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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: Agawam

CPR Onsite Year: 2013-2014

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 08/23/2014.

**Mandatory One-Year Compliance Date:** **08/23/2015**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 3A | Special requirements for students on the autism spectrum | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 7B | Structured learning time | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | 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 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |

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

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| **Criterion & Topic:**  SE 3A Special requirements for students on the autism spectrum | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Interviews and documentation of procedures indicated that the district is aware of requirements for students on the autism spectrum; however the IEP Teams did not consistently address all these issues in the student IEPs, Team meeting summary notes, Parent Notification Letter (N1), or Behavior Plans:  1) the verbal and nonverbal communication needs of the student;  2) the need to develop social interaction skills and proficiencies;  3) the needs resulting from the student's unusual responses to sensory experiences;  4) the needs resulting from resistance to environmental change or change in daily  routines;  5) the needs resulting from engagement in repetitive activities and stereotyped  movements;  6) the need for any positive behavioral interventions, strategies, and supports to  address any behavioral difficulties resulting from autism spectrum disorder;  7) and other needs resulting from the student's disability that impact progress in the general curriculum, including social and emotional development. | | |
| **Description of Corrective Action:**  On 10/22/2013, the Director of Special Services sent a memo to the Educational Team Facilitators, the Supervisor of Special Education, and the Director of Early Childhood, instructing them to utilize a worksheet to ensure that the seven areas of consideration for students on the autism spectrum are addressed during the IEP process. To further ensure documentation of these discussions, the Team Facilitators have been instructed to refer to this in the Parent Notification Letter and the Additional Information section of the IEP. The Supervisor or Director reviews every IEP and/or amendment prior to sending to parents. Both ensure that this has been completed for all students with autism prior to sending the IEP home. Further, the software program that the district uses for IEPs has added a component that includes the autism checklist for every student identified as having autism as a required form to be filled out. This change occurred during the summer of 2014. | | |
| **Title/Role(s) of Responsible Persons:**  April Rist, Director of Special Services  Kimberly Cass, Supervisor of Special Education | | **Expected Date of Completion:**  09/18/2014 |
| **Evidence of Completion of the Corrective Action:**  Memo dated 10/22/2013  Autism Checklist Worksheet  Memo dated 5/16/14  Copies of N1, Additional Information pages documenting consideration by the IEP Team | | |
| **Description of Internal Monitoring Procedures:**  Director will periodically pull reports from IEP software programs, ensuring that the required Autism Checklist has been completed.  Director and Supervisor meet with Educational Team Facilitators regularly to prepare for upcoming IEP meetings. During these review meetings, the Director and Supervisor will ensure that the autism checklist is included in the file to be reviewed at upcoming Team meetings.  All IEPs and amendments are reviewed by the Supervisor or the Director prior to being sent home. They are checked to ensure that the special requirements for students with autism are considered at the Team meeting. If they are not, the team facilitator will be required to re-convene the IEP Team to do so. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3A Special requirements for students on the autism spectrum | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit the evidence (memos, autism checklist worksheet, copies of N1 and Additional Information pages documenting consideration for students on the Autism Spectrum) that appropriate staffs were informed of the special requirements for students on the autism spectrum that need to be considered and documented in the student record, by November 30, 2014.  Conduct an administrative review of all IEPs of students on the autism spectrum written since corrective action and submit the number of records reviewed, the number in compliance, an explanation of the root cause of any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department by April 30, 2015.  \*Please note when conducting administrative 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):**  11/30/2014  04/30/2015 | | |

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

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student records and interviews indicated that the Team does not consistently state, on the IEP, why a student's removal from the general education classroom 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 Director of Special Services instructed the Educational Team Facilitators to include more specific language regarding the reason(s) that removal from the general education classroom is critical, as well as the basis for the Team's conclusion that the student is not able to be educated in a less restrictive environment with the use of supplementary aids and services. This was memorialized in writing via memo on 5/16/2014. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Services, Supervisor of Special Education | | **Expected Date of Completion:**  09/18/2014 |
| **Evidence of Completion of the Corrective Action:**  Memo dated 5/16/2014  Examples of IEP6 (Nonparticipation Justification) | | |
| **Description of Internal Monitoring Procedures:**  All IEPs and amendments are reviewed by the Supervisor or the Director prior to being sent home.  Director and Supervisor meet with Educational Team Facilitators regularly to prepare for upcoming IEP meetings. During these review meetings, the Director and Supervisor will ensure that the nonparticipation justification contains specific language regarding the reason for removal from general education. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the memo circulated to staff regarding the removal of students from the general education classroom and the examples of nonparticipation justifications used as examples, by November 30, 2014.  Conduct an administrative review of a sampling of IEPs written after corrective action, and submit the number of records reviewed, the number in compliance, an explanation of the root cause of any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department by April 30, 2015.  \*Please note when conducting administrative 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):**  11/30/2014  04/30/2015 | | |

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

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| **Criterion & Topic:**  CR 3 Access to a full range of education programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  The district's documents and policies regarding access to a full range of educational programs revealed that homelessness is not included as a protected category. | | |
| **Description of Corrective Action:**  The district School Committee policy subcommittee has authorized the change in district documents and policies regarding access to a full range of educational programs to add homelessness as a protected category. | | |
| **Title/Role(s) of Responsible Persons:**  Allison LeClair, Assistant Superintendent | | **Expected Date of Completion:**  06/30/2015 |
| **Evidence of Completion of the Corrective Action:**  Copies of policies that have been updated to include homelessness as a protected category will be included. | | |
| **Description of Internal Monitoring Procedures:**  Working closely with the School Committee policy subcommittee, the Assistant superintendent will participate in meetings. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the district's policy, authorized by the School Committee, regarding access to a full range of educational programs that includes homelessness as a protected category, and provide a description of how the updated policy was disseminated to students, parents and staff, by November 30, 2014. | | |
| **Progress Report Due Date(s):**  11/30/2014 | | |

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

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| **Criterion & Topic:**  CR 7B Structured learning time | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and an interview indicated that the district's guidelines do not address how it verifies the hours spent by students in school-to-work programs. | | |
| **Description of Corrective Action:**  Students complete weekly "time sheets" for our school to work programs. These time sheets describe all activities and document hours worked. They are submitted and approved by the Program Coordinator. The district will work with the high school administration and the School to Work Coordinator to develop and implement guidelines associated with these practices. | | |
| **Title/Role(s) of Responsible Persons:**  Allison LeClair, Assistant Superintendent | | **Expected Date of Completion:**  06/30/2015 |
| **Evidence of Completion of the Corrective Action:**  Written evidence of the new guidelines will be provided to the DESE. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent will oversee the process. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7B Structured learning time | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the district's updated guidelines that address how it verifies the hours spent by students in school-to-work programs, by November 30, 2014.  Submit a sampling of weekly time sheets that students have completed since corrective action to document the hours they have worked in school-to-work programs, by April 30, 2015. | | |
| **Progress Report Due Date(s):**  11/30/2014  04/30/2015 | | |

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

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| **Criterion & Topic:**  CR 8 Accessibility of extracurricular activities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and an interview indicated that the district does not include gender identity as a protected category in its written procedures and practices regarding accessibility of extracurricular activities. | | |
| **Description of Corrective Action:**  The district School Committee policy sub-committee has approved the change to include gender identity as a protected category in our written procedures and practices regarding accessibility of extracurricular activities. | | |
| **Title/Role(s) of Responsible Persons:**  Allison LeClair, Assistant Superintendent | | **Expected Date of Completion:**  06/30/2015 |
| **Evidence of Completion of the Corrective Action:**  Documentation of revised written practices and procedures regarding accessibility of extracurricular activities will be provided. | | |
| **Description of Internal Monitoring Procedures:**  Internally, our school committee policy subcommittee meets monthly during the school year and the Assistant Superintendent will be present at those meetings. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the district's updated written procedures regarding the accessibility of extracurricular activities that includes gender identity as a protected category, and provide a description of how the updated policy was disseminated to students, parents and staff, by November 30, 2014. | | |
| **Progress Report Due Date(s):**  11/30/2014 | | |

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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 send notice that includes all required language, to students age 16 and over, who have 15 consecutive unexcused absences. Further, it does not send annual written notice to former students who have not yet earned their competency determination and who have not transferred to another school, within the past two years. | | |
| **Description of Corrective Action:** The district will develop a notice that includes all required language, to students age 16 and over, who have 15 consecutive unexcused absences. We will also develop an annual notice to send to former students who have not yet earned their competency determination and who have not transferred to another school, within the past two years. | | |
| **Title/Role(s) of Responsible Persons:**  Allison LeClair, Assistant Superintendent | | **Expected Date of Completion:**  06/30/2015 |
| **Evidence of Completion of the Corrective Action:** Written documentation will be provided to the DESE regarding the final notice and procedure developed to address this finding. | | |
| **Description of Internal Monitoring Procedures:** The Assistant Superintendent will oversee the internal monitoring of the development of this information. Resources will be collected and reviewed, and after meeting with high school administration and guidance, a document will be created. | | |
| 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**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** Submit copies of the two notices the district will develop: 1) to students age 16 and over who have 15 consecutive unexcused absences and 2) to former students who have not yet earned their competency determination and who have not transferred to another school, within the past two years, and a copy of the procedure the district developed to address this finding, by November 30, 2014.  Submit a list of students 16 and over who have 15 consecutive unexcused absences and provide copies of the notices that were sent to those students, during the 2014-2015 school year.  Additionally, provide a list of those former students who were sent the annual written notice along with copies of notice sent, by April 30, 2014. | | |
| **Progress Report Due Date(s):**  11/30/2014  04/30/2015 | | |

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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 staff interviews indicated that the district regularly reviews its curriculum for content, but does not have a system in place to 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. | | |
| **Description of Corrective Action:**  The district will formalize a review system for educational materials. We will create a document that will be agreed upon by teaching and administrative leadership that will be piloted at the end of this school year for implementation during the 2015-2016 school year. | | |
| **Title/Role(s) of Responsible Persons:**  Allison LeClair, Assistant Superintendent | | **Expected Date of Completion:**  06/30/2015 |
| **Evidence of Completion of the Corrective Action:**  Written documentation will be provided to the DESE for review. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent will oversee the development, pilot and implementation of the document. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date**: 10/01/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the protocol that individual teachers in the district will use to 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, by November 30, 2014.  Submit a description of how the district implemented the pilot curriculum review and the results of the review, by April 30, 2015. | | |
| **Progress Report Due Date(s):**  11/30/2014  04/30/2015 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and staff 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 will develop implementation strategies to address the evaluation of K-12 programs annually. We have already sought examples from other districts to review best practices and we will select the method that best suits our district. | | |
| **Title/Role(s) of Responsible Persons:**  Allison LeClair, Assistant Superintendent | | **Expected Date of Completion:**  06/30/2015 |
| **Evidence of Completion of the Corrective Action:**  The district will provide written documentation to the DESE of our final product. This will include our practices of evaluating our K-12 programs annually to ensure equity of access to all programs for our students. | | |
| **Description of Internal Monitoring Procedures:**  This process will be overseen by the Assistant Superintendent as information is sought and discussed throughout the year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a description of the procedures and any protocols that the district develops to 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, by November 30, 2014.  Submit the results of the district evaluation of its K-12 program, including any conclusions reached and issues identified, 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, by April 30, 2014. | | |
| **Progress Report Due Date(s):**  11/30/2014  04/30/2015 | | |

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| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**  **COORDINATED PROGRAM REVIEW** |

District: Agawam Public Schools

Corrective Action Plan Review

Program Area: English Learner Education

Prepared by: Allison LeClair

CAP Form will expand to as many lines as necessary. Before completing and emailing to pqacap@doe.mass.edu, please see separate *Instructions for Completing Corrective Action Plans.*

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 to the school or district.

**Mandatory One-Year Compliance Date: September 11, 2015**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 5 Program Placement and Structure | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews and a review of documentation indicated that current hours of ESL instruction ELLs receive in the district’s elementary and middle schools are insufficient at proficiency levels 1, 2 and 5, therefore, inconsistent with Department guidelines. Please see the “Transitional Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners August 2013” as found on* [*http://www.doe.mass.edu/ell/guidance\_laws.html*](http://www.doe.mass.edu/ell/guidance_laws.html).  *Documentation submitted by the district didn’t include ESL curriculum that is used for direct ESL instruction. Therefore, there is no indication showing that the district currently has an ESL curriculum or a plan to develop one that is aligned to the Massachusetts Curriculum Frameworks and integrates components of the WIDA ELD standards frameworks. (See the Department’s WIDA ELD Standards update from at* [*http://www.doe.mass.edu/ell/wida.html*](http://www.doe.mass.edu/ell/wida.html)*).* | | | |
| **Narrative Description of Corrective Action:** The district will explore options to fund one additional ELL teacher at the elementary level, and reallocate a teacher that is currently shared between an elementary and middle to the middle level only, thereby correcting the problem of insufficient hours of ESL instruction. This will add an additional 1.0FTE to the current FTEs of ESL teachers. In addition, We are currently reviewing the Imagine Learning program for ELL students that help to build vocabulary and fluency. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Allison LeClair | | **Expected Date of Completion for Each Corrective Action Activity:** August 2015 | |
| **Evidence of Completion of the Corrective Action:** Additional FTE ESL Teacher for Elementary Level and ESL Curriculum purchased and ready for implementation at the elementary grades. | | | |
| **Description of Internal Monitoring Procedures:** Allison LeClair will monitor the analysis of staffing for Elementary ESL during the 2014-2015 school year, analyzing enrollment figures and distribution of ELL students. Allison will also be involved in the development of the district budget to ensure that funding is allocated for an additional ESL teacher assigned to the elementary schools. This will free up a teacher currently working .5 FTE at the middle and .5FTE at one of the elementary schools to move up to the middle level full time. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 5 Program Placement and Structure | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:**  The district reports in its proposed CAP that curriculum resources are being explored to build early literacy for the ELL Elementary students. The district should note that the resources to build early literacy cannot be a substitute for an ESL curriculum that should be used for direct ESL instruction. ESL instruction is different in nature and does not only target literacy skills, but includes outcomes in the four language domains: reading, writing, listening and speaking.  Purchased materials such as “Imagine Learning” can be used as resources, but they cannot replace the curriculum districts are expected to develop based on WIDA standards. This curriculum will reflect the ESL content to be taught and address the instructional needs of the ELL population at all levels. Therefore, the district should provide the Department with information about the process of developing ESL/ELD curriculum that integrates the WIDA standards as well as the timeline for implementation. | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  1- Submit a plan that includes information about a process for reviewing or developing ESL curriculum that integrates WIDA ELD standards, a plan for WIDA implementation including information such as WIDA training opportunities for the district staff, responsible district staff, meeting dates, minutes and signing sheets and timelines for implementation, by **January 5, 2015.**  2- Please complete district information in the attached spreadsheet labeled *ELL List* **by school** for each ELL student in the district, by **January 5, 2015.** | | | |
| **Progress Report Due Date(s):** January 5, 2015 | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 17 Program Evaluation | | | **Rating:** Not Implemented |
| **Department CPR Finding:** *Staff interviews and document review indicated that the district does not have a formal process in place to evaluate its ELE program periodically.* | | | |
| **Narrative Description of Corrective Action:** The district needs to develop and implement a formal process to evaluate the ELE program annually. We currently evaluate the program informally, but will move towards a more formalized plan over this school year. First, we will gather examples from area school districts and meet to review those samples and use those and other resources to compose our own plan. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Allison LeClair | | **Expected Date of Completion for Each Corrective Action Activity:** July 2015 | |
| **Evidence of Completion of the Corrective Action:** The district will share documentation that describes the formal process for evaluating the ELE program annually. | | | |
| **Description of Internal Monitoring Procedures:** *Allison LeClair and the ELL staff will meet and discuss the development of the plan. Meeting sign in sheets will document attendance.* | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 17 Program Evaluation | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  Submit a description of the plan the district develops to conduct a program evaluation. Include any documents or protocols it will use and time fame for conducting the evaluation, by January 5, 2015.  (Please note: There is a sample template for ELE Program Evaluation on the Department website at <http://www.doe.mass.edu/ell/resources.html> .)  Submit the results of the evaluation of the ELE program. Include recommendations for changes in the program (if any), by May 29, 2015. | | | |
| **Progress Report Due Date(s):** January 5, 2015; May 29, 2015 | | | |