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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: Plymouth

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 08/21/2018.

**Mandatory One-Year Compliance Date:** **08/21/2019**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 39 | Procedures used to provide services to eligible students enrolled in private schools at private expense | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 10C | Student Discipline | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |
| ELE 6 | Program Exit and Readiness | Partially Implemented |
| ELE 14 | Licensure Requirements | Partially Implemented |

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| **Criterion & Topic:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that, at least one year prior to the student reaching age 18, the district informs the student and the parent/guardian of the rights that will transfer from the parent/guardian to the student upon reaching age 18. However, record review indicated that the district does not consistently implement procedures to obtain consent from the student with shared or sole decision-making authority to continue the student's special education program upon reaching age 18. | | |
| **Description of Corrective Action:**  Plymouth Public Schools has the capacity to provide staff with the training to remedy the issue of SE-Criterion #7. The following is a description of the action steps Plymouth will take during the 18-19 school year in order to ensure compliance.  September 13, 2018-Special Education Department Head Training  September 19, 2018-All Special Education staff will participate in a half day training to review the standards for SE7 as well as determine local steps in order to ensure that compliance  October 11, 2018 Special Education Department Heads will meet with the director to review any compliance issues or challenges and determine next or additional steps if needed | | |
| **Title/Role(s) of Responsible Persons:**  Stacey A. Rogers, Director of Special Education | | **Expected Date of Completion:**  06/15/2019 |
| **Evidence of Completion of the Corrective Action:**  Attendance Sheets for meetings and training's  Copies of handouts for training  Director will conduct a record review December 2018 and in June 2019 | | |
| **Description of Internal Monitoring Procedures:**  District will provide attendance sheets with copies of agendas  District will provide copies of all handouts used for training  Director will provide a detailed ledger with record review of all students who have turned 18 during the 18-19 school year | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Approved  **Status Date:** 09/18/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of staff training including agendas, training materials and signed attendance sheets by November 1, 2018. Submit a description of the district's internal oversight and tracking system to ensure compliance and the name and role of the person designated for oversight by November 1, 2018.  Submit a report summarizing the results of an internal review of student records for students who have reached the age of majority in the current school year following training on the tracking process to determine that IEPs have been signed by the 18 year old student and dated. Identify the number of student records reviewed, the number of records in compliance, and for any records not in compliance, determine the root cause(s) of the non-compliance and the district's plan to remedy the non-compliance by February 7, 2019. | | |
| **Progress Report Due Date(s):**    11/01/2018  02/27/2019 | | |

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| **Criterion & Topic:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that the district does not consistently determine whether the student is eligible for special education and provide to the parent either a proposed IEP and proposed placement, or a written explanation of the finding of no eligibility, within 45 school working days of receiving consent to evaluate. | | |
| **Description of Corrective Action:**  Plymouth Public Schools has the capacity to provide staff with the training to remedy the issue of SE-Criterion #9. The following is a description of the action steps Plymouth will take during the 18-19 school year in order to ensure compliance.  September 13, 2018-Special Education Department Head Training  September 19, 2018-All Special Education staff will participate in a half day training to review the standards for SE9 as well as determine local steps in order to ensure that compliance  October 11, 2018 Special Education Department Heads will meet with the director to review any compliance issues or challenges and determine next or additional steps if needed | | |
| **Title/Role(s) of Responsible Persons:**  Stacey A. Rogers, Director of Special Education | | **Expected Date of Completion:**  06/15/2019 |
| **Evidence of Completion of the Corrective Action:**  Attendance Sheets for meetings and training's  Copies of handouts for training  Director will conduct a record review December 2018 and in June 2019 | | |
| **Description of Internal Monitoring Procedures:**  District will provide attendance sheets with copies of agendas  District will provide copies of all handouts used for training  Director will provide a detailed ledger of a student record review for students who have had an initial or three year evaluation in order to monitor district timelines | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | **Corrective Action Plan Status:** Approved  **Status Date:** 09/18/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training including agenda, training materials, and signed attendance sheets by November 1, 2018. Submit a description of the district's internal oversight and tracking system to ensure compliance and the name and role of the person designated for oversight by November 1, 2018.  Submit a report of the internal review of student records following training on the tracking process to determine that the Team has provided the parent either a proposed IEP and proposed placement, or a written explanation of the finding of no eligibility, within 45 school working days of receiving consent to evaluate.  Identify the number of student records reviewed, the number of records in compliance, and for any records not in compliance, determine the root cause(s) of the non-compliance and the district's plan to remedy the non-compliance. Submit the report by February 7, 2019. | | |
| **Progress Report Due Date(s):**  11/01/2018  02/27/2019 | | |

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| **Criterion & Topic:**  SE 39 Procedures used to provide services to eligible students enrolled in private schools at private expense | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that the district does not currently provide ongoing timely and meaningful consultation with private school representatives and representatives of parents of parentally-placed private school children with disabilities in accordance with the requirements of the Individuals with Disabilities Education Act (IDEA). In addition, the district provides services for students identified with a disability as determined by the student's IEP; however, the district does not create an individual services plan for each eligible private school student who receives special education or related services from the district using proportionate share funds. | | |
| **Description of Corrective Action:**  Plymouth Public Schools has the capacity to provide staff with the training to remedy the issue of SE-Criterion #39. The following is a description of the action steps Plymouth will take during the 18-19 school year in order to ensure compliance.  Complete proportionate share calculation form 9/4/2018  Proportionate Share Letter sent to all eligible families 7/17/2018  Proportionate Share email sent 9/4/2018  Special Education Consultation scheduled for 9/12/2018 | | |
| **Title/Role(s) of Responsible Persons:**  Stacey A. Rogers, Director of Special Education | | **Expected Date of Completion:**  09/15/2019 |
| **Evidence of Completion of the Corrective Action:**  Proportionate Share calculation form  Parent Letter  Parent Email  Parent Meeting  Sign in Sheet for Parent Consultation meeting | | |
| **Description of Internal Monitoring Procedures:**  Director of Special Education will monitor process to ensure compliance with SE 39 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 39 Procedures used to provide services to eligible students enrolled in private schools at private expense | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 09/18/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district has indicated a plan for parent consultation but has not provided information about consultations with the area private schools. | | |
| **Department Order of Corrective Action:**  Conduct consultation meetings with private schools located within the geographic area of the district and parents, and develop documentation to confirm consultation meetings and their content.  Develop ISPs for eligible students from any district attending private schools located within the geographic area of the district who have been identified with special education needs and who receive special education services funded by proportionate share funds.  Conduct review of documentation for applicable eligible students to determine that ISPs are created to document services under proportionate share. | | |
| **Required Elements of Progress Report(s):**  Submit evidence of consultation meetings with private schools located within the geographic area of the district and parents, including signed attendance sheets and consultation summary, by November 1, 2018.  Submit report of internal review of documentation for eligible students from any district attending local private schools who receive special education services through proportionate share to ensure that ISPs have been created for these students. Indicate the number of total student documents reviewed, the number in compliance, and next steps for applicable eligible students in local private schools lacking an ISP. Submit by February 7, 2019. | | |
| **Progress Report Due Date(s):**  11/01/2018  02/27/2019 | | |

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documentation indicated that the school has a Bullying Prevention and Intervention Plan (Plan) that is posted on the school's website and documented in the student handbook. However, the Plan has not been updated or amended to include extending protections to students who are bullied by a member of the school staff; furthermore, it does not make clear that a member of the school staff may be named the aggressor or perpetrator in a bullying report. | | |
| **Description of Corrective Action:**  We are updating our Bullying Prevention & Intervention Plan to update and amend to include extending protections to students who are bullied by a member of the school staff. It will be clear through this update that a school staff member may be named as the aggressor or perpetrator in a bullying report. This is included in our school district policy already so we will be making this language consistent by updating the document and posting on our website. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia C. Fry, Assistant Superintendent for Human Resources | | **Expected Date of Completion:**  01/15/2019 |
| **Evidence of Completion of the Corrective Action:**  An updated Bullying Prevention and Intervention Plan that includes the components listed above. | | |
| **Description of Internal Monitoring Procedures:**  Assistant Superintendent Patricia Fry will work with Assistant Superintendent Christopher Campbell who oversees this document and all policy to ensure that this correction is made in a timely fashion. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 09/18/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence that the Bullying Intervention & Prevention Plan published on the district website is accurately aligned with state regulations and consistent with Plans published in student/family handbooks, school committee policy statements, and training materials used with staff by November 1, 2018. | | |
| **Progress Report Due Date(s):**  11/01/2018  02/27/2019 | | |

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documentation indicated that, before imposing a suspension as a disciplinary consequence, the district does not first provide to the student and parent/guardian written notice that affords the student an opportunity for a hearing and the parent an opportunity to participate in such hearing.  Documentation also indicated that, upon imposing an in-school suspension, the district does not deliver to the student and parent/guardian written notice on the day the in-school suspension is to take effect, which includes the reason and length of the suspension and invites the parent to a meeting to discuss the student's behavior with the principal, if such meeting has not already occurred. Furthermore, the district does not have policies and procedures in place for emergency removal of a student from the school environment.  Finally, although documentation indicated that students who are suspended have the opportunity to make academic progress during the term of suspension, the district does not have in place a school-wide education service plan describing the education services made available to students who are suspended from school for more than ten consecutive days. | | |
| **Description of Corrective Action:**  The Assistant Superintendent for Human Resources has set up professional development sessions with all building vice-principals and principals. Our focus will be student discipline and overall compliance. We will be meeting to align documentation K-12 so it is consistent and follows the appropriate regulations. We will create consistent documentation as needed regarding written notices for both in and out of school suspensions. In addition, we will create policies and procedures for emergency removal of a student from the school environment. Finally, we will work with the office of student services to design a school-wide education service plan for what is made available to students who are suspended from school for more than 10 consecutive days. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia C. Fry, Assistant Superintendent for Human Resources | | **Expected Date of Completion:**  01/15/2019 |
| **Evidence of Completion of the Corrective Action:**  Appropriate documentation of all items listed above. | | |
| **Description of Internal Monitoring Procedures:**  Assistant Superintendent for Human Resources will facilitate professional development session to streamline all appropriate documentation and work with Dr. Halpin, Director of Student Support services to document our school-wide education service plan and share with all stakeholders. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 09/18/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit documents created to align with the discipline requirements and evidence that those policies, procedures, and documents have been shared with the school community. Submit evidence that central and school administrators and guidance personnel have been trained in the changes to the policies and procedures by November 1, 2018. | | |
| **Progress Report Due Date(s):**  11/01/2018  02/27/2019 | | |

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| **Criterion & Topic:**  CR 23 Comparability of facilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  An on-site visit to the Hedge Elementary School indicated that an instructional space provided for English learners is not comparable in size or location to spaces allocated to other student groups. Specifically, the room is located in the basement of the building with no other classrooms nearby and is not large enough to accommodate the number of students and services being provided. | | |
| **Description of Corrective Action:**  We have created a new space at Hedge Elementary School for our English learners on the 2nd floor of the school. It is an older building and the new space is in a location right next to other classrooms and is large enough to accommodate the number of students and services being provided. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia C. Fry, Assistant Superintendent for Human Resources | | **Expected Date of Completion:**  09/01/2018 |
| **Evidence of Completion of the Corrective Action:**  I have shared a photo of the space with DESE staff - I can upload this photo as needed and we would welcome DESE staff down for a visit to view the space. | | |
| **Description of Internal Monitoring Procedures:**  Patricia Fry and building principal worked with district maintenance staff to ensure that this space was complete and ready for school on August 29, 2018 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 23 Comparability of facilities | **Corrective Action Plan Status:** Approved  **Status Date:** 09/18/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  DESE will conduct an on-site review of the new instructional space by November 1, 2018. | | |
| **Progress Report Due Date(s):**  11/01/2018 | | |

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documentation and interviews indicated that the district does not formally conduct an annual institutional self-evaluation 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:**  We will be sending out a survey to all families in September 2018 which will serve as an annual institutional evaluation. We will also work with any families who do not have internet access as needed and by using our open houses as a venue to complete the survey. The survey is being taken directly from a recommended toolkit that has been shared by DESE staff through the CPR process. Our principals have also reviewed this survey and added additional questions where needed to get a fair assessment. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia C. Fry, Assistant Superintendent for Human Resources | | **Expected Date of Completion:**  12/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Survey administered, completed, and results reviewed and shared with key stakeholders. | | |
| **Description of Internal Monitoring Procedures:**  Patricia Fry will work with district technology staff to ensure that the survey itself is user friendly and accessible for all stakeholders. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 09/18/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district has described surveys which will be provided to families to assess questions of equal access. The district has not indicated that any internal surveys of administrators and staff have been or will be conducted. | | |
| **Department Order of Corrective Action:**  Submit samples of surveys to parents, students, staff, administrators to ascertain equal access to all district programs. | | |
| **Required Elements of Progress Report(s):**  Submit samples of surveys which will be used to survey all groups on questions of equal access by November 1, 2018.  Submit a report summarizing the analysis of survey results, including any planned changes as indicated by the results, by February 7, 2019. | | |
| **Progress Report Due Date(s):**  11/01/2018  02/27/2019 | | |

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| **Criterion & Topic:**  ELE 6 Program Exit and Readiness | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documentation indicated that some students were reclassified before they met the required minimum exit criteria. The district's current reclassification practices are not in compliance with  603 CMR 14.02 that requires districts to establish exit criteria in accordance with the Department's guidelines. | | |
| **Description of Corrective Action:**  The district's reclassification practices have been updated to include exit criteria that are in compliance with the Department of Secondary and Elementary Education's guidelines. | | |
| **Title/Role(s) of Responsible Persons:**  Sean Halpin, Director of Student Support Services; Maria daSilva, ELE DH; ESL Teachers | | **Expected Date of Completion:**  09/19/2018 |
| **Evidence of Completion of the Corrective Action:**  Memorandum to all ESL Teachers and School Principals (dated 09/17/18 - please see "Additional Documents") outlining new procedure and criteria along with Workshop/Training Session on 09/19/18 of all ESL Teachers. | | |
| **Description of Internal Monitoring Procedures:**  ESL teachers are required to document all exited ELs with new English Language Education Program Reclassification Form. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved  **Status Date:** 09/18/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Please use FEL Roster available in the Document Library to provide information for all the ELs in your district who have been reclassified in the school year SY2017-18. Submit this information by November 1, 2018. | | |
| **Progress Report Due Date(s):**  11/01/2018  02/27/2019  05/22/2019  06/28/2019 | | |

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| **Criterion & Topic:**  ELE 14 Licensure Requirements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Staff interviews and the relevant SEI endorsement data indicated that most core academic teachers assigned to provide sheltered English instruction to English learners hold the SEI Teacher Endorsement, but some do not. Similarly, most principals, assistant principals, and supervisors/directors assigned to supervise or evaluate core academic teachers who provide sheltered English instruction to English learners hold the SEI Teacher Endorsement or the SEI Administrator Endorsement, but some do not. | | |
| **Description of Corrective Action:**  Non-SEI endorsed teachers of ELs and non-SEI endorsed administrators of teachers of ELs will be informed of their status through multiple means (Building Principals, SIS filter alert). Plymouth will host two SEI Teacher Endorsement Courses during the 2018-19 school year along with one SEI Administrator Course. These will be communicated to all staff by the Assistant Superintendent. We will develop, through the office of Accountability & Measurement, an automated tracking and filter protocol in the Student Information System (SIS) to alert administrators and teachers of their SEI status along with communication by principals of the endorsement requirement to those teachers. | | |
| **Title/Role(s) of Responsible Persons:**  Sean Halpin, Dir Stud Supp Svcs; Chris Campbell, Asst. Super;  Karen Venett, Dir SIS.; Principals | | **Expected Date of Completion:**  06/30/2019 |
| **Evidence of Completion of the Corrective Action:**  SEI teacher and administrator lists provided by DESE were disseminated to all administrators in August 2018 to assist with proper student placement of ELs as well as identification of non-endorsed staff. We have also developed an SIS filter that identifies any teacher of an EL who does not have the endorsement; principals will apprise the teacher of the requirement to obtain the endorsement within one year. SEI Endorsement course participants are expected to apply for the endorsement through DESE. Data will be collected bi-annually to reflect all SEI educator endorsement updates. Student Information System will be updated with all endorsements. SEI course offerings are distributed to all staff through Assistant Superintendent; non-SEI endorsed teachers of ELs will communicate endorsement requirement. | | |
| **Description of Internal Monitoring Procedures:**  As of 9/10/2018 twenty-four of the thirty registrants of the Fall 2018 Plymouth SEI Teacher Endorsement Course are Plymouth Public Schools' educators. We will continue to disseminate, track and monitor the Spring 2019 Plymouth SEI Teacher Endorsement Course and the Spring 2019 Plymouth Administrator Endorsement Course. The student information system will be continuously updated to include all SEI endorsement information for administrators and staff to monitor. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 09/18/2018  **Correction Status:** Corrected | |
| **Basis for Decision:**  The district is hosting two SEI Teacher Endorsement courses to provide an opportunity to non-endorsed teachers earn their endorsements. There is also a plan in place to monitor SEI endorsement status of teachers assigned to English learners. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |