signature attendance sheets, name and role of presenter and training materials from de-escalation strategies training. | | |
| **Progress Report Due Date(s):**  10/31/2017  01/17/2018 | | |

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| **Criterion & Topic:**  CR 22 Accessibility of district programs and services for students with disabilities | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Observations indicated that the playground at the Doyle Early Childhood Center has no ramp access and, therefore, is not accessible to students whose disabilities affect mobility. | | | |
| **Description of Corrective Action:**  At town meeting on May 27, 2017, the Town appropriated funds to replace the playground at the Doyle Early Childhood Center. The playground will be accessible to students whose disabilities affect mobility. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  06/05/2018 | |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will be the newly constructed playground which will be handicap accessible. | | | |
| **Description of Internal Monitoring Procedures:**  Internal monitoring will consist of the planning and oversight of the construction of the playground. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 22 Accessibility of district programs and services for students with disabilities | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017 submit the minutes of the Town Council meeting of May 27, 2017 documenting the decision to allocate funds to renovate or replace the Doyle Early Childhood Center playground to make it handicapped accessible and the timeline for completion of the new playground.  By January 17, 2018 submit a copy of the signed contract with the ADA consultant and contractor with plans that have been developed for installation of the new playground, and a written statement of assurance from the Superintendent and the Principal of the Doyle Early Childhood Center ensuring compliance.  A follow-up site visit to the Doyle Early Childhood Center playground will be arranged by the Department prior to June 5, 2018. | | | |
| **Progress Report Due Date(s):**  10/31/2017  01/17/2018 | | | |

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

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| **Criterion & Topic:**  CR 24 Curriculum review | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that although the district incorporates cultural competency in its educator evaluation rubric and its curriculum adoption procedures, the district does not ensure that individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | | |
| **Description of Corrective Action:**  A training module will be added to on-line training that teachers must complete at the beginning of the school year. Teachers will be required to complete training in regard to reviewing materials for demeaning generalizations and to sign off that they have completed it. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  08/30/2017 | |
| **Evidence of Completion of the Corrective Action:**  The teachers' sign-off will be evidence of completion of the training. | | | |
| **Description of Internal Monitoring Procedures:**  Track submission of teacher's sign-off of training. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017, submit the procedures for teachers to review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation.  By October 31, 2017, submit evidence of dissemination to teaching staff or training on the procedures including the agenda, signed or online attendance, name and role of presenter, and training materials. | | | |
| **Progress Report Due Date(s):**  10/31/2017 | | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that although the district analyzes course data to assess enrollment patterns for traditionally underserved students, it has not conducted a self-evaluation of all aspects of its K-12 program to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. | | | |
| **Description of Corrective Action:**  District will work with the CR 25 Institutional Evaluation Suggested Guidelines. The Director of Athletics, Director of Guidance, principals and vice principals will meet in mid-August to determine process, participation and access. Will work with coaches to review rosters. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  10/15/2017 | |
| **Evidence of Completion of the Corrective Action:**  Once the self-evaluation and the resulting analysis is complete, plan will be developed to include these elements. | | | |
| **Description of Internal Monitoring Procedures:**  Ongoing interaction with persons responsible to ensure evaluation is being done and corresponding adjustments are being made. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017 submit the district's plan for implementation, including timeline and key staff responsible for an institutional self-evaluation to ensure the district provides equal access to all programming across all grades PreK-12.  By January 17, 2018 submit the evaluation tools and preliminary results of the self-evaluation with evidence documenting the implementation of the plan to evaluate policies and programming access.  By March 16, 2018 submit a brief narrative summary on the outcomes of the institutional self-evaluation and changes the district is implementing to address any barriers to equal access. | | | |
| **Progress Report Due Date(s):**  10/31/2017  01/17/2018  03/16/2018 | | | |

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

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| **Criterion & Topic:**  ELE 17 Program Evaluation | | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A document review using the Department's "ESE Form 4: Program Evaluation Rubric" indicated that the district's English Learner Education (ELE) program evaluation tool does not qualify as acceptable. The Department concludes that the district does not have a comprehensive system in place to evaluate the effectiveness of its ELE program in developing students' English language and to make appropriate program adjustments or changes, as needed. Please see http://www.doe.mass.edu/ell/ProgramEvaluation.pdf. | | | |
| **Description of Corrective Action:**  District completed District ELE Program Evaluation SY 2016-2017 form. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  10/15/2017 | |
| **Evidence of Completion of the Corrective Action:**  Appropriate program adjustments or changes implemented after analysis of evaluation. | | | |
| **Description of Internal Monitoring Procedures:**  Ongoing meetings, analysis of data. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By October 31, 2017 please submit the district's program evaluation.  By October 31, 2017 please provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation.  By October 31, 2017 please provide a plan of action to make appropriate program adjustments or changes that are responsive to the outcomes of the program evaluation to improve the effectiveness of the program at promoting and supporting the rapid acquisition of English language proficiency by ELs as is required in G.L. c. 71A. | | | |
| **Progress Report Due Date(s):**  10/31/2017 | | | |

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

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| **Criterion & Topic:**  ELE 18 Records of ELL students | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that records do not consistently include English Learner students' current report cards and progress reports or evidence of follow-up monitoring for students who are opted out or have exited the ELE education program. | | | |
| **Description of Corrective Action:**  ELE students' files will not be kept separate, but will be kept with all students' files at each school. ELL records will be in a separate folder within the students' file. | | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  09/01/2017 | |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will be all files will be in one place. | | | |
| **Description of Internal Monitoring Procedures:**  Inform ELL teachers of change and provide folders for ELL records to be incorporated into student's regular files. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  ELE 18 Records of ELL students | **Corrective Action Plan Status:** Approved  **Status Date:** 07/06/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By October 15, 2017 submit evidence of staff training, including the agenda, signed attendance sheet, name and role of presenter, and training materials, on the procedures for maintenance of all required documentation in EL student records.  By January 17, 2018 submit the results of an internal review, conducted subsequent to implementation of all corrective actions, of ten (10) EL records from across elementary, middle, and high school levels. Provide a detailed summary of the internal review including the number of records reviewed, and the number including all required ELE documentation. If non-compliance is identified, report the specific actions taken to correct it and report the root cause(s) of the ongoing non-compliance as well as 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):**  10/31/2017  01/17/2018 | | | |