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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: Helen Y Davis Leadership Academy Charter Public (District)

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 05/20/2017.

**Mandatory One-Year Compliance Date:** **05/20/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 3A | Special requirements for students on the autism spectrum | Partially Implemented |
| SE 14 | Review and revision of IEPs | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 27 | Content of Team meeting notice to parents | Partially Implemented |
| SE 32 | Parent advisory council for special education | Not Implemented |
| SE 46 | Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | Partially Implemented |
| SE 47 | Procedural requirements applied to students not yet determined to be eligible for special education | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 10C | Student Discipline | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |
| ELE 1 | Annual English Language Proficiency Assessment | Not Implemented |
| ELE 10 | Parental Notification | Partially Implemented |

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

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| **Criterion & Topic:**  SE 3A Special requirements for students on the autism spectrum | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that whenever an evaluation indicates that a student has a disability on the autism spectrum, the IEP Team does not specifically address the following in student IEPs, the school's Notice of Proposed School District Action (N1), or Team summaries: 1) the needs resulting from the student's unusual responses to sensory experiences; 2) the needs resulting from resistance to environmental change or change in daily routines; and 3) the needs resulting from engagement in repetitive activities and stereotyped movements. | | |
| **Description of Corrective Action:**  During an IEP meeting, where a student has been diagnosed with being on the Autism Spectrum, the Case Manager will ensure the 7 questions are addressed during the meeting with the entire team. These questions will be documented on the IEP summary sheet that is provided to all team members, including the parent. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education  Case Managers for each grade (6,7,8)  Team Members | | **Expected Date of Completion:**  05/18/2018 |
| **Evidence of Completion of the Corrective Action:**  Copy of IEP, last page under the section "Other Relevant information" the 7 autism questions will be asked and answered. In addition, throughout the IEP, the student's needs will be addressed.  Initial or Re-evaluation: ADOS section will have data this student's skills and it can be another tool to use to how to appropriately and accurately answer and support the student. | | |
| **Description of Internal Monitoring Procedures:**  Beginning of the year meeting with all case managers- review the requirements needed to be addressed for a student on the spectrum and what questions need to be addressed. (attendance sheet and meeting notes)  Sampling of student records  Copy of student's IEP | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3A Special requirements for students on the autism spectrum | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The proposed internal monitoring process is not sufficiently detailed, as it does not indicate the frequency of student record sampling for internal review. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and tracking system to ensure that IEP Teams address and document consideration of the special requirements for students identified with a disability on the autism spectrum. The tracking system should specify the frequency of student record review by the Director of Special Education to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  Prior to developing the corrective actions, review the Department's guidance on IEP development for students with autism at http://www.doe.mass.edu/sped/advisories/07\_1ta.html.  By November 15, 2017, submit the revised ASD procedures and evidence of Team chairperson/case managers training including name(s) of presenter, agenda, and signed attendance sheet with staff name, role and signature.  By November 15, 2017, for those student records identified by the Department, submit a copy of the IEP and the Team Meeting Attendance Sheet (N3A) indicating that the IEP Teams have reconvened.  By November 15, 2017, submit a description of the charter school’s internal oversight and tracking system with periodic reviews, along with the name/role of the designated person  By March 15, 2018 submit the results of an internal review of records of ASD students with IEP development subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed and the number with evidence of all seven areas considered and specifically addressed. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**    11/15/2017  03/15/2018 | | |

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

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| **Criterion & Topic:**  SE 14 Review and revision of IEPs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that at least annually, on or before the anniversary date of the IEP, a Team meeting is not consistently held to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate. | | |
| **Description of Corrective Action:**  Every other week, the Director of Special Ed. will run reports through SEMS tracking to check the dates of each student's end of IEP and re-evaluation dates. Special Ed. director will then schedule the meetings at least 2 weeks in advance, contacting the family via email and then sending home a meeting invitation and proposal. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **Expected Date of Completion:**  05/18/2018 |
| **Evidence of Completion of the Corrective Action:**  IEP Summary sheet  Sample of random records  training & attendance sheet of timelines and reports | | |
| **Description of Internal Monitoring Procedures:**  Bi-weekly reports through SEMS of IEP dates  Sample of student records  Special Ed. Meetings- training staff on how often IEPs need to be held and during a year two meetings may take place, annual and re-evaluation.  Attendance sheets  Proposed IEP summary sheet | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 14 Review and revision of IEPs | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017, submit evidence of special education staff/case managers training including name(s) of presenter, agenda, and signed attendance sheet with staff name, role and signature.  By March 15, 2018, submit the results of an internal review of approximately10 records of students with annual reviews conducted subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed and the number of IEPs that were convened on or before the anniversary date of the last IEP. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/15/2017  03/15/2018 | | |

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

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that information included in the narrative description of the Notice of Proposed School District Action (N1) does not contain sufficient detail of the charter school's proposed actions, specifically a description of each evaluation procedure, test, record, or report the agency used as a basis for the proposed or refused action. | | |
| **Description of Corrective Action:**  The proposal needs to include a description of what type of assessments where used to determine eligibility of a student who requires an IEP or 504. The description will include the name and type of assessment; for example, cognitive and academic testing, social/emotional, attention/health, speech & language, OT, ADOS, etc. | | |
| **Title/Role(s) of Responsible Persons:**  Special Ed. Director  Case Managers (6th, 7th, 8th Grade) | | **Expected Date of Completion:**  05/18/2018 |
| **Evidence of Completion of the Corrective Action:**  Sample of student record (and proposal)  Copy of evaluations, teacher summaries (pink sheets), sample of classwork, etc. | | |
| **Description of Internal Monitoring Procedures:**  Training at beginning of year (attendance) of what needs to be included in proposal (exemplary proposal)  Sample of Proposals  Director will edit and sign off on all proposals being sent home, to ensure they include adequate information. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017, submit evidence of staff training on the procedures to ensure that Notices of Proposed School District Action (N1) consistently include a description of each evaluation procedure, test, record, report the Team used as a basis for the proposed or refused action, along with the agenda, signed attendance sheet, name and role of presenter, and training materials.  By March 15, 2018 submit the results of an internal review of approximately 10 records of students with evaluations subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed, the number with N1s that include a description of each evaluation procedure, test, record, report that the Team used as a basis for the proposed or refused action. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
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| **Criterion & Topic:**  SE 27 Content of Team meeting notice to parents | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Although staff interviews indicated that general education teachers consistently attend IEP Team meetings, a review of student records indicated that they are not listed on the attendance sheet (N3A) attached to the meeting invitation (N3) and do not always sign the attendance sheet at the Team meeting. | | |
| **Description of Corrective Action:**  Case Managers will ensure all team members sign in at the beginning of each meeting. The Case Manager will double-check the attendance check at the end of the meeting to ensure everyone has signed in. Staff will be informed of this responsibility at the beginning of the year, during Special Ed. training and all staff will be informed during our whole staff training. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Ed.  Case Managers (6th, 7th, 8th) | | **Expected Date of Completion:**  05/18/2018 |
| **Evidence of Completion of the Corrective Action:**  Training: All staff (sign in sheet) of what is expected at IEP meetings and their responsibility to sign in and be present at meetings  Attendance sheet  IEP summary (with teacher, parent & evaluator comments) | | |
| **Description of Internal Monitoring Procedures:**  Sample of random records (attendance sheet)  Inviting teachers via email (prior to meeting)  Staff training sign-in sheet | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 27 Content of Team meeting notice to parents | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017, evidence of general education/case managers training including name(s) of presenter, agenda, and signed attendance sheet with staff name, role and signature.  By March 15, 2018, submit the results of an internal review of approximately 10 records of students with IEP development subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed and the number of N3As sent to parents with general education teachers identified and the number of records with general education teachers signing the N3A/Team attendance sheet during the Team meeting. 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). | | |
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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Interviews with administrative staff and a parent indicated that the charter school has not established a school-wide parent advisory council (PAC) on special education or sought a waiver from the Department to meet this requirement in an alternative manner. | | |
| **Description of Corrective Action:**  During our Summer PDs, Special Ed. Director, Principal and Ex. Director will discuss the timeline of when the meetings will take place. We will also discuss the agenda and gather resources that can support our families. | | |
| **Title/Role(s) of Responsible Persons:**  Special Ed. Director  Principal  Executive Director | | **Expected Date of Completion:**  05/18/2018 |
| **Evidence of Completion of the Corrective Action:**  List of SEPAC dates  Sign in sheet  Overview of each meeting (meeting notes)  Summer training: discuss the importance of SEPAC and what it looks like at our school | | |
| **Description of Internal Monitoring Procedures:**  Open House (Initial meeting of SEPAC)  Sign in at meetings  Meeting notes  Copies of Resources | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The charter school's proposed corrective action does not provide sufficient detail on the establishment of its school-wide parent advisory council (PAC) on special education. | | |
| **Department Order of Corrective Action:**  Develop a detailed plan to establish a parent advisory council that offers membership to all parents of students with disabilities in the charter school, as well as other interested parties, along with by-laws regarding officers and operational procedures; the opportunity to participate in the planning, development and evaluation of the charter school’s special education programs; and events such as the annual workshop on the special education rights of students and parents/guardians.  Please see the Guidance for Special Education Parent Advisory Councils at http://www.doe.mass.edu/sped/pac/default.html and Administrative Advisory SPED 2015-2R: Special Education Parent Advisory Councils, Acceptable Alternatives, and Use of Social Media at http://www.doe.mass.edu/sped/advisories/2015-2r.html for direction. | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 submit a plan that describes how the school will meet the requirement for a parent advisory council, including meeting minutes, planning agenda, timeline, etc.  By March 15, 2018, submit the following:  1. the PAC by-laws,  2. the names of its elected officers,  3. a narrative description of how the charter school supports the SEPAC,  4. the agenda (dated) and signed attendance sheet for the annual workshop on parent and student rights, &  5. a narrative description of how the charter school provides opportunities for the PAC to participate in the planning, development and evaluation of the school's special education programs. | | |
| **Progress Report Due Date(s):**  11/15/2017  03/15/2018 | | |

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

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| **Criterion & Topic:**  SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the charter school's procedures for suspension of students with disabilities do not include a description of the manifestation determination process. | | |
| **Description of Corrective Action:**  Staff will be trained during Summer PD on Special Ed. laws and discuss the laws on how a school can suspend a student with a disability. Staff will be trained on Manifestation hearings and discuss the disciplinary flow chart. Staff will be informed of how the policy has been updated in the handbook | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Ed.  Principal  Ex. Director  Dean of Student Support  Dean of Student Affairs | | **Expected Date of Completion:**  05/18/2018 |
| **Evidence of Completion of the Corrective Action:**  Summer PD on Special Ed. Laws (sign in sheet) (explain the laws and inform staff/teachers of suspension procedures) (discuss Manifestation hearings, disciplinary flowchart. etc).  Update Handbook and procedures and policy | | |
| **Description of Internal Monitoring Procedures:**  Meeting notes (from manifestation hearings)  Sign in sheet (from Summer PDs)  Behavior monitor system (tracking student behavior)  Suspension records | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Prior to developing corrective actions, please review the Department's guidance on suspension of students with disabilities at http://www.doe.mass.edu/sped/IDEA2004/spr\_meetings/discipline.html and state laws at  http://www.doe.mass.edu/lawsregs/advisory/discipline/StudentDiscipline.html.  By November 15, 2017 submit the 2017-2018 Student and Family Handbook, including revised procedures for the discipline of students with disabilities and students with 504 Accommodation Plans. Alternatively, provide a direct webpage link to the updated handbook.  By November 15, 2017, submit evidence of administrator and staff training on the manifestation procedures, including the agenda, signed attendance sheet, name and role of presenter, and training materials. | | |
| **Progress Report Due Date(s):**  11/15/2017 | | |

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

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| **Criterion & Topic:**  SE 47 Procedural requirements applied to students not yet determined to be eligible for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated the charter school does not have disciplinary procedures for students who are not yet determined to be eligible for special education. Administrative interviews indicated that if the school had no reason to consider a student disabled, and the parent requested an evaluation subsequent to a disciplinary action, the school would conduct an expedited evaluation to determine eligibility. | | |
| **Description of Corrective Action:**  Staff and teachers will be informed of the procedural requirements during Summer PD of Special Ed. Laws. During the PD, staff will be trained on the disciplinary procedures for students who are not yet determined to be eligible for special education. Staff will also be trained as to what actions may constitute an expedite evaluation and the steps needed to get this process started. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Ed.  Principal  Ex. Director  Dean of Student Affairs  Dean of Student Support | | **Expected Date of Completion:**  05/18/2018 |
| **Evidence of Completion of the Corrective Action:**  Staff will be informed of this procedure during Summer Special Ed. Law PD (sign in sheet)  Handbook/Code of conduct | | |
| **Description of Internal Monitoring Procedures:**  Summer Special Ed. PDs  Suspension Hearings (meeting notes)  Suspension records and consequences  Teacher and/or parent request for eval. due to serious concerns (referral documentation) | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 47 Procedural requirements applied to students not yet determined to be eligible for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 submit evidence of training for administrators and appropriate special education staff on how to determine whether the charter school may be considered to have prior knowledge that the student may have a disability: 1) if the parent expressed concerns in writing; 2) if the parent had requested an evaluation; or 3) charter school staff had expressed concerns about a pattern of behavior demonstrated by the student. Include the agenda, training materials, signed attendance sheets and the name and role of presenter.  By November 15, 2017 submit the 2017-2018 Student and Family Handbook, including revised procedures for the discipline of students not yet determined to be eligible for special education. Alternatively, provide a direct webpage link to the updated handbook. | | |
| **Progress Report Due Date(s):**  11/15/2017 | | |

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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 documents indicated that although the charter school describes how it ensures equal access to a full range of education programs for all students, regardless of race, color, sex, religion, national origin, gender identity, sexual orientation, or disability, this description does not consistently address the protected category of homelessness. | | |
| **Description of Corrective Action:**  A review of all documents will reflect homelessness for the start of the upcoming school year. | | |
| **Title/Role(s) of Responsible Persons:**  Sophia Boyer, Interim Executive Director | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  School handbook, all websites and all enrollment forms. | | |
| **Description of Internal Monitoring Procedures:**  All administrators will review documents and our Board of Trustees lawyers will review the documents for legal correctness. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 submit evidence of administrator and staff training on the revised equal access policy including an agenda, training materials that specify homelessness as a protected category, signed attendance sheets and the name and role of presenter.  By November 15, 2017 submit the 2017-2018 Student and Family Handbook with homelessness added to the nondiscrimination policy. Alternatively, provide a direct webpage link to the updated handbook. | | |
| **Progress Report Due Date(s):**  11/15/2017 | | |

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

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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 code of conduct has not been translated into the school's identified major languages of Spanish and Haitian Creole. Document review and staff interviews indicated that the charter school relies on web translation for written documents and staff members to provide oral interpretation in Spanish and Haitian-Creole. | | |
| **Description of Corrective Action:**  We have hired a translator that will be able to translate the code of conduct aspects of the handbook and will be at events with staff members to translate in Spanish and Haitian-Creole. | | |
| **Title/Role(s) of Responsible Persons:**  Sophia Boyer, Interim Executive Director | | **Expected Date of Completion:**  10/01/2017 |
| **Evidence of Completion of the Corrective Action:**  Student and Family Handbook | | |
| **Description of Internal Monitoring Procedures:**  Review by administrative staff to ensure that all documents will be complete and have been appropriately translated for parents and families. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 submit the Spanish and Haitian Creole translations of the 2017-2018 code of conduct in the Student and Family Handbook. Alternatively, provide a link to the translated codes of conduct on the school's website. | | |
| **Progress Report Due Date(s):**  11/15/2017 | | |

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

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| **Criterion & Topic:**  CR 8 Accessibility of extracurricular activities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that although the charter school has a policy that ensures equal access to a full range of extracurricular activities, sports and clubs for all students, regardless of race, color, sex, religion, national origin, sexual orientation, disability, or homelessness, this policy does not address the protected category of gender identity. | | |
| **Description of Corrective Action:**  The review of all documents that address and or discuss extracurricular activities, sports and clubs will address the protected category of gender identity. | | |
| **Title/Role(s) of Responsible Persons:**  Dean of Students/Athletic Director | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  All documents reflecting this change will be uploaded for DESE review to ensure that all documents reflect the protected category of gender identity. | | |
| **Description of Internal Monitoring Procedures:**  All administrative staff will review documents that reflect extra-curricular activities, sports and clubs for all students and ensure that the policy addresses the protected category of gender identity. A checklist that reflects this data will be created to ensure updates have been made and will be included in all new documents. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 submit the revised 2017-2018 Student and Family Handbook that includes gender identity as a protected category in the charter school's policy ensuring equal access to a full range of education programs including extracurricular activities. Alternatively, provide a direct webpage link to the updated handbook. | | |
| **Progress Report Due Date(s):**  11/15/2017 | | |

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

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the charter school's code of conduct does not include appropriate procedures for the discipline of students with Section 504 Accommodation Plans or disciplinary measures the school may impose when a determination of harassment or discrimination has occurred. | | |
| **Description of Corrective Action:**  Student Handbooks are always reviewed over the summer. The handbook will be reviewed and will include the appropriate procedures for discipline with students that have 504 accommodations and a determined satin of harassment discrimination. | | |
| **Title/Role(s) of Responsible Persons:**  Sophia Boyer, Interim Executive Director, Dean of Students/Athletic Director, SPED Director | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  A copy of the handbook will be uploaded reflecting the necessary corrections. | | |
| **Description of Internal Monitoring Procedures:**  Ongoing review of the handbook will occur with the Board of Trustees legal team to ensure that we have accurately and efficiently included all necessary information for the documents. The Governance Committee will review for correctness of the document during their September meeting. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 submit the Student and Family Handbook revised procedures for the discipline of students with disabilities that includes students on Section 504 Accommodation Plans and the disciplinary measures the school may impose when a determination of harassment or discrimination has occurred. Alternatively, provide a direct webpage link to the updated handbook.  By November 15, 2017 submit evidence, including the agenda, training materials, signed attendance sheets and the name and role of presenter, indicating that all administrative staff have received training on the charter school's procedures for the discipline of students with Section 504 Accommodation Plans and disciplinary measures the school may impose when a determination of harassment or discrimination has occurred. | | |
| **Progress Report Due Date(s):**  11/15/2017 | | |

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

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the charter school publishes its local Bullying Prevention and Intervention Plan in the employee and student/parent handbooks. However, the Plan has not been updated consistent with the amendments to the Massachusetts anti-bullying law to extend protections to students who are bullied by a member of the school staff, which includes, but is not limited to, an educator, administrator, school nurse, cafeteria worker, custodian, bus driver, athletic coach, advisor to an extracurricular activity or paraprofessional. | | |
| **Description of Corrective Action:**  The Employee and Family Handbook will update all aspects of the bullying policy to ensure that the policy is clear to all of the school community. | | |
| **Title/Role(s) of Responsible Persons:**  Sophia Boyer, Interim Executive Director, Christopher Coblyn, Dean of Students/Athletic Director | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  The policy will be uploaded reflecting the changes needed for the bullying intervention and prevention policy. | | |
| **Description of Internal Monitoring Procedures:**  A checklist will be provided to the administrative team to ensure that all policies are completed and align with required documents for the bullying intervention and prevention policy. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 submit the charter school's revised Bullying Prevention and Intervention Plan that includes staff in the definition of aggressors and states that all staff hired after the start of the school year must participate in professional development on the charter school's bullying plan. Alternatively, provide a direct webpage link to the updated Plan.  By November 15, 2017 submit evidence of training on the charter school's Bullying Prevention and Intervention Plan for all staff including educators, administrators, school nurse, cafeteria workers, custodians, bus drivers, athletic coaches, advisors to an extracurricular activity and paraprofessionals whether hired or contracted. Submit the agenda, signed attendance sheet, name and role of presenter, and training materials. | | |
| **Progress Report Due Date(s):**  11/15/2017 | | |

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

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the procedures for student discipline do not address all required components, including: 1) a School-Wide Education Service Plan for students on short- or long-term suspension; 2) tracking attendance in educational services for long-term suspensions and expulsions; 3) procedures allowing principals to address the impact of disciplinary action on selected student populations and to modify disciplinary practices as needed; and  4) emergency removal procedures. | | |
| **Description of Corrective Action:**  A policy that is reflected in the family handbook will address the school-wide service plan for short or long-term suspension, tracking of attendance in regards to long-term suspension and expulsions with special attention to selected student populations and to modify disciplinary practices as needed and emergency removal procedures. | | |
| **Title/Role(s) of Responsible Persons:**  Sophia Boyer, Interim Executive Director and SPED Director and Dean of Students/Athletic Director | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  This policy will be reflected in the Family Handbook and will detail the aforementioned details in regards to suspension, attendance and expulsions. It will address more clearly and succinctly the disciplinary practices that address emergency removal procedures. | | |
| **Description of Internal Monitoring Procedures:**  The administrative team will review the handbook with the staff to ensure all regulations are met and up-to-date and conform with state regulations. The Board of Trustees (Governance Committee) will also review the documents before distribution to the school community to ensure accuracy and clarity. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 submit the revised charter school procedures for the discipline of students that includes: 1) a School-wide Educational Services Plan; 2) the method and person responsible for tracking attendance in educational services; 3) emergency removal procedures; and 4) the principal's responsibility to address the impact of disciplinary actions on selected student populations with procedures to modify disciplinary practices as needed.  By November 15, 2017 submit evidence of training for administrative staff on the revised discipline procedures including the agenda, signed attendance sheet, name and role of presenter, and training materials.  By March 15, 2018 submit a sample of the disaggregated data for selected student populations and a narrative describing the impact of disciplinary actions and the modifications to disciplinary practices. | | |
| **Progress Report Due Date(s):**  11/15/2017  03/15/2018 | | |

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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 documents and staff interviews indicated that the charter school 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 school 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. Staff interviews indicated that the school 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:**  A policy for restraint prevention and behavior along with procedures pursuant with regulations in M.G.L. 603 CMR 46.00 will be written and reviewed for accuracy and appropriateness to address physical restraint. A process for in-depth training and school-wide resources will be written, reviewed and implemented for the upcoming school year. | | |
| **Title/Role(s) of Responsible Persons:**  Jessica Dubrow, SPED Director and Christopher Coblyn, Dean of Students/Athletic director | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  The policy will be uploaded for review before submitted to the staff for implementation. | | |
| **Description of Internal Monitoring Procedures:**  The administrative team will work from a checklist that addresses all aspects of this policy to ensure all processes are consistent with the requirements of M.G.L. 603 CMR 46.00. | | |
| 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:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The charter school's CAP description did not address staff training and the dissemination of the revised physical restraint and behavior support policy and procedures to staff and parents. | | |
| **Department Order of Corrective Action:**  Revise the Physical Restraint Prevention and Behavioral Support policy and procedures to be consistent with regulations under 603 CMR 46.00.  Train all staff on the revised policy and procedures, including de-escalation strategies, time out procedures, and the identification of school-wide resource staff who have in-depth training to implement a physical restraint, when needed.  Disseminate the revised Physical Restraint Prevention and Behavioral Support policy and procedures to parents and guardians. | | |
| **Required Elements of Progress Report(s):**  By September 15, 2017 submit the charter school's Physical Restraint Prevention and Behavioral Support policy and procedures.  By September 15, 2017, submit evidence of training all staff on the Physical Restraint Prevention and Behavior Support policy and procedures including the agenda, signed attendance sheet, name and role of presenter, and training materials.  By November 15, 2017 submit evidence that the Physical Restraint Prevention and Behavior Support policy has been disseminated to parents. Evidence may include a memo or email indicating how the policy is disseminated, a letter to families, or a link to the notice on the charter school's website. | | |
| **Progress Report Due Date(s):**  09/15/2017  11/15/2017 | | |

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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 administrative interviews indicated that the charter school does not evaluate all aspects of its grade 6-8 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:**  Some aspects of the civil rights criterion are reviewed and evaluated, but we will create an ongoing evaluation to ensure that all aspects of the criterion are reviewed annually. | | |
| **Title/Role(s) of Responsible Persons:**  Sophia Boyer, Interim Executive Director | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  A document that will include a survey that evaluates the program and ensures all aspects of the documents meet all requirements. | | |
| **Description of Internal Monitoring Procedures:**  A checklists and survey components will be included as part of the internal monitoring process annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The charter school did not provide sufficient detail for its proposed annual institutional self evaluation to ensure equal access to all programs including athletics and extracurricular activities for all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability or housing status. | | |
| **Department Order of Corrective Action:**  Develop a detailed plan to describe how the school will evaluate all aspects of its 6-8 programming annual to ensure equal access to all students. Include what data will be gathered, timelines for completion of data gathering & analysis, participants by role, and a date for release of the report/findings to the school community.  If the charter school has recently submitted data to the Office of Civil Rights (see https://www2.ed.gov/about/offices/list/ocr/data.html and https://ocrdata.ed.gov/Page?t=d&eid=54800&syk=7&pid=2008), these data can be used, along with the checklist and survey components, to assess equal access of all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, to all aspects of the school's programming. | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017, submit the proposed evaluation plan, including what data will be gathered, timelines for completion of data gathering & analysis, participants by role, and a date for release of the report/findings to the school community.  By March 15, 2018, submit the results of the institutional self-evaluation, along with a description of areas where lack of access was determined and changes made to address these areas. | | |
| **Progress Report Due Date(s):**  11/15/2017  03/15/2018 | | |

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

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| **Criterion & Topic:**  ELE 1 Annual English Language Proficiency Assessment | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of ACCESS participation rates as shown in the state database indicated that the charter school has assessed the English proficiency of only 94% of the English learners (ELs) in the district. | | |
| **Description of Corrective Action:**  When each new student and returning students are being correctly coded and identified, I will make sure that each new and returning ELL student is identified correctly in the October and March SIMS Reports. | | |
| **Title/Role(s) of Responsible Persons:**  Francis Peña | | **Expected Date of Completion:**  05/20/2018 |
| **Evidence of Completion of the Corrective Action:**  The completed October and SIMS Reports with no errors will be the evidence. | | |
| **Description of Internal Monitoring Procedures:**  When it is time to order the ACCESS, I will make sure every student is accounted for in the WIDA AMS. Incentives will be offered to students to come to school on test day. Also a call alert will go out to parents the night before to inform them of the ACCESS and make sure they get a good night's sleep. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 1 Annual English Language Proficiency Assessment | **Corrective Action Plan Status:** Approved  **Status Date:** 07/10/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 provide training to all staff members involved in ACCESS test administration, data entry and ELE staff to ensure that they are all knowledgeable about the process and submit the training materials, sign-in sheets and agendas by the progress report due date.  By March 15, 2018 please submit a roster of the ELs who have been administered ACCESSS for ELLs in 2016. 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 charter school's plan to remedy it. | | |
| **Progress Report Due Date(s):**  11/15/2017  03/15/2018 | | |

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

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| **Criterion & Topic:**  ELE 10 Parental Notification | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that the charter school does not provide progress reports including, but not limited to, progress in becoming proficient in using the English language to parents or legal guardians of students in the English learner program in the same manner and frequency as report cards and progress reports to the other students enrolled in the school. | | |
| **Description of Corrective Action:**  Aligned with the school's midterm and quarterly report schedule to families, ELL teacher will translate and print the ELL progress report detailing the students English Language Proficiency growth. Reports will be sent home with midterm general progress reports and end of term quarterly report cards. A copy of all English Language Proficiency growth reports will be in student files for teacher review. | | |
| **Title/Role(s) of Responsible Persons:**  Francis Peña, ELL Director/ESL Teacher | | **Expected Date of Completion:**  05/20/2018 |
| **Evidence of Completion of the Corrective Action:**  The translated progress reports and parent letters with signature will be the evidence. | | |
| **Description of Internal Monitoring Procedures:**  ELL grades will be monitored through PowerSchool, progress reports, report cards, and monthly grade level meetings. I will also check in with each individual EL weekly as to how they are doing academically and socially. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 10 Parental Notification | **Corrective Action Plan Status:** Approved  **Status Date:** 07/05/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2017 submit procedures for ESL progress reports.  By March 15, 2018 submit the results of an internal review of 10 records to determine whether  the charter school has sent to parents or legal guardians the progress reports to inform them of their child's progress in English language acquisition. Provide a detailed narrative summary of the review including the number of records reviewed and the number with ESL progress reports. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/15/2017  03/15/2018 | | |