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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: Southwick-Tolland-Granville Regional School 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 09/19/2017.

**Mandatory One-Year Compliance Date:** **09/19/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 4 | Reports of assessment results | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 53 | Use of paraprofessionals | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | 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 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |
| ELE 3 | Initial Identification | Partially Implemented |
| ELE 18 | Records of ELL students | Partially Implemented |

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| **Criterion & Topic:**  SE 4 Reports of assessment results | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicated that the assessment reports conducted by related service providers and special education teachers do not consistently summarize the diagnostic impressions or define in detail and in educationally relevant and common terms the explicit means of meeting the students' needs. | | |
| **Description of Corrective Action:**  The STGRSD has determined that the root cause of assessment reports conducted by related service providers and special education teachers not consistently summarizing the diagnostic impressions or defining in detail and in educationally relevant and common terms the explicit means of meeting the students needs is due to a lack of awareness about this requirement. The District School Psychologists regularly summarized their diagnostic impressions but related services and special education teachers were not aware of the requirement to include this information in their assessments.  The Director of Special Education will meet with all district staff that administer assessments to provide training on the requirements of summarizing their diagnostic impressions or defining in detail and in educationally relevant and common terms the explicit means of meeting the students' needs. | | |
| **Title/Role(s) of Responsible Persons:**  Noell Somers, Director of Special Education | | **Expected Date of Completion:**  12/31/2017 |
| **Evidence of Completion of the Corrective Action:**  Agenda of staff training  sign in of staff attending training | | |
| **Description of Internal Monitoring Procedures:**  Director of Special Education will randomly review assessments over the next year to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 4 Reports of assessment results | **Corrective Action Plan Status:** Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training (agenda, materials used and attendance list with staff signature/role) provided to related service providers and special education teachers on the district procedures to ensure completed assessments summarize in writing the evaluators' diagnostic impressions or define in detail and educationally relevant and common terms the explicit means of meeting the students' needs by January 8, 2018.  Conduct a review of records for students across all grade levels with initial and re-evaluation Team meetings held after training is provided, for evidence that assessments conducted by related service providers and special education teachers summarize in writing their diagnostic impressions and define in detail and in educationally relevant and common terms the explicit means of meeting the students' needs. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance by April 2, 2018.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  01/08/2018  04/02/2018 | | |

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicated that when a student is removed from the general education classroom at any time, the Team does not consistently state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  The STGRSD has determined that the root cause for not indicating consistently stating why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily is due to the need for updated training emphasizing the importance of written descriptions that identify why the student is being removed from the general education setting. Current language is similar and minimal and training will focus on clear individual statements justifying why removal is necessary when removal occurs. These statements will focus on the benefit the student will receive from being outside of the general education environment. | | |
| **Title/Role(s) of Responsible Persons:**  Noell Somers, Director of Special Education | | **Expected Date of Completion:**  12/31/2017 |
| **Evidence of Completion of the Corrective Action:**  Agenda of staff training  sign in of staff attending training  Copies of LRE statements included in IEP's | | |
| **Description of Internal Monitoring Procedures:**  Director of Special Education will randomly review LRE statements in IEP's over the next year to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training (agenda, materials used, and the dated attendance list with staff signature/role) provided to Team Chairs, special education teachers and related service providers on the district's procedures for writing Non-participation Justification statements that are individualized to the student and justify why removal is necessary by January 8, 2018.  Conduct a review of records for students across all grade levels with Team meetings held subsequent to implementation of all corrective actions, for evidence that the Non-participation Justification statement is specific to each student, states why the removal is considered critical to the student's program and the basis for the Team's conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance by April 2, 2018.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  01/08/2018  04/02/2018 | | |

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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:**  Student record review indicated that the district's Notice of Proposed School District Action (N1) does not consistently include: 1) the action the school district is proposing to take; 2) why the district is proposing to act; 3) a description of any other options that the district considered and the reasons why those options were rejected; 4) a description of each evaluation procedure, test, record or report used as a basis for the proposed action; or 5) other factors relevant to the district's decision. | | |
| **Description of Corrective Action:**  The STGRSD has determined that the root cause for not consistently providing sufficient information that is reflective of the Team meeting within the Notice of Proposed School District Action is due to the need for updated training emphasizing the importance of writing an N1 that documents the individual specifics of each Team meeting. While the District N1's do answer all six questions the language is similar and minimal.  The Director of Special Education will update training to all Special Education staff writing N1's reviewing the purpose of the N1 letter as well as the required information that needs to be included so as to individualize the content of the questions in response to the Team meeting discussions. | | |
| **Title/Role(s) of Responsible Persons:**  Noell Somers, Director of Special Education | | **Expected Date of Completion:**  03/31/2018 |
| **Evidence of Completion of the Corrective Action:**  Special Education staff meeting agenda's  Sign in sheets for staff meetings  Copies of Notice of Proposed School District (N1) letters | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Director will regularly monitor N1 letters ensuring that comprehensive letters that are reflective of the Team meeting are being generated. | | |
| 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:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Please review the Sample Notices found at http://www.doe.mass.edu/sped/advisories/01\_4sample.pdf#search=%22notice%22  Submit evidence of training (agenda, materials used, and dated attendance list with staff signature/role) provided to all special education staff to ensure that the notice consistently includes the action the school district is proposing to take; why the district is proposing to act; a description of any other options that the district considered and the reasons why those options were rejected; a description of each evaluation procedure, test, record or report used as a basis for the proposed action; or other factors relevant to the district's decision by January 8, 2018.  Conduct a review of records for students across all grade levels with Team meetings held after training is provided, for evidence that the N1 includes: 1) the action the school district is proposing to take; 2) why the district is proposing to act; 3) a description of any other options that the district considered and the reasons why those options were rejected; 4) a description of each evaluation procedure, test, record or report used as a basis for the proposed action; or 5) other factors relevant to the district's decision. . Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance by April 2, 2018.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  01/08/2018  04/02/2018 | | |

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| **Criterion & Topic:**  SE 53 Use of paraprofessionals | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, interviews and classroom observations indicated that a paraprofessional who provides direct special education instruction does not receive supervision by a special education teacher. | | |
| **Description of Corrective Action:**  The District has determined that the root cause for a special education teacher not providing supervision to a paraprofessional who provided direct special education instruction was due to the special education teacher's lack of awareness about this requirement. The special education teacher felt the experience level and training of the paraprofessional was enough to plan and deliver lessons for this student. The Director of Special Education has meet with this teacher to inform her of the requirements to supervise any paraprofessional who provides direct special education instruction. As a result of this individualized training the special education teacher is supervising all lessons for paraprofessionals on a daily basis. | | |
| **Title/Role(s) of Responsible Persons:**  Noell Somers, Director of Special Education | | **Expected Date of Completion:**  09/10/2017 |
| **Evidence of Completion of the Corrective Action:**  Weekly lessons plans with instructional student groupings, identifying teacher and paraprofessional responsibilities for each lesson | | |
| **Description of Internal Monitoring Procedures:**  Director of Special Education will do monthly classroom observations for this special education teacher  Director of Special Education will do a periodic review of lessons plans and instructional groupings, where the teacher and paraprofessional responsibilities are identified | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 53 Use of paraprofessionals | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Please note: While the experience level and expertise of a paraprofessional is beneficial when working with any student, a paraprofessional does not design instruction for students with disabilities, but are expected to implement instruction under the supervision of an appropriately certified or licensed professional who is proximate. | | |
| **Department Order of Corrective Action:**  The district must train all special education teachers, related service providers and paraprofessionals on the use of a paraprofessional and the role of any supervising certified or licensed professional. | | |
| **Required Elements of Progress Report(s):**  Submit evidence of supervision provided by the appropriately certified special education teacher to the Department identified paraprofessional by January 8, 2018.  Submit the instructional grouping for the Transitions program at the high school for the 2017-2018 school year by January 8, 2018.  Submit the weekly lesson plans for the months of November and December identifying teacher and paraprofessional responsibilities by January 8, 2018.  Submit evidence of training (agenda, materials used, attendance list with staff signature/role) provided to all special education teachers, related service providers and paraprofessionals on the use of a paraprofessional and the role of any supervising certified or licensed professional by January 8, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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| **Criterion & Topic:**  SE 54 Professional development | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not consistently offer training to all general and special education teachers, including paraprofessionals, on state and federal special education requirements and related local special education policies and procedures or methods of collaboration among teachers and paraprofessionals to accommodate diverse learning styles of all students. | | |
| **Description of Corrective Action:**  The STGRSD has determined that the root cause for not consistently providing training on state and federal Special Education requirements as well as related local special education policies and procedures was the lack of a vehicle for providing this training to all district staff. The STGRSD regularly provides training and consultation to general education staff specific to the IEP's of special education students within the general education classroom but does not provide ongoing training about state and federal education requirements.  Over the next 3 months the Director of Special Education will work with the Director of Curriculum and Instruction to have state and federal special education requirements included in the Global Compliance Network (GCN) of training that all STGRSD staff are required to participate in annually before October 31st. | | |
| **Title/Role(s) of Responsible Persons:**  Noell Somers, Director of Special Education | | **Expected Date of Completion:**  12/31/2017 |
| **Evidence of Completion of the Corrective Action:**  List of all the training included in GCN that are requirements for employment in the STGRSD  Sign in documentation that all staff have participated in the GCN training that included state and federal Special Education requirements | | |
| **Description of Internal Monitoring Procedures:**  Director of Special Education will annually review the state and federal Special Education requirements included in the GCN trainings and will update with any new information. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's submission does not address providing 1) training on the procedures or methods of collaboration among teachers and paraprofessionals to accommodate diverse learning styles of all students (see also SE 53), or 2) developing a monitoring plan to ensure this training is provided regularly to all staff including paraprofessionals. | | |
| **Department Order of Corrective Action:**  The district must provide training to all general and special education teachers including paraprofessionals on the procedures or methods of collaboration to accommodate diverse learning styles of all students. In addition, the district must provide a description of an internal tracking and monitoring system to ensure that all special education and general education staff to include paraprofessionals will be provided training regularly on methods of collaboration among teachers and paraprofessionals to accommodate the diverse learning styles of all students. | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training (agenda, materials used, dated attendance list with staff signature/role) provided to all special education, general education, guidance and paraprofessional staff on analyzing and accommodating diverse learning styles of all students and the methods of collaboration among teachers and paraprofessionals (see also SE 53) to accommodate the diverse learning styles of all students by January 8, 2018.  Provide a description of an internal tracking and monitoring system with individuals designated responsible to ensure that all special education and general education staff to include paraprofessionals will be provided training regularly on methods of collaboration among teachers and paraprofessionals to accommodate the diverse learning styles of all students. by January 8, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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| **Criterion & Topic:**  CR 9 Hiring and employment practices of prospective employers of students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the statement the district requires an employer to sign to confirm compliance with applicable federal and state laws prohibiting discrimination in hiring or employment practices does not include the protected categories of gender identity, handicap or sexual orientation. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for the omission of the protected categories of gender identity, handicap or sexual orientation on forms that the district requires prospective student employers to sign is that the district non-discrimination policy was not updated following the bill passed by the MA senate in May 2016 which added gender identity to the list of protected categories. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  12/19/2017 |
| **Evidence of Completion of the Corrective Action:**  Updated district non-discrimination policy which includes gender identity as a protected category  Updated compliance forms for prospective student employers which include the updated non-discrimination policy. | | |
| **Description of Internal Monitoring Procedures:**  Forms will be reviewed yearly by the Director of Curriculum and Instruction and the Guidance Director to ensure that they meet compliance standards for current applicable federal and state laws. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a sample of the signed statement of assurance from prospective employers of students to confirm compliance with applicable federal and state laws prohibiting discrimination in hiring or employment practices that includes the protected categories of gender identity, handicap or sexual orientation by January 8, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the student handbooks for all four of the district's schools do not include procedures for accepting, investigating and resolving complaints alleging discrimination based on race, color, national origin, gender identity, religion, or sexual orientation. Also, the non-discrimination statements in the handbooks do not include the protected category of gender identity. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to include procedures for accepting, investigating and resolving complaints alleging discrimination in student handbooks is that the procedures, while established, have not been put into writing, and therefore were not included in the student handbook. Additionally, the district non-discrimination policy was not updated following the bill passed by the MA senate in May 2016 which added gender identity to the list of protected categories. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  08/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Written procedure for accepting, investigating, and resolving complaints alleging discrimination  Updated district non-discrimination policy  Updated student handbooks including the written procedure for accepting, investigating, and resolving complaints alleging discrimination, and the inclusion of gender identity in the list of protected categories in the non-discrimination policy | | |
| **Description of Internal Monitoring Procedures:**  Yearly review of handbooks by building administrators, receive updated regulations as part of the district's partnership with MASC and district's attorney. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  A review of Woodland and Southwick Regional School's 17-18 handbooks indicated that the non-discrimination statements now included the protected category of gender identity. Both handbooks do not include procedures for accepting, investigating and resolving complaints alleging discrimination based on the required protected categories. Powder Mill School's handbook is for the 16-17 school year. | | |
| **Department Order of Corrective Action:**  The district must update all handbooks to include the procedures for accepting, investigating and resolving complaints alleging discrimination based on race, color, national origin, gender identity, religion, or sexual orientation. Also, the handbook for Powder Mill School must be updated for the 2017-2018 school year and include a non-discrimination statement with the protected category of gender identity added. | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the section of each school's student handbook and code of conduct, or a link to the handbook on each school's website, that 1) contain procedures for accepting, investigating and resolving complaints alleging discrimination based on race, color, national origin, gender identity, religion, or sexual orientation, and 2) for Powder Mill School-the 2017-2018 handbook includes a non-discrimination statement with the protected category of gender identity added, and the handbook is updated on the school website by January 8, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the district's Bullying Prevention and Intervention Plan extends protections to students who are bullied by a member of the school staff. However, the student handbooks for each of the district's schools do not contain the relevant provisions addressing the bullying of students by a school staff member and do not clarify that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight on transferring updated information from the Bullying and Intervention Plan to student handbooks. The updated information extending protection to students who are bullied by a member of the school staff was provided in the revised student handbooks for SY 2017-2018. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  12/19/2017 |
| **Evidence of Completion of the Corrective Action:**  Updated student handbooks containing the full text of the district bullying intervention and prevention policy | | |
| **Description of Internal Monitoring Procedures:**  Students, parents, and staff must sign that they have read the student/employee handbooks. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  A review of Woodland and Southwick Regional Schools' 2017-2018 student handbooks on the district website indicated that both now contain the relevant provisions addressing the bullying of students by a school staff member and clarify that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. However, the student handbook for Powder Mill School is for the 2016-2017 school year. | | |
| **Department Order of Corrective Action:**  The district must update the student handbook for Powder Mill School for the 2017-2018 school year to ensure it contains the relevant provisions addressing the bullying of students by a school staff member and clarify that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. | | |
| **Required Elements of Progress Report(s):**  Ensure the handbook for Powder Mill School is updated on the district's website and contains the relevant provisions addressing the bullying of students by a school staff member and clarify that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report by January 8, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the district's student discipline policies and procedures under  M.G.L. c. 71, s. 37H¾ do not include the following required content:  the procedures for long-term suspension do not address that the student and parent must file written appeal to the superintendent within five days;  the procedures for a superintendent hearing do not address the timeliness of the student's or parent's notice of appeal and the superintendent's obligation to send written notice to the parent of the date, time and location of the hearing;  the requirement to arrange for an audio recording of the hearing and the responsibility to inform all parties before the hearing that an audio copy will be made of the hearing;  the procedures for in-school suspension; and  the procedures for emergency removal do not address that the principal may not remove a student from school on an emergency basis for a disciplinary offense until adequate provisions have been made for the student's safety and transportation. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for not including the required content in the student discipline policies and procedures under M.G.L. c. 71, s. 37H¾ is due to the need to update the district's student discipline policy using specific language from the legislation rather than paraphrasing or summarizing. It has been determined that paraphrasing/ summarizing has made the process less clear and transparent. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  12/19/2017 |
| **Evidence of Completion of the Corrective Action:**  Updated district student discipline policy including specific language from M.G.L. c. 71, s. 37H¾  Revision to student handbook to include updated student discipline policy | | |
| **Description of Internal Monitoring Procedures:**  Yearly review of handbooks by building administrators, receive updated regulations as part of the district's partnership with MASC and district's attorney. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  A review of the discipline procedures in the 17-18 handbooks for Woodland & Southwick Regional Schools' indicated each are missing: the procedures for a superintendent's hearing do not address his/her obligation to send written notice to the parent of the date, time and location of the hearing; the requirement to arrange for an audio recording of the hearing & the responsibility to inform all parties before the hearing that an audio recording will be made of the hearing; the use of in-school suspension as an alternative to a short-term suspension; the procedures for emergency removal do not address that the principal may not removed a student from school on an emergency basis of a disciplinary offense until adequate provisions have been made for the student's safety and transportation. Powder Mill handbook is for the 16-17 year. | | |
| **Department Order of Corrective Action:**  The district must update all school handbooks to include the revised discipline policies and procedures and ensure each include all required content. | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the district's updated discipline policies and procedures that include all required content specifically 1) the procedures for long-term suspension address that the student and parent must file written appeal to the superintendent within five days; 2) the procedures for a superintendent hearing address the timeliness of the student's or parent's notice of appeal and the superintendent's obligation to send written notice to the parent of the date, time and location of the hearing; the requirement to arrange for an audio recording of the hearing and the responsibility to inform all parties before the hearing that an audio copy will be made of the hearing; 3) the procedures for in-school suspension; and 4) the procedures for emergency removal address that the principal may not remove a student from school on an emergency basis for a disciplinary offense until adequate provisions have been made for the student's safety and transportation by January 8, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the notice of nondiscrimination in written materials and other media used to publicize the district, including student handbooks, employment vacancies and job postings, does not include the required protected category of gender identity. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for not including the protected category of gender identity in the notice of nondiscrimination in written materials and other media used to publicize the district is that the nondiscrimination policy was not updated to include gender identity as a protected category following the bill passed in the MA senate in May of 2016. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  12/19/2017 |
| **Evidence of Completion of the Corrective Action:**  Updated nondiscrimination policy to include gender identity as a protected category  List of all updated written and media materials including the revised nondiscrimination policy | | |
| **Description of Internal Monitoring Procedures:**  Yearly review of nondiscrimination policy by the director of curriculum and instruction to ensure compliance with most recent legislation. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date:** 10/30/2017  **Correction Status:** Corrected | |
| **Basis for Decision:**  A review of the district's website indicated that the notice of nondiscrimination in written materials, including employment vacancies and job postings, now includes the required protected category of gender identity.  No further progress reporting is required. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not issue a written notice to the parent and student within five days of the student's tenth consecutive absence. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for not consistently issuing a written notice to the parent and student within five days of the student's tenth consecutive absence is that there is no written procedure for tracking such correspondence. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  08/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Written procedure for identifying when written notice is to be sent to the parent, including who is responsible and what follow up measures were taken.  Staff meeting agenda and minutes | | |
| **Description of Internal Monitoring Procedures:**  Building principals to review quarterly | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Review the following document: High School Exit Intervention Model Protocol at http://www.doe.mass.edu/dropout/2014-05ExitProtocol.pdf  Submit a copy of the procedures developed and evidence of training (agenda and dated attendance list with staff signature/role) provided to the high school principal and guidance counselors on the new procedures, to ensure written notice to the parent and student within five days of the student's tenth consecutive absence by January 8, 2018.  Submit a copy of the notice sent by the district to students and their parents within five days of the student's tenth consecutive absence that includes all required content by January 8, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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

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| **Criterion & Topic:**  CR 21 Staff training regarding civil rights responsibilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district's in-service training for all staff provided annually regarding civil rights responsibilities and the prevention of discrimination and harassment does not include the protected category of gender identity. | | |
| **Description of Corrective Action:**  The root cause for the district's annual civil rights in-service training for all staff excluding the protected category of gender identity is that the in-service transcript was not updated to include gender identity following the passing of the MA senate bill which includes gender identity as a protected category. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  12/19/2017 |
| **Evidence of Completion of the Corrective Action:**  Updated civil rights training transcript | | |
| **Description of Internal Monitoring Procedures:**  Yearly review of annual in-service transcripts by the director of curriculum and instruction to be sure they are in compliance with the most recent laws and regulations. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training (agenda, materials used and attendance list with staff signature/role) provided to all staff on civil rights responsibilities and the prevention of discrimination and harassment that includes the protected category of gender identity by January 8, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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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:**  Document review and interviews indicated that individual teachers at the elementary level do not review educational materials for consideration of simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is that a written procedure for the review of educational materials does not exist. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  08/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Written procedure for the review of educational materials | | |
| **Description of Internal Monitoring Procedures:**  Staff meeting agenda and minutes  Written procedure for the review of educational materials | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide a copy of the procedures developed, and evidence of training (agenda, dated attendance list with staff signature/role) to ensure that individual teachers at the elementary school level review all educational materials presented in the classroom for consideration of simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation and that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such materials by January 8, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not evaluate all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for not evaluating all aspects of its K-12 programs for civil rights equity annually is that a written procedure for conducting a yearly institutional self-evaluation did not exist. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  12/19/2017 |
| **Evidence of Completion of the Corrective Action:**  Written procedure for yearly institutional self-evaluation  Evidence of annual invitation to staff to evaluate programs and report potential civil rights violations  Evidence of follow-up on any concerns raised by staff members | | |
| **Description of Internal Monitoring Procedures:**  Yearly institutional self-evaluation conducted by the director of curriculum and instruction | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide a copy of the district's procedures developed for its annual evaluation of its K-12 program that ensures all students have equal access to all programs, including athletics and other extracurricular activities and includes all protected categories by January 8, 2018.  Submit a copy of the results of the institutional self-evaluation, conclusions reached, and resolution of any identified issues by April 2, 2018. | | |
| **Progress Report Due Date(s):**  01/08/2018  04/02/2018 | | |

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

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| **Criterion & Topic:**  ELE 3 Initial Identification | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the district does not always use the state required language screening assessments. The district's current initial identification practice, using the IPT, is not in compliance with 603 CMR 14.02(1) that requires districts to establish procedures in accordance with the Department's guidelines. Please see the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" as found at HYPERLINK "http://www.doe.mass.edu/ell/Guidance.pdf" http://www.doe.mass.edu/ell/Guidance.pdf . | | |
| **Description of Corrective Action:**  The district has determined that the root cause for not consistently using the state required language screening assessment is that some students were screened prior to the change mandated by the state. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  12/19/2017 |
| **Evidence of Completion of the Corrective Action:**  The use of the state required language screening assessment. | | |
| **Description of Internal Monitoring Procedures:**  The ELL program director will ensure that the most recent required language screening assessment is available to the ESL teachers in a timely way. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 3 Initial Identification | **Corrective Action Plan Status:** Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 8, 2018, Please submit the 2017 screening test data by using Initial Identification Testing Data Form available in the WBMS Document Library. | | |
| **Progress Report Due Date(s):**  01/08/2018 | | |

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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:**  Student record review indicated that the results of identification and proficiency tests and evaluations, ACCESS and MCAS reports, progress reports, and report cards are not consistently maintained in the records of English learners. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for not consistently maintaining the records of English learners is due to the practice of keeping paper progress reports, and not duplicating certain documents kept in students' cumulative files. | | |
| **Title/Role(s) of Responsible Persons:**  Jenny Sullivan, Director of Curriculum and Instruction | | **Expected Date of Completion:**  08/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Use of a digital method for progress reporting  Checklist of required documents for each ELL student file | | |
| **Description of Internal Monitoring Procedures:**  Annual self-audit of ELL student files | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 18 Records of ELL students | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/30/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's evidence of completion of corrective action does not address training responsible staff to ensure that the results of identification and proficiency tests and evaluations, ACCESS and MCAS reports, progress reports, and report cards are consistently maintained in the records of English learner (EL) students. | | |
| **Department Order of Corrective Action:**  The district must train ELE teachers and responsible support staff to ensure that the results of identification and proficiency tests and evaluations, ACCESS and MCAS reports, progress reports, and report cards are consistently maintained in the records of EL students. | | |
| **Required Elements of Progress Report(s):**  Provide evidence of training (agenda, materials used, dated staff attendance list with signature/role) provided to ELE teachers and responsible support staff to ensure that the results of identification and proficiency tests and evaluations, ACCESS and MCAS reports, progress reports, and report cards are maintained in the records of EL students by January 8, 2018.  Conduct a review of EL student records, after training is provided, for evidence that the results of identification and proficiency tests and evaluations, ACCESS and MCAS reports, progress reports, and report cards re maintained in the records of EL students. Indicate the number of EL student records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance by April 2, 2018.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  01/08/2018  04/02/2018 | | |