MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

Program Quality Assurance Services

COORDINATED PROGRAM REVIEW

CORRECTIVE ACTION PLAN

Charter School or District: LABBB Collaborative CPR Onsite Year: 2019-2020

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 12/11/2020.*

Mandatory One-Year Compliance Date: 12/11/2021

Summary of Required Corrective Action Plans in this Report

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| **Criterion** | **Criterion Title** | **CPR Rating** |
| CSE 51 | Appropriate special education teacher certification/licensure | Partially Implemented |
| CCR 14 | Counseling and counseling materials free from bias and stereotypes | Partially Implemented |
| CCR 24 | Curriculum review | Partially Implemented |

COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

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| **Criterion & Topic:**CSE 51 Appropriate special education teacher certification/licensure | **CPR Rating:**Partially Implemented |
| **Department CPR Findings:**A review of documentation and interviews indicated that not all special education teachers are appropriately licensed and have not been granted a waiver from the Department of Elementary and Secondary Education. |
| **Description of Corrective Action:**LABBB will post for the positions of the 3 teachers requiring a waiver and apply for those waivers in 2021 SY. Two of these staff who do not hold an appropriate license, do hold DESE licenses to teach in other areas. Due to the fact that they hold an alternate license, neither staff were eligible for either an emergency license (during COVID) or a preliminary license which are opportunities afforded to other completely unlicensed people while they complete their licensure program. In addition, all 3 staff are actively progressing through their licensure programs at a pace in accordance with the guidelines set forth by DESE.According to the current regulations, DESE requires us to post their positions each year and hire a different person if a licensed, qualified candidate applies. Having to post the positions of these staff annually and potentially hire a new person who holds the appropriate license poses a hardship for both the Collaborative and for the students and families in our classrooms. LABBB has multi-grade classrooms where students often stay for 3 or 4 years at a time. Changes in staff disrupt their learning and the consistency required for them to make effective progress, therefore we are concerned that it is not in the best interest of the students in these classrooms to disrupt the educational flow by introducing a new teacher. In our current cases, all 3 teachers have experience with the population with which they are working. They were approved for previous waivers and have formed great working relationships with their students and families, created productive educational environments, and are performing well in their current roles according to the teacher evaluation rubric. |
| **Title/Role(s) of Responsible Persons:**Program Directors and HR Coordinator | **Expected Date of Completion:** 11/01/2021 |
| **Evidence of Completion of the Corrective Action:**Submission of a staff roster where all staff required to have a DESE license will possess a valid license or an approved waiver. |
| **Description of Internal Monitoring Procedures:**Each September, the HR coordinator will review the staff roster to ensure all staff required to hold a DESE license have the appropriate valid license, or a waiver request has been made for any staff who require one. The HR coordinator will send a letter out to any staff whose license will expire that school year to remind them they need to renew.The HR Coordinator will contact the appropriate program director regarding any staff who are not in compliance. During the hiring process, the program directors will ensure that hired candidates have the appropriate license or apply for a waiver if needed. |

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| **CORRECTIVE ACTION PLAN APPROVAL SECTION** |
| **Criterion:**CSE 51 Appropriate special education teacher certification/licensure | **Corrective Action Plan Status:** Approved**Status Date:** 01/26/2021**Correction Status:** Not Corrected |
| **Basis for Decision:** |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**By April 1, 2021, submit the special education teacher roster template as evidence that all staff have a current license or an approved waiver from the Department of Elementary and Secondary Education. |
| **Progress Report Due Date(s):**04/01/202106/30/2021 |

COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

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| **Criterion & Topic:**CCR 14 Counseling and counseling materials free from bias and stereotypes | **CPR Rating:**Partially Implemented |
| **Department CPR Findings:**A review of documentation and interviews indicated that although the collaborative has a written procedure in place for counseling material review, not all counseling staff have received training on the procedure, therefore counseling materials are not consistently reviewed to ensure they are free from bias and stereotypes. |
| **Description of Corrective Action:**LABBB adopted a practice of reviewing all counseling and curriculum materials and assessments by using a set of forms that help staff think about, assess, and address biases, both their own and those found in materials used.To achieve full implementation of this practice, LABBB will:1. Provide professional development on identifying implicit biases to members of the curriculum team, the diversity, equity and inclusion team (DEI team), and the administrative team by the end of March 2021.
2. Training will be provided to the teaching and counseling staff on how to identify biases and complete the counseling and curriculum materials and assessment review forms by the end of June 2021.
3. By the end of October 2021, teachers and counseling staff will implement the new process of identifying biases and completing the related forms. Teachers and counselors will, as appropriate, facilitate discussion and/or provide supplementary materials to provide balance and context for any stereotypes depicted.
4. As of November 2021, Step 3 will be an ongoing process each month as new curriculum materials, counseling materials, and assessment tools are introduced to students and classrooms.
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| **Title/Role(s) of Responsible Persons:**Program Directors and Program Coordinators | **Expected Date of Completion:** 12/21/2021 |
| **Evidence of Completion of the Corrective Action:**LABBB will provide dates of professional development and trainings provided to staff along with signatures of those who attended the professional development or training. LABBB will also provide samples of the teacher and counselor completed forms. |
| **Description of Internal Monitoring Procedures:**Coordinators and Department Heads will review form completion by all teachers and counseling staff on a semi-annual basis and include this topic as an annual evaluation topic under "Teaches all students". |

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| **CORRECTIVE ACTION PLAN APPROVAL SECTION** |
| **Criterion:**CCR 14 Counseling and counseling materials free from bias and stereotypes | **Corrective Action Plan Status:** Approved**Status Date:** 01/26/2021**Correction Status:** Not Corrected |
| **Basis for Decision:** |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**By April 1, 2021, submit evidence of administrative team training on the procedures for reviewing counseling materials to ensure they are free from bias and stereotypes.Evidence of training must include: 1) the names and job title of the person conducting the training; 2) the dates and times the training was held; 3) list of all staff attending the training with their position title; 4) training materials; and 5) for any staff who did not receive the training, the reason why and when their training is scheduled.By June 30, 2021, submit evidence of training for counseling staff on the procedures for reviewing counseling materials to ensure they are free from bias and stereotypes.Evidence of training must include: 1) the names and job title of the person conducting the training; 2) the dates and times the training was held; 3) list of all staff attending the training with their position title; 4) training materials; and 5) for any staff who did not receive the training, the reason why and when their training is scheduled. |
| **Progress Report Due Date(s):**04/01/202106/30/202109/30/2021 |

COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

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| **Criterion & Topic:**CCR 24 Curriculum review | **CPR Rating:**Partially Implemented |
| **Department CPR Findings:**A review of documentation and interviews indicated that although the collaborative has a written procedure in place for a review of curricula, the collaborative did not ensure that individual teachers regularly review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on basis of race, color, sex, gender identity, religion, national origin, and sexual orientation. |
| **Description of Corrective Action:**LABBB adopted a practice of reviewing all counseling and curriculum materials and assessments by using a set of forms that help staff think about, assess, and address biases, both their own and those found in materials used.To achieve full implementation of this practice, LABBB will:1. Provide professional development on identifying implicit biases to members of the curriculum team, the diversity, equity and inclusion team (DEI team), and the administrative team by the end of March 2021.
2. Training will be provided to the teaching and counseling staff on how to identify biases and complete the counseling and curriculum materials and assessment review forms by the end of June 2021.
3. By the end of October 2021, teachers and counseling staff will implement the new process of identifying biases and completing the related forms. Teachers and counselors will, as appropriate, facilitate discussion and/or provide supplementary materials to provide balance and context for any stereotypes depicted.
4. As of November 2021, Step 3 will be an ongoing process each month as new curriculum materials, counseling materials, and assessment tools are introduced to students and classrooms.
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| **Title/Role(s) of Responsible Persons:**Program Directors and Program Coordinators | **Expected Date of Completion:** 12/21/2021 |
| **Evidence of Completion of the Corrective Action:**LABBB will provide dates of professional development and trainings provided to staff along with signatures of those who attended the professional development or training. LABBB will also provide samples of the teacher and counselor completed forms. |
| **Description of Internal Monitoring Procedures:**Coordinators and Department Heads will review form completion by all teachers and counseling staff on a semi-annual basis and include this topic as an annual evaluation topic under "Teaches all students". |

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| **CORRECTIVE ACTION PLAN APPROVAL SECTION** |
| **Criterion:**CCR 24 Curriculum review | **Corrective Action Plan Status:** Approved**Status Date:** 01/26/2021**Correction Status:** Not Corrected |
| **Basis for Decision:** |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**By April 1, 2021, submit evidence of administrative staff training on the review of educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on basis of race, color, sex, gender identity, religion, national origin, and sexual orientation. Evidence of training must include: 1) the names and job title of the person conducting the training; 2) the dates and times the training was held; 3) list of all staff attending the training with their position title; 4) training materials; and 5) for any staff who did not receive the training, the reason why and when their training is scheduled.By June 30, 2021, provide evidence of training provided to all teachers, on the review of educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on basis of race, color, sex, gender identity, religion, national origin, and sexual orientation. Evidence of training must include: 1) the names and job title of the person conducting the training; 2) the dates and times the training was held; 3) list of all staff attending the training with their position title; 4) training materials; and 5) for any staff who did not receive the training, the reason why and when their training is scheduled. |
| **Progress Report Due Date(s):**04/01/202106/30/202109/30/2021 |