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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: Lowell

CPR Onsite Year: 2017-2018

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 09/05/2018.

**Mandatory One-Year Compliance Date:** **09/05/2019**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 29 | Communications are in English and primary language of home | Partially Implemented |
| SE 51 | Appropriate special education teacher licensure | Partially Implemented |
| SE 52 | Appropriate certifications/licenses or other credentials -- related service providers | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 24 | Curriculum review | Not Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |
| ELE 5 | Program Placement and Structure | Partially Implemented |
| ELE 6 | Program Exit and Readiness | Partially Implemented |
| ELE 14 | Licensure Requirements | Partially Implemented |

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

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| **Criterion & Topic:** SE 29 Communications are in English and primary language of home | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Student record review and staff interviews indicated that not all important special education documents, such as IEPs, notices, and assessment summaries, are translated into the primary language of the home if such primary language is other than English. |
| **Description of Corrective Action:** A. The district has asked the teams to reconvene on the students that did not have appropriate translations. At the meeting the parent will receive translated copies of important special education documents that were not translated from the prior meeting. The team will ensure the parent does not have any specific questions and understands the information presented and that all FAPE issues are remediated. A N1 will be generated to summarize the information from the meeting and any questions the parent had. These meetings will be completed by December 7, 2018.B. By January 11, 2019 the special education department will pull 7 additional files to review to ensure translations have been completed appropriately and provided to the parents within federal and state guidelines.C. The district has created a form that will be used to document verbal translations if parents request that support. (The form has been included.) The form will be reviewed with all special education administrative staff on the November 16, 2018 whole group staff meeting. By November 23, 2018, the form will be reviewed with all special education teachers and related service providers. The form will be used throughout the district beginning November 26, 2018. A spot check for compliance will take place on January 11, 2019.D. The district has created a form to review the process for checking languages and interpretation requests in Aspen and how to document the information in EASYIEP. (The form has been included.) This will be shared with all special education administrative, teaching, and related service staff no later than October 12, 2018. During file reviews the Evaluation Team Chairs and Special Education Administration will check this information for accuracy and address any issues with the staff directly. E. The district will purchase a translation program by October 31, 2018. It will be rolled out to all school based administrative teams by November 16, 2018. The district has created a form to request all translations. (The form has been included.) Two clerks will be trained in how to use the form and translation program by November 9, 2018. The district will use in district translators to check the accuracy of the documents produced. The teams will use the program to translate appropriate special education documents; to ensure the parents are receiving all translated information when they receive English documentation. Data will be collected regarding the effectiveness, ease of data translations and completion time from to be reviewed by the special education administration by January 11, 2019. (The form to collect this data has been included.)F. The district will continue to examine additional translation programs and funding sources through January 2019. At which point, the district will determine the appropriateness and additional recourses to ensure all documents can be translated quickly, efficiently and accurately. The district will have a plan by March 1, 2019 of any additional supports that will need to be added to ensure all documents are translated. Additional supports will be added to the 2019-2020 budget and implemented for the start of the 2019-2020 school year. |
| **Title/Role(s) of Responsible Persons:**Director of Special Education, Assistant Superintendent for Finance | **Expected Date of Completion:**09/04/2019 |
| **Evidence of Completion of the Corrective Action:**A. A N1 will be generated to summarize the information from the meeting and any questions the parent had. These meetings will be completed by December 7, 2018.B. The Special Education Director will complete a file review log on January 11, 2019.C. The Special Education Director will complete a file review log on January 11, 2019 after a random check of files is completed to ensure compliance. There will also be a sign in sheet and agenda from the training where this was reviewed.D. There will be a sign in sheet and agenda from the training where this was reviewed.E. There will be a sign in sheet and agenda to show the implementation discussion. The translation request forms and logs will be submitted to the state by January 11, 2019.F. The district will include any additional translation software in the 2019-2020 budget. |
| **Description of Internal Monitoring Procedures:** A. The Special Education Director will review the files of the specific students and submit the completed forms to the state.B. The Special Education Director will upload the file review log to the state as evidence. The special education department currently periodically spot checks files. As part of this process the department will provide feedback for teams in terms of translations that will be used to improve practice and for evaluative purposes.C. The Special Education Director will upload the file review log to the state as evidence. The special education department currently periodically spot checks files. As part of this process the department will provide feedback for teams in terms of translations that will be used to improve practice and for evaluative purposes.D. The Special Education Director will upload the file review log to the state as evidence. The special education department currently periodically spot checks files. As part of this process the department will provide feedback for teams in terms of translations that will be used to improve practice and for evaluative purposes.E. The special education administration will participate in monthly meetings with the translation clerks to ensure compliance and to trouble shoot issues. There will also be spot checks of files for compliance.F. The Assistant Superintendent of Finance and Director of Special Education will review the results of the translation documentation on a monthly basis and review the district needs. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 29 Communications are in English and primary language of home | **Corrective Action Plan Status:** Approved **Status Date:** 10/17/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 14, 2018, submit evidence of training for appropriate staff on the requirements for translating important special education documents, such as IEPs, notices, and assessment summaries, into the primary language of the home if such primary language is other than English. Include the training dates, agenda, training materials, and signed attendance sheets indicating the title/role of staff and the name and title of the presenter. By December 14, 2018, for parents of the individual students identified by the Department, provide the appropriate primary language translations of important special education documents including the IEP and the Notice of Proposed School District Action (N1). Submit copies of translated materials to the Department.By March 15, 2019, submit a report of the results of an internal review of 20 student records across all schools/levels, conducted following the staff training, to ensure consistency and continued compliance for translating all important special education documents. Include the number of student records reviewed, the number of records in compliance, and for any records not in compliance, determine the root cause of the non-compliance and the district's plan to remedy the non-compliance.\*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):** 12/14/201803/15/2019 |

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| **Criterion & Topic:** SE 51 Appropriate special education teacher licensure | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review indicated that the district employs one special education teacher who does not have current licensure or an approved waiver. |
| **Description of Corrective Action:** The district has been working with the 3 staff members who were not certified at the time of the finding. Currently, one of the staff members is appropriately certified and two are pending review with the state. (The documents sent to the staff have been included.)LPS has a tracking plan to ensure that all staff hold the appropriate certifications or waivers:All hiring forms are submitted to HR prior to a position being offered. HR will verify certifications and/or the need for waivers prior to positions being offered.After October 1 each year HR to ensure that all staff have the appropriate certifications will run a report. This step will be completed by October 30.If a staff member does not hold an appropriate certification they will be notified in writing by the HR department of the corrections that need to be made and the timeline for which the work needs to be completed.Any staff member that does not hold the appropriate certification by the end of the year after receiving the support from HR will be terminated in accordance with union and school department policies. |
| **Title/Role(s) of Responsible Persons:**HR Director | **Expected Date of Completion:**09/04/2019 |
| **Evidence of Completion of the Corrective Action:**The staff member is no longer working for the district. |
| **Description of Internal Monitoring Procedures:** The HR department will complete a yearly review of records to ensure compliance as listed above. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 51 Appropriate special education teacher licensure | **Corrective Action Plan Status:** Approved **Status Date:** 10/17/2018 **Correction Status:** Corrected |
| **Basis for Decision:** The one special education teacher identified at the time of the CPR as not having current licensure or an approved waiver is no longer employed by the district. The district developed and implemented a monitoring plan to ensure that all special education teachers are appropriately licensed. No progress reports are required for this criterion. |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**  |
| **Progress Report Due Date(s):**  |

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| **Criterion & Topic:** SE 52 Appropriate certifications/licenses or other credentials -- related service providers | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review indicated that the district employs three social workers who do not have current licensure or approved waivers. |
| **Description of Corrective Action:** The district has been working with the 3 staff members who were not certified at the time of the finding. Currently, one of the staff members is appropriately certified and two are pending review with the state. (The documents sent to the staff have been included.)LPS has a tracking plan to ensure that all staff hold the appropriate certifications or waivers:All hiring forms are submitted to HR prior to a position being offered. HR will verify certifications and/or the need for waivers prior to positions being offered.After October 1 each year HR to ensure that all staff have the appropriate certifications will run a report. This step will be completed by October 30.If a staff member does not hold an appropriate certification they will be notified in writing by the HR department of the corrections that need to be made and the timeline for which the work needs to be completed.Any staff member that does not hold the appropriate certification by the end of the year after receiving the support from HR will be terminated in accordance with union and school department policies. |
| **Title/Role(s) of Responsible Persons:**HR Director | **Expected Date of Completion:**09/04/2019 |
| **Evidence of Completion of the Corrective Action:**One of the staff is appropriately certified. Two of the staff members are pending review. (Please see uploaded documents.) |
| **Description of Internal Monitoring Procedures:** The HR department will complete a yearly review of records to ensure compliance as listed above. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 52 Appropriate certifications/licenses or other credentials -- related service providers | **Corrective Action Plan Status:** Approved **Status Date:** 10/17/2018 **Correction Status:** Corrected |
| **Basis for Decision:** A Department review of licensure on October 17, 2018, confirmed three social workers identified as not appropriately licensed at the time of the CPR are now appropriately licensed. The district developed and implemented a monitoring plan to ensure that all related service providers are appropriately licensed. No progress reports are required for this criterion. |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**  |
| **Progress Report Due Date(s):**  |

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| **Criterion & Topic:** CR 10B Bullying Intervention and Prevention | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the Bullying Prevention and Intervention professional development provided annually to all school staff does not include the following: 1) developmentally appropriate strategies to prevent bullying incidents; 2) developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents; and 3) information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim and witnesses to the bullying. |
| **Description of Corrective Action:** Department of Elementary and Secondary Education Findings: Document review and staff interviews indicated that Bullying, Prevention and Intervention professional development provided annually to all school staff does not in include the following: 1) developmentally appropriate strategies to prevent bullying incidents; 2) developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents and 3) information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim and witnesses to bullying.Corrective Action Plan:The Assistant Superintendent of Student Support Services will convene an committee, which will include representatives from elementary, middle, high schools, Special Education and English Learner Education to address findings 1, 2 and 3. The committee will use the Massachusetts DESE Checklist- Required Content of Bullying Prevention and Intervention Plans Under G.L. c. 71 &370 when reviewing the findings and developing plans.2.) The Committee will identify evidence based resources of developmentally appropriate strategies to prevent bullying incidents and developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents3.) The Committee identified resources that will then be provided to school administrators for staff presentation and dissemination. 4.) Information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim and witnesses to bullying will be reviewed by the committee. This complex interaction also occurs differently by developmental level. Thus, it will be important that the committee identifies ways in which this interaction occurs at elementary grades versus middle school grades. The resource information used to address this finding will concurrently be provided to school administrators for staff presentation and dissemination. |
| **Title/Role(s) of Responsible Persons:**Jeannine Durkin, Acting Superintendent, Frederick McOsker, Acting Assistant Superintendent | **Expected Date of Completion:**09/04/2019 |
| **Evidence of Completion of the Corrective Action:**September 2018: Lowell Public Schools Bullying Prevention and Intervention Plan has been reviewed and updated by the Office of Student Support Serviceswith input from school based administratorsOctober 2018: Form committee issue materials for reviewNovember 2018 – January 2019: Committee meets twiceFebruary 2019- March 2019: Committee works continues to refine the response to findings 1, 2 and 3 April 2019 - June 2019 roll out changes to school and staffJune-2019- August 2019: Review 2019-2020 Review annual professional development training to assure CPR findings are addressed |
| **Description of Internal Monitoring Procedures:** The district task force will meet on a quarterly basis to review progress of each Corrective Action Activity. Team members will be responsible for reviewing and reporting out to the Superintendent’s team evidence of implementation and progress using the required Washington checklist form. To ensure compliance, the review process will be further documented through meeting notes and other pertinent data as well as identified next steps. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved **Status Date:** 10/17/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 14, 2018, provide an update on progress towards ensuring that the Bullying Prevention and Intervention professional development complies with regulations. Include committee meeting notes and other supporting evidence, as appropriate.By March 15, 2019, submit the Bullying Prevention and Intervention professional development training materials to be provided to all staff at all schools.By April 26, 2019, submit evidence of the professional development training on the district's Bullying Prevention and Intervention Plan for all staff that includes developmentally appropriate strategies to prevent bullying incidents; developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents; information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim and witnesses to the bullying; research findings on bullying, including information about specific categories of students who have been shown to be particularly at risk for bullying in the school environment; information on the incidence and nature of cyber-bullying; and internet safety issues as they relate to cyber-bullying. Include an agenda, training materials, training dates, signed attendance sheets indicating the title/role/school of staff, and the name and title of the presenter(s). |
| **Progress Report Due Date(s):** 12/14/201803/15/201904/26/2019 |

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| **Criterion & Topic:** CR 24 Curriculum review | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the district does not ensure that individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation; and that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such materials. |
| **Description of Corrective Action:** Department of Elementary and Secondary Education Findings:Document review and staff interviews indicated that the district does not ensure that individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation; and that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such materials.Corrective Action Plan:1) District level team consisting of Director of Accountability, Coordinator of English Language Learners, Lowell High School Department Chair for English Language and District Support Specialist for Student Support participated in a sustainable training and coaching program offered through the Department of Elementary and Secondary Education to strengthen the knowledge and skills to support educators in inclusive environments and delivering culturally responsive instruction. 2) Cultural Proficiency Professional Development for Leaders throughout the District will be held in October to enhance the awareness of critical components of proficient schools and educational practices. Embedded in this learning will be the DESE Tool Kit Slides for Universal Standards for Curriculum Review. The district has retained Patti DeRosa, a DESE Cultural Proficiency expert to conduct these professional learning training sessions with district leaders. In addition, Ms. DeRosa will provide leaders with materials to conduct a two hour school-based professional development to deepen understanding and capacity to support students. 3) Cultural Proficiency Professional Development for the entire District’s staff will be held on Tuesday, November 6th. This professional learning will be facilitated by the school leaders using a ‘train the trainer’ format. Embedded in this learning will be the DESE Tool Kit slides for Universal Standards for Curriculum Review. This will ensure that all individual teachers in the district review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. Appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such materials. 4) Building leaders will provide all staff with the Washington models for the evaluation of bias content in instructional materials. There will be a review of the tool and how to implement the check list for any new materials used outside of the District supplied curriculum. 5) Cultural Proficiency Professional Development for the newly hired staff will be held through the Lowell Teacher Academy in the summer before the start of the school year. This professional learning will be facilitated by the school leaders using a ?train the trainer? format. Embedded in this learning will be the DESE Tool Kit slides for Universal Standards for Curriculum Review. This will ensure that all individual teachers in the district review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. Appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such materials. 6) Development of a taskforce with the District’s level team, building level leaders, curriculum coordinators and teachers to review the use of the rubric to evaluate materials and gage staff understanding to be sure it is implemented. Title/Role of Person(s) Responsible for Implementation: Dr. Phala Chea, Coordinator of English Language Education Program, Nan Murphy, Director of Accountability, Fred McOsker, Assistant Superintendent of Student Support Specialist, Stephen Gervais, Lowell High School Department Chair for English Language, Rosa Segarra- Morales, District Support Specialist for Student Support, Building Principals and Assistant Principals, Teachers, Pina Maggio, Lowell Teacher Academy Coordinator, Robin Desmond, Assistant Superintendent of Curriculum, Instruction and Assessment and Jeannine Durkin, Acting Superintendent |
| **Title/Role(s) of Responsible Persons:**Robin Desmond, Asst Supt, of Curriculum, Jeannine Durkin, Acting Superintendent | **Expected Date of Completion:**09/04/2019 |
| **Evidence of Completion of the Corrective Action:**Expected Date of Completion for Each Corrective Action Plan:1. August 2018-May 20192. October 20183. November 20184. November 20185. August 20196. Continued ongoing support over time |
| **Description of Internal Monitoring Procedures:** The district taskforce will meet on a quarterly basis to review progress of each Corrective Action Activity. Team members will be responsible for reviewing and reporting out to the Superintendent’s team evidence of implementation and progress using the required Washington checklist form. To ensure compliance, the review process will be further documented through meeting notes and other pertinent data as well as identified next steps |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Approved **Status Date:** 10/17/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 14, 2018, submit evidence of training provided to all teachers to ensure they review all 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. Include an agenda, training materials, training dates, signed attendance sheets indicating the title/role/school of staff, and the name and title of the presenter(s). |
| **Progress Report Due Date(s):** 12/14/2018 |

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| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the district has not evaluated 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:** Department of Elementary and Secondary Education Findings: Document review and staff interviews indicated that the district has not evaluated all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, sexual orientation, disability or housing status have equal access to all programs, including athletics and other extracurricular activitiesCorrective Action Plan:The Assistant Superintendent of Student Support Services will convene a committee, which will include representatives from elementary, middle, high schools, Special Education , Homeless Liaison, English Learner Education, Coordinator of Special Programs, LHS Coordinator of Student Activities, Coordinator of Family Resource Center and Counsel of Student Support Services2.) The Committee will identify current district initiatives/ surveys that can inform the evaluation process such as Curriculum review, Cultural Competency trainings, Extracurricular offerings and Civil Rights Data Collection and the MA Consortium for Innovative Educational Assessment (MCIEA) survey that was conducted by the Lowell Public Schools in June of 2018.3.) Committee will identify for interview/survey appropriate staff, students, parents and community partners 4.) Committee Equity Walk to explore data that shows educational outcomes, exposes gaps between groups of students and analyze distribution of students in programs, including athletics, extracurricular activities, LEP status, IEP/504 plan status, housing status, class size, suspension/ bullying/ restraint reports.5. Develop an Action Plan and identify survey instrument6. Final Product to include data collection tools results, data analysis, identified areas of need, root causes, Action Plan for continuous |
| **Title/Role(s) of Responsible Persons:**Fred McOsker Acting Asst. Supt, Jeannine Durkin Acting Supt., Robin Desmond Asst. Superintendent | **Expected Date of Completion:**09/04/2019 |
| **Evidence of Completion of the Corrective Action:**October 2018: Convene Institutional Review Committee, Identify current district initiatives and develop a procedure to collect existing data.November 2018 -Submission / Presentation of existing data. Identify Community Partners for interviews / surveysJanuary 2019- Committee Data WalkFebruary 2019 - Identify a survey instrument using Technical Assistance guide from Massachusetts Department of Elementary and Secondary Education.March: Determine Survey tool Select a date student / staff surveyMay - June 2019: Final Product to include data collection tools, results, data analysis, identified areas of need, root causes, Action plan for continuous improvement |
| **Description of Internal Monitoring Procedures:** The district taskforce will meet on a quarterly basis to review progress of each Corrective Action Activity. Team members will be responsible for reviewing and reporting out to the Superintendent’s team evidence of implementation and progress using the required Washington checklist form. To ensure compliance, the review process will be further documented through meeting notes and other pertinent data as well as identified next steps. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 10/17/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 14, 2018, submit the district's plan for implementing an institutional self-evaluation to ensure the district provides equal access to all programming across all grades, K-12. Include a detailed timeline and key staff responsible for the implementation. By March 15, 2019, submit the evaluation tools and results of preliminary activities (review of existing data, identification of community partners, data walk).By May 31, 2019, submit a written narrative summary on the outcomes of the institutional self-evaluation and changes the district is implementing to address any barriers to equal access. |
| **Progress Report Due Date(s):** 12/14/201803/15/201905/31/2019 |

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| **Criterion & Topic:** ELE 5 Program Placement and Structure | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of the Castañeda Three-Pronged Test completed by the district indicated that all English learners (ELs) at proficiency levels 1-2 should receive two periods of ESL instruction and ELs at proficiency levels 3-4 need at least one period of ESL instruction to make adequate progress in English language acquisition. However, interviews and a review of the district documentation indicated that there are students in the district who do not receive ESL instruction regardless of their proficiency levels. The Department determines that ELE services in the district are not always consistent with students' linguistic needs and the district is not consistently implementing its ELE program as described in the Castañeda Three-Pronged Test. |
| **Description of Corrective Action:** Corrective Action Plan:1. The Coordinator of English Language Education (ELE) Program will conduct a meeting with all Lowell Public Schools. Administrators and ESL Lead Teachers to share new updates and procedures to ensure that English Learners (ELs) receive the recommended amount of ESL instruction provided by ESL licensed teachers as stated in the MA DESE Guidance on Identification, Assessment, Placement, and Reclassification of English Learners (October 2017). Monitoring of implementation will take place quarterly by the Coordinator of ELE Program, Foreign Languages and EL Department Chair and ESL Lead Teachers and checked by the Assistant Superintendent of Curriculum, Instruction and Assessment on her school visits, and by the Superintendent during the supervision evaluation of school administrators.2. The district will ensure that services for students at language proficiency levels 1.0-4.2 are provided appropriately and that their academic progress is monitored regularly. The district takes the responsibility of having ESL licensed teachers deliver direct ESL instruction to ELs seriously and is committed to improving and expanding the hiring process. With that said, as the district is experiencing challenges, the district has designed internal support for securing highly qualified ESL teachers and ESL tutors and has taken definite steps to recruiting diverse teachers. Furthermore, teaching and tutoring postings will list "SEI endorsement and ESL license preferred."3. The district will re-administer the Castañeda Three-Pronged Test to evaluate and monitor the ELE Program.4. The Coordinator of ELE Program and Curriculum Coordinators of all disciplines, Coordinator of Data Analysis, Director of Accountability and the Assistant Superintendent of Curriculum, Instruction and Assessment will continue to meet on a regular basis to effectively use assessment data to plan, implement, and monitor educational programs for ELs at different language proficiency levels. The Superintendent will use her monthly All Administrators meetings with Principals and Central Administrators to check in on the progress of the ESL instruction and student learning. 5. The Coordinator of ELE Program, Foreign Languages and EL Department Chair and ESL Lead Teachers will meet monthly to discuss, monitor and improve the ELE Program. 6. The district will continue to provide ESL related professional developments to core ESL teachers and core academic teachers to strengthen teaching and learning of ELs. |
| **Title/Role(s) of Responsible Persons:**District’s CPR Team, Coords, Dir of HR & Account, Sch Admins, EL Dept Chair, & ESL Leads | **Expected Date of Completion:**09/04/2019 |
| **Evidence of Completion of the Corrective Action:**Evidence of Completion of the Corrective Action:1. Meeting notes and agendas of meetings with all Lowell Public Schools Administrators and ESL Lead Teachers to monitor and ensure that ELs receive ESL instruction by ESL licensed teachers determined by their language proficiency level. 2. Monitoring of student progress by completing/using the EL Student Profile form. Teaching and tutoring postings list "SEI endorsement and ESL license preferred."3. Re-administration of the Castañeda Three-Pronged Test to re-evaluate and monitor the ELE Program. 4. Meeting notes and agendas of meetings with the Coordinator of ELE Program and Curriculum Coordinators of all disciplines, Coordinator of Data Analysis, Director of Accountability and the Assistant Superintendent of Curriculum, Instruction and Assessment to effectively use assessment data to plan, implement, and monitor educational programs for ELs at different language proficiency levels. 5. Meeting notes and agendas of meetings to discuss, monitor, and support the ELE Program. 6. List(s) of ESL related professional developments to core ESL teachers and core academic teachers to strengthen teaching and learning of ELs in order to close the proficiency gap and to improve and support the academic achievement of ELs. |
| **Description of Internal Monitoring Procedures:** Description of Internal Monitoring Procedures:The district's CPR team (Acting Superintendent, Assistant Superintendent of Curriculum, Instruction and Assessment, Assistant Superintendent of Student Support Services, Coordinator of ELE Program, Director of Special Ed., LHS Headmaster, and LHS Business and Operations Chair) will meet on a quarterly basis to review progress of each Corrective Action Activity. Team members will be responsible for each of their components and will review and report out to the team citing evidence of implementation and progress using the required monitoring form. Furthermore, the team will maintain meeting notes and other pertinent data as part of the monitoring process. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/17/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:** The Department appreciates the district's commitment to hiring teachers and tutors to improve ELE services provided to ELs at all proficiency levels. However, the district should note that ESL instruction can only be delivered by ESL licensed teachers and it is concerning that job postings for these positions will list ESL license only as a preference rather than a requirement. |
| **Department Order of Corrective Action:**Please see below. |
| **Required Elements of Progress Report(s):** By December 14, 2018, submit the following: 1) meeting notes and agendas of meetings with all Lowell Public Schools Administrators and ESL Lead Teachers to monitor and ensure that ELs receive ESL instruction by ESL licensed teachers determined by their language proficiency level; 2) teaching and tutoring postings listing ESL license as a requirement if newly hired teachers and tutors will be assigned to teach ESL; 3) the Castañeda Three-Pronged Test if the district determines to revise the one previously submitted to the Department as a part of the documentation for the CPR self-assessment; and 4) a timeline that shows all the steps that the district will follow to provide ESL instruction to ELs based on their linguistic needs and remedy the noncompliance indicated in the Department's report. |
| **Progress Report Due Date(s):** 12/14/2018 |

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

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| **Criterion & Topic:** ELE 6 Program Exit and Readiness | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews and a review of the reclassification guidelines document submitted by the district indicated that ELs with disabilities are reclassified on a case-by-case basis and they may be exempt from meeting exit criteria even if they are not English proficient based on ACCESS for ELLs results. |
| **Description of Corrective Action:** The Coordinator of ELE Program will conduct her meeting(s) with all Lowell Public Schools administrators, Director of Special Education Department, ESL Lead Teachers to share the reclassification guidelines of ELs with disabilities to ensure that the district follows the reclassification guidelines as stated in the MA DESE Guidance on Identification, Assessment, Placement, and Reclassification of English Learners (October 2017). |
| **Title/Role(s) of Responsible Persons:**District’s CPR Team, Sch Admins, EL Dept Chair & ESL Leads | **Expected Date of Completion:**09/04/2019 |
| **Evidence of Completion of the Corrective Action:**Meeting notes and agenda of meeting(s) informing administrators and ESL Lead Teachers regarding the reclassification guidelines of ELs with disabilities. Monitoring the reclassification process with ESL Lead Teachers. |
| **Description of Internal Monitoring Procedures:** The district's CPR team (Acting Superintendent, Assistant Superintendent of Curriculum, Instruction and Assessment, Assistant Superintendent of Student Support Services, Coordinator of ELE Program, Director of Special Ed., LHS Headmaster, and LHS Business and Operations Chair) will meet on a quarterly basis to review progress of each Corrective Action Activity. Team members will be responsible for each of their components and will review and report out to the team citing evidence of implementation and progress using the required monitoring form. Furthermore, the team will maintain meeting notes and other pertinent data as part of the monitoring process. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved **Status Date:** 10/17/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 14, 2018, upload meeting notes and agendas of meetings informing administrators and ESL lead teachers of the reclassification guidelines of ELs with disabilities. By June 30, 2019, upload FEL roster for ELs with disabilities. |
| **Progress Report Due Date(s):** 12/14/201806/30/2019 |

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

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| **Criterion & Topic:** ELE 14 Licensure Requirements | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews and a review of data from the Educator Licensure and Renewal (ELAR) system indicated that most teachers/tutors who provide ESL instruction hold an ESL license or a current waiver issued by the Department, but some do not. Similarly, not all ESL teachers who provide content instruction to students in the Students with Limited or Interrupted Formal Education (SLIFE) classes at the middle school level hold an appropriate license for the subject matter they teach or a current waiver issued by the Department. |
| **Description of Corrective Action:** 1. ESL teachers teaching Students with Limited or Interrupted Formal Education (SLIFE) classes at the middle school level will be granted a waiver to teach other core content outside of their ESL license.2. ESL teachers teaching SLIFE classes at the middle school level will be encouraged to obtain an additional core content license.3. Core Academic teachers will be encouraged to obtain an ESL license.4. Students with Limited or Interrupted Formal Education will be integrated into other core academic classes instructed by SEI endorsed core academic teachers as soon as they are ready.5. Teaching and tutoring postings will list "SEI endorsement or ESL licensed preferred."6. The district's Lowell Teacher Academy will help provide additional core content courses/workshops to advance the core content knowledge of teachers. |
| **Title/Role(s) of Responsible Persons:**District's CPR Team, Dir of HR, LTA Facil, Mid Sch Admins, & Mid ESL Leads | **Expected Date of Completion:**09/04/2019 |
| **Evidence of Completion of the Corrective Action:**1. Data on licenses and waivers of teachers, and MTEL support.2. Core content courses/workshops list(s) to advance the core content knowledge of teachers. 3. Data on licenses and waivers of teachers, and MTEL support.4. Placement/integration of SLIFE students in core academic classrooms.5. Teaching and tutoring postings list "SEI endorsement or ESL licensed preferred."6. Core content courses/workshops list(s) to advance the core content knowledge of teachers. |
| **Description of Internal Monitoring Procedures:** The district's CPR team (Acting Superintendent, Assistant Superintendent of Curriculum, Instruction and Assessment, Assistant Superintendent of Student Support Services, Coordinator of ELE Program, Director of Special Ed., LHS Headmaster, and LHS Business and Operations Chair) will meet on a quarterly basis to review progress of each Corrective Action Activity. Team members will be responsible for each of their components and will review and report out to the team citing evidence of implementation and progress using the required monitoring form. Furthermore, the team will maintain meeting notes and other pertinent data as part of the monitoring process. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Approved **Status Date:** 10/17/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 14, 2018, submit the following: 1)documentation of district plans to support ESL teachers to obtain content licenses; 2) procedures for integrating SLIFE into other core academic classes instructed by SEI endorsed core academic teachers; and 3) waiver information for teachers who are not licensed in the content area they are teaching in SLIFE classes.By June 30, 2019, upload licensure information of the teachers assigned to teach core content classes to SLIFE students. If these teachers have not earned the content area license for the content they are teaching by the due date of this progress report, please upload what the district's plan is to ensure that all teachers teaching ELs are licensed in the content area they are teaching. |
| **Progress Report Due Date(s):** 12/14/201806/30/2019 |