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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: Fitchburg

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 09/10/2014.

**Mandatory One-Year Compliance Date:** **09/10/2015**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 2 | Required and optional assessments | Partially Implemented |
| SE 3A | Special requirements for students on the autism spectrum | Partially Implemented |
| SE 4 | Reports of assessment results | Partially Implemented |
| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 26 | Parent participation in meetings | Partially Implemented |
| SE 29 | Communications are in English and primary language of home | Partially Implemented |
| SE 41 | Age span requirements | Partially Implemented |
| SE 53 | Use of paraprofessionals | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |

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

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that when the district is conducting a re-evaluation, it does not always complete an educational assessment by a representative of the school district, including a history of the student's educational progress in the general curriculum. In addition, the district does not always complete an assessment by a teacher(s) with current knowledge regarding the student's specific abilities in relation to learning standards of the Massachusetts Curriculum Frameworks and the district's general education curriculum, as well as an assessment of the student's attention skills, participation behaviors, communication skills, memory, and social relations with groups, peers, and adults. | | |
| **Description of Corrective Action:**  The Fitchburg Special Education Department will conduct a training at the building level for all special education and general education teachers on the required Educational Assessment forms A &B during the months Of October and November 2013n  FAPE Files:  Marjika Boss: an evaluation consent has been sent out and returned by parent to conduct ed. assessment A&B. The meeting has been set up for 11/12/2014 at 11AM.  Kianalis Calderon: an evaluation consent has been sent out and returned by parent to conduct ed. assessment A&B. The assessment is being expedited and will run . | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The District will submit the training agenda and sign-in from all buildings  The District will submit 20 completed file review forms from across the district by 04/01/2015 | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, for those student records identified by the Department, complete the missing educational assessments and reconvene the IEP Teams to review the results of the assessments and to update the IEPs, as appropriate. Submit copies of the completed educational assessments, as well as copies of the Team Meeting Invitation (N3) and Team Meeting Attendance Sheet (N3A) as evidence that IEP Teams reconvened to review the assessment results.  By January 16, 2015, submit evidence of training of staff on the requirements for completing Educational Assessments A and B. Include the training dates, agendas, training materials, and signed attendance sheets indicating the title/role of staff and the name and title of the presenter.  By April 10, 2015, submit a report of the results of an internal review of a random sample of student records, conducted following the staff training, to ensure consistency and continued compliance for completion of Educational Assessments A and B. 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 that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  01/16/2015  04/10/2015 | | |

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| **Criterion & Topic:**  SE 3A Special requirements for students on the autism spectrum | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that although the district has a procedure in place for the IEP Team to consider and specifically address special requirements for students on the autism spectrum, not all elements are consistently addressed and documented in the IEP. | | |
| **Description of Corrective Action:**  The Fitchburg Special Education Department will conduct a training with all IEP liaisons and team chairs on the use of and special requirements for students on the autism spectrum by the end November 2014.  FAPE Files:  Troy Lander: Items not covered for ASD: Meeting date has been set for 10/15/2014  Marjika Boss: Consent for evaluation has been sent out for violation of SE-2 and the team meeting has been set for 11/12/2014 at 11AM to address the bullying and ASD items | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The District will submit the agenda and sign-off sheet for each training by 12/01/2014  The District will submit 20 completed file review forms from across the district by 04/01/2015 | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| 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):**  By January 16, 2015, for the student records identified by the Department, submit a copy of the IEP and the Team Meeting Attendance Sheet (N3A) to indicate that the IEP Teams have reconvened.    By January 16, 2015, submit a copy of the checklist that will be used for addressing the seven areas of need for students on the autism spectrum and evidence of the Team chairpersons training, including the agenda, training date, sign-in sheets indicating the title/role of staff, and the name/title of the presenter.  By April 10, 2015, submit a report of the results of an internal review of records in which IEPs were developed subsequent to implementation of all corrective actions. 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):**  01/16/2015  04/10/2015 | | |

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| **Criterion & Topic:**  SE 4 Reports of assessment results | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the district's assessment reports do not always include diagnostic impressions, or define in detail and in educationally relevant and common terms, the student's needs, offering explicit means of meeting them. | | |
| **Description of Corrective Action:**  The Special Education Department will conduct a training to review the current required elements of a assessment report procedure in the updated manual and train all special education staff on what district report should include for narrative explanations | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The District will submit the agenda and sign-off sheet for each training by 12/01/2014  The District will submit 20 completed file review forms from across the district by 04/01/2015 | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 4 Reports of assessment results | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit evidence of staff training, including signed attendance sheets and agendas, indicating the title/role of staff and the name and title of the presenter.  By April 10, 2015, conduct an internal review of assessment summaries developed after the training to ensure that summaries include diagnostic impressions, or define in detail and in educationally relevant and common terms, the student's needs, offering explicit means of meeting those needs. Submit a report of the results of the internal review of records. Indicate the number of student records reviewed and the number of student records in compliance; for all records not in compliance with this criterion, determine the root cause(s) of the noncompliance and provide 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, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  01/16/2015  04/10/2015 | | |

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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 the district does not always, one year prior to the student reaching the age of 18, inform both the parent and the student of the transfer of decision-making rights that will occur in relation to special education programs and services at the age of majority. | | |
| **Description of Corrective Action:**  The Special Education Administration will conduct training with Fitchburg High School staff and the Out of District Coordinator to remind them of the procedure currently in place for age of majority and all the documentation requirements. The Special Education Department is creating a standardize meeting package that will include the Parents Rights Brochure to give to parents at the IEP on the child's 17 meeting year.  FAPE File:  Eric Dilling: The parent and student were notified of age of majority rights in June 2013. The District has evidence of this process through the meeting notice and signed documents for age of majority  Cody Landry: Notice sent home of parents rights along with a letter explaining the process and asking the parent and student for a meeting if they desire | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Training of staff will be completed by 11/21/2014 and the district will submit the training agenda and sign off.  FAPE Files: The parent notification of age of majority | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department is creating a meeting package for all liaisons that will include a cover sheet of all important information that is required a IEP meetings including the check off that the Age of Majority Rights were discussed at the meeting. We will monitor this by conducting a file review of 10 records for students who will 17 during this school year. This file review will be completed by 04/01/2015. | | |
| 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**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit copies of the notices sent to the students identified by the Department during the student record review.  By January 16, 2015, the district will provide documentation of the training on transfer of rights at the age of majority, including an agenda, a list of participants and/or signed attendance sheet, and materials used at the training. Include the training packet provided to all liaisons.  By April 10, 2015, conduct an internal review and submit a report of the results indicating the number of student records reviewed and the number of student records in compliance; for all records not in compliance with this criterion, determine the root cause(s) of the noncompliance and provide 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, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  01/16/2015  04/10/2015 | | |

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| **Criterion & Topic:**  SE 8 IEP Team composition and attendance | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that the district does not always obtain a parent or guardian's written permission to excuse a required Team member's participation when that member cannot attend an IEP meeting. In addition, if the student is involved in a general education program, a general education teacher of the student is not always present at Team meetings. Staff interviews also indicated that a representative of the school district who has the authority to commit the resources of the district is not always present at Team meetings, requiring the Team Chairperson to check with a higher authority during a Team meeting before committing resources of the district. | | |
| **Description of Corrective Action:**  The special education department will review and train all special education liaisons and team chairs on team composition and excuse of a team member by 12/1/2014 | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The District will submit the agenda and sign-off sheet for each training by 12/01/2014  The District will submit 20 completed file review forms from across the district by 04/01/2015 | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit evidence of the special education liaison and team chair training, including the agenda, training date, sign-in sheets indicating the title/role of staff, and the name/title of the presenter.  By April 10, 2015, submit a report of the results of an internal review of records in which IEPs were developed subsequent to implementation of all corrective actions. 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). | | |
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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 staff interviews indicated that the district does not always meet the forty-five (45)-day timeline for conducting Team meetings to determine eligibility following a parent's consent to evaluate. | | |
| **Description of Corrective Action:**  The Fitchburg Special Education Department will conduct a training with building special education administrators to review the forty five day timeline by the end of November 2014. Instances in which this timeline is not being met will require a meeting with central office administration and disciplinary action will be determined. | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The District will submit the agenda and sign-off sheet for each training by 12/01/2014  The District will submit 20 completed file review forms from across the district by 04/01/2015 | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| 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**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit evidence of staff training, including the agenda, training date, sign-in sheets indicating the title/role of staff, and the name/title of the presenter.  By April 10, 2015, conduct a sample record review of both elementary and secondary student IEPs to review student records for evidence the district always meets the 45-day timeline for conducting Team meetings to determine eligibility following a parent's consent to evaluate. Submit a report of the results of the review of records in which IEPs were developed subsequent to implementation of all corrective actions. 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):**  01/16/2015  04/10/2015 | | |

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| **Criterion & Topic:** SE 13 Progress Reports and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that the district does not always complete reports on the student's progress toward reaching the goals set in the IEP as often as general education parents are informed of the progress of students by report cards. | | |
| **Description of Corrective Action:** Central Office Administration will provide training to all IEP liaisons on the content to be included in progress reports as well as the frequency in which the reports need to be created and sent to parents by the end of November 2014. Staff will be responsible to hand in completed progress reports to the building special education administrator at the same time as report cards are due. Building sped administrators will track this process to ensure each special education liaison has completed the progress report with appropriate content and under the same time-frame as report cards. Building sped administrators will inform central office administration of staff who do not complete this, and disciplinary action will be determined. | | |
| **Title/Role(s) of Responsible Persons:** Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:** 04/01/2015 |
| **Evidence of Completion of the Corrective Action:** The District will submit the agenda and sign-off sheet for each training by 12/01/2014  The District will submit 20 completed file review forms from across the district by 04/01/2015 | | |
| **Description of Internal Monitoring Procedures:** The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:** SE 13 Progress Reports and content | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit evidence of staff training, including the agenda, training date, sign-in sheets indicating the title/role of staff, and the name/title of the presenter.  By April 10, 2015, submit a report of the results of an internal review of records in which IEPs were developed subsequent to implementation of all corrective actions. 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):**  01/16/2015  04/10/2015 | | |

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| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that: 1) The district does not always complete IEPs using the most current IEP format provided by the Department of Elementary and Secondary Education; 2) When a student's disability affects social skills development, or when the student's disability makes him/her vulnerable to bullying, harassment, or teasing, the IEP does not always address the skills and the proficiencies needed to avoid and respond to bullying, harassment, or teasing; and 3) When the student is identified with a disability on the autism spectrum, the IEP Team does not always document that it considered and specifically addressed the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing. | | |
| **Description of Corrective Action:**  1. The Fitchburg Special Education Department has confirmed that the Aspen X2 IEP is the most current IEP format provided by the DESE.  2. The Special Education Department will review the current special Education manual and correct or add information about the bullying law and current DESE advisory by 11/1/2014. The Department will then conduct training for all liaisons and team chairs about the procedure's around bullying at IEP meetings.  3. The Special Education Department will conduct training to all liaisons and team chairs to review the ASD requirements around bullying. The department is creating a quick IEP meeting summary and checklist package for all liaisons and team chairs to bring to meetings to remind them of the requirements around bullying.  FAPE File: Marjika Boss: The IEP team will be convening on 11/12/2014 to address the bullying and ASD item's. | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  1. FPS will provide a blank copy of the IEP in the Aspen X2 system to confirm that it is the most current IEP.  2. FPS will provide a copy of the updated procedures and agenda and sign-off for the training  3. FPS will provide a copy of the updated procedures and agenda and sign-off for the training  FAPE File: Copy of the meeting minutes and sign in sheet and evidence that the 7 factors were discussed and copy of the proposed or accepted IEP with record of the ASD and bullying information. | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Approved  **Status Date**: 10/21/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit evidence of training on these requirements. Include the agenda, materials used, training date, signed attendance sheets indicating the title/role of staff and the name and title of the presenter. In addition, for the student whose record was identified by the Department, the district must reconvene the IEP Team to consider and address the skills and proficiencies needed to avoid and respond to bullying, harassment or teasing. Submit a copy of the IEP (using the most current format) and the Special Education Team Meeting Attendance Sheet (N3A) to indicate that the IEP Team reconvened to discuss the skills and proficiencies needed to avoid and respond to bullying, harassment or teasing. Provide a copy of the updated Special Education manual.  By April 10, 2015, submit a report of the results of an internal review of records conducted after the training to determine compliance. Include 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.  \*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). | | |
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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that at the conclusion of IEP Team meetings, the district provides the parent with a meeting summary which includes the completed IEP Service Delivery Grid and the major goal areas associated with the services. However, the district only provides the parent with one (1) copy of the proposed IEP and proposed placement. | | |
| **Description of Corrective Action:**  The Fitchburg Special Education Department will conduct a training for all IEP liaisons regarding the required number of copies of the proposed IEP and proposed placement by the end of November 2014. | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  he District will submit the training agenda and sign-in from all buildings  The District will submit 20 completed file review forms from across the district by 04/01/2015 | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit evidence of staff training, including the agenda, training date, sign-in sheets indicating the title/role of staff, and the name/title of the presenter.  By April 10, 2015, submit a report of the results of an internal review of records in which IEPs were developed subsequent to implementation of all corrective actions. 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):**  01/16/2015  04/10/2015 | | |

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the district's Notice of Proposed School District Action (N1) form or Notice of School District Refusal to Act (N2) form is not consistently included in the student record. In addition, these federally required written notices are sometimes not student specific, and the district's basis for proposed or refused action is not always included. | | |
| **Description of Corrective Action:**  The Fitchburg Special Education Department will provide training to all IEP liaisons on the required information to be included in the N1 and N2 forms by the end of November 2014. The Special Education Department has already conducted an IEP system training on using Aspen X2 at every building to make certain that all liaisons know how to write and print the N1 out of X2. Examples will be included in the special education manual as well. | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The District will submit the agenda and sign-off sheet for the training by 12/01/2014  The District will submit 20 completed file review forms from across the district by 04/01/2015 | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit evidence of staff training on the Notice of Proposed School District Action (N1) form and Notice of School District Refusal to Act (N2) form, including the agenda, training date, sign-in sheets indicating the title/role of staff, and the name/title of the presenter.  By April 10, 2015, submit a report of the results of an internal review of records in which N1 and N2 notices were developed subsequent to implementation of all corrective actions. 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):**  01/16/2015  04/10/2015 | | |

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

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| **Criterion & Topic:**  SE 26 Parent participation in meetings | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that when neither parent can attend a Team meeting, the district does use other methods to ensure parent participation, including individual or conference telephone calls. However, the district's efforts toward parent participation are not always documented in the student's record. | | |
| **Description of Corrective Action:**  The Special Education Department will update the Special Education Manual and conduct direct training on where and how to document the efforts made to obtain the parent for an IEP meeting. | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The District will submit the training agenda and sign-in from all buildings  The District will submit 20 completed file review forms from across the district by 04/01/2015 | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 26 Parent participation in meetings | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit evidence of training (updated Special Education manual, training materials, signed attendance sheets [person, role, and school], training notice, and agenda).  By April 10, 2015, submit a report of the results of an internal review of records in which Team meetings were held subsequent to implementation of all corrective actions. 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):**  01/16/2015  04/10/2015 | | |

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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:**  A review of student records, documents and staff interviews indicated that the district does not consistently communicate with parents in the primary language of the home if such primary language is other than English. In addition, if the district provides notices orally, the district does not keep written documentation that it provided such notice in an alternate manner, the content of the notice or the steps taken to ensure that the parent understood the content of the notice. | | |
| **Description of Corrective Action:**  The Special Education Department currently employees a bilingual liaison to orally translate at IEP meetings and orally translate important documents such as the IEP and evaluations. The Department will formally write a procedure to make a request of translator and how to record this request and oral translation meeting within the student's special education record. Once the department has created the formal process the special education department will conduct a training on this procedure by April 1, 2015.  FAPE File:  Kianalis Calderon: The District is getting all progress reports and IEP translated by 10/31/2014 and will translate all documents for the team meetings N1A/N3/N3A | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The creation of the oral translation procedure by April 1, 2015  Training agenda and sign off by April 1, 2015  FAPE Files: Kianalis Calderon: translated records | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department will conduct a file review in each building across the district on ten files per building during the period of 12/01/2014-03/27/2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 29 Communications are in English and primary language of home | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, for the student records identified by the Department, submit evidence of translated documents provided to the parent.  By January 16, 2015, submit a narrative description of the district's revised procedures related to communicating with parents in the primary language of the home if such primary language is other than English, along with evidence of staff training on these procedures, which will include but not be limited to a training agenda, signed attendance sheet and copies of the materials presented.  By January 16, 2015, submit the district's revised procedures related to maintaining written documentation when information is provided to the parent in an alternate manner. Submit evidence of staff training on these procedures, which will include but not be limited to a training agenda, signed attendance sheet and copies of the materials presented.  By April 10, 2015, submit a report of the results of an internal review of records in which IEPs were developed subsequent to implementation of all corrective actions. 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):**  01/16/2015  04/10/2015 | | |

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

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| **Criterion & Topic:**  SE 41 Age span requirements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of documents and staff interviews indicated that, at Fitchburg High School, the ages of the youngest and oldest student differ by more than 48 months in some Learning Center, Guided Learning, and Learning Perspectives classes. In addition, the grades 2-4 Pathways class at South Street Elementary School and the grades K-2 Guided Learning class at McKay Arts Academy have groupings where the ages of the youngest and oldest student differ by more than 48 months. | | |
| **Description of Corrective Action:**  The Special Education Department has examined the current age span for all programs and will submit for evidence that all pathways and the guided learning program K-2 and the high school level learning perspectives classrooms are within the 48 month age span. The guided learning classroom remains in violation of the 48 month age span.  In order to correct the age span violation in the guided learning program at FHS, the special education department is requiring the schedule for the guided learning program to have the two classroom schedule students in the same classroom that are within the 48 months. | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  12/01/2014 |
| **Evidence of Completion of the Corrective Action:**  The special education department will provide a list of the students by period in the two guided learning classrooms by 12/01/2014 | | |
| **Description of Internal Monitoring Procedures:**  The special educating department will pull that student data information for all special education teachers once in the fall each year before October 1st and again by May 1st to appropriately plan programming. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 41 Age span requirements | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit schedules of all instructional groups that include the names of students and dates of birth by class period for the Learning Center, Guiding Learning, and Learning Perspectives classes at Fitchburg High School and the grades 2-4 Pathways class at South Street Elementary School and the grades K-2 Guided Learning class at McKay Arts Academy. | | |
| **Progress Report Due Date(s):**  01/16/2015 | | |

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

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| **Criterion & Topic:**  SE 53 Use of paraprofessionals | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that paraprofessionals at the McKay Arts Academy sometimes implement instruction for students with disabilities while not under the supervision of an appropriately licensed professional who is proximate and readily available to provide such supervision. | | |
| **Description of Corrective Action:**  The Special Education Department along with the Administration of McKay will conduct a training with all McKay paraprofessionals to clearly outline paraprofessional responsibilities. We will also meet with all special education liaisons to review their current student case load to make certain all students assigned with paraprofessional support are being supported under the direction of a licensed professional. | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Dir. of Special Education  Lourdes Ramirez, Principal of McKay | | **Expected Date of Completion:**  11/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Training agenda and sign off sheets for the meeting with the paraprofessionals and the special education liaisons. | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department and the McKay Administration will conduct review of liaison case loads by meeting and reviewing responsible three times a year (fall/winter/spring) as a regular practice.  The Special Education Department and the McKay Administration will conduct walk through of classrooms with assigned paraprofessionals monthly during the school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 53 Use of paraprofessionals | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit evidence of training on paraprofessional responsibilities at McKay Arts Academy. Include the training date, agenda, training materials, and signed attendance sheets indicating the title/role of staff and the name and title of the presenter.  By January 16, 2015, submit a report of the results of an internal review of liaison case loads/walkthroughs and submit an analysis of this information. | | |
| **Progress Report Due Date(s):**  01/16/2015  04/10/2015 | | |

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

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| **Criterion & Topic:**  SE 54 Professional development | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that although the district provided evidence of training for paraprofessionals, the content of training provided did not include the following topics: state and federal special education requirements and related local special education policies and procedures; analyzing and accommodating diverse learning styles of all students in order to achieve an objective of inclusion in the general education classroom of students with diverse learning styles; or methods of collaboration among teachers, paraprofessionals and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. | | |
| **Description of Corrective Action:**  The paraprofessional training on August 22, 2014 agenda included Civil Rights, bullying laws, Physical restraint, IEP general law overview, accommodations/modifications and District procedures and direct IEP questions. | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  08/16/2014 |
| **Evidence of Completion of the Corrective Action:**  Training agenda and sign off from 8/22/2014 | | |
| **Description of Internal Monitoring Procedures:**  Review of requirements for paraprofessional training and evidence of the agenda and training sign off | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, provide evidence of paraprofessional training on the following topics: state and federal special education requirements and related local special education policies and procedures; analyzing and accommodating diverse learning styles of all students in order to achieve an objective of inclusion in the general education classroom of students with diverse learning styles; and methods of collaboration among teachers, paraprofessionals and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. Submit the training agenda, attendance sheets and copies of the materials presented. | | |
| **Progress Report Due Date(s):**  01/16/2015 | | |

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

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Staff interviews and observations indicated that at McKay Arts Academy two Speech and Language classes are conducted simultaneously in the same classroom with no physical separation, thus resulting in visual and auditory distractions. Additionally, in the McKay library, multiple instructional and related service activities are conducted concurrently, including Speech and Language instruction, substantially separate special education classes, along with Computer Lab and morning staff meetings creating visual and auditory distractions for students.  At South Street School, programs for students with autism in grades 1-2 and 3-4 are clustered in the same location resulting in stigmatization of students and the kindergarten Resource Room is remotely located on one end of the school reducing inclusion into the life of the school. | | |
| **Description of Corrective Action:**  McKay: The Special Education Department will work with McKay administration and Fitchburg State University on obtaining additional space to support speech and language instruction and move the substantially separate classroom. As this building belongs to the University they need to agree and approve the additional request.  South Street: One of the Pathways and kindergarten classrooms will be moving space by 4/1/2015 to a more inclusive setting. | | |
| **Title/Role(s) of Responsible Persons:**  Roann Demanche, Director of Pupil and Special Education Services | | **Expected Date of Completion:**  08/20/2015 |
| **Evidence of Completion of the Corrective Action:**  The classroom space will be moved and maps will be provided when they are moved by 4/1/2015 | | |
| **Description of Internal Monitoring Procedures:**  Walkthroughs of space will occur at the beginning and end of the school year to make certain all space is appropriate. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, the district will submit the plan developed between the McKay Arts Academy and Fitchburg State University for obtaining additional space to support speech and language instruction and move the substantially separate classroom.  By April 10, 2015, the Department will conduct onsite verification at South Street School to ensure locations of programs for students with autism in grades 1-2 and 3-4 and the Kindergarten resource room reduce stigmatization and foster inclusion into the life of the school.  By April 10, 2015, the Department will conduct onsite verification of classroom spaces at McKay Arts Academy. | | |
| **Progress Report Due Date(s):**  01/16/2015  04/10/2015 | | |

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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:**  Staff interviews indicated that the district's Grade 8 students, who may have an interest in certain occupational/vocational education programs offered by the district's vocational high school, are not transported by the district to participate in the scheduled vocational school's orientation program. | | |
| **Description of Corrective Action:**  The Fitchburg Public Schools will allow access for any grade 8 student who have an interest in certain occupational/vocational education programs offered by the district's vocational high school by allowing students to be transported by the occupational/vocational educational program during the hours that does not conflict with the educational progress of any student during a school year. | | |
| **Title/Role(s) of Responsible Persons:**  Robert Jokela, Assistant Superintendent of Finance and Operations  Middle School Principals | | **Expected Date of Completion:**  04/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The Fitchburg Public School District in a memo to the leaders of the Occupational/Vocational education programs and Fitchburg building administration for all middle school level children will be notified to allow access for all interested grade 8 students in accordance with Fitchburg Public School attendance policy and will work to will the local occupational/vocational school to have access to orientation program be during a time that does not conflict with instruction and attendance during Fitchburg Public Schools. The transportation will be provided by the occupational/vocational education program. | | |
| **Description of Internal Monitoring Procedures:**  Building Administration for middle schools will coordinate with the local occupational/vocational education during orientation program time to check to make certain the occupational/vocational school has provided students with the information needed to participate in the orientation program and that they know the occupational/vocational school should provide transportation to the orientation. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, provide a copy of the memorandum distributed to all leaders of the occupational/vocational education programs and Fitchburg middle school building administration. | | |
| **Progress Report Due Date(s):**  01/16/2015 | | |

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

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of student records, documents, and staff interviews indicated that although the district provided evidence that certain initiatives are in process to provide translation of important information, handbooks and codes of conduct being distributed to parents were not consistently translated into the major languages spoken by parents or guardians with limited English skills; the district has also not established a formal system of oral interpretation to assist parents/guardians with limited English skills, including those who speak low-incidence languages. | | |
| **Description of Corrective Action:**  The Fitchburg Public Schools will create a formal procedure for oral and written interpretation to assist parents. This procedure would include how to access and obtain translation services.  The school handbooks will be translated into the major language spoken in Fitchburg and available to parents on the District web-site and will be printed at their request. | | |
| **Title/Role(s) of Responsible Persons:**  Bonnie Baer-Simahk, Director Of ELL and Enrollment | | **Expected Date of Completion:**  08/20/2015 |
| **Evidence of Completion of the Corrective Action:**  The process procedure for requesting oral or written translation.  A list of available translators to complete oral/written translations.  Training agenda and sign-off sheet. | | |
| **Description of Internal Monitoring Procedures:**  Monitoring of the request and process from schools for translation through central office. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, submit translated copies of handbooks and codes of conduct and submit evidence of training on procedures for requesting oral and written translation to assist parents/guardians with limited English skills, including those who speak low-incidence languages. Include the agenda, training date, sign-in sheets indicating the title/role of staff, and the name/title of the presenter. | | |
| **Progress Report Due Date(s):**  01/16/2015 | | |

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

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| **Criterion & Topic:**  CR 23 Comparability of facilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  At Reingold Elementary School, two English language learner instructional groups are conducted simultaneously in the same classroom with no partitions creating auditory distraction affecting instruction in both groups. | | |
| **Description of Corrective Action:**  Due to the limited space at Reingold the district was not able to provide an individual space to the two English language learner groups. The District has provided a divider that is currently separating the two groups and will be building a wall in this space to make it two separate spaces by FY 2015-2016. | | |
| **Title/Role(s) of Responsible Persons:**  Kathryn Brady, Principal Reingold Elementary School | | **Expected Date of Completion:**  08/20/2015 |
| **Evidence of Completion of the Corrective Action:**  The current divider in the space that has been in place since 08/28/2014  Permanent wall in place by the start of school year 2015-2016 | | |
| **Description of Internal Monitoring Procedures:**  Walk through of space by the start of the 2015-2016 school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 23 Comparability of facilities | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By April 10, 2015, the Department will conduct onsite verification at the Reingold Elementary School to confirm placement of the divider. | | |
| **Progress Report Due Date(s):**  04/10/2015 | | |

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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:**  Review of documents and staff interviews indicated that, although the district actively engages in curriculum review, it does not have a process that involves individual teachers in the review of educational materials for consideration of simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | |
| **Description of Corrective Action:**  The Assistant Superintendent has developed a checklist (Criteria for Evaluating  Instructional Materials and Programs), based on and adapted from the MA DESE Mathematics Curriculum Frameworks Appendix II, Nov. 2000, for use in evaluating all instructional materials. Although taken from the Mathematics Frameworks, it was edited to be inclusive of any/all content area materials. The checklist is located at the end of this narrative. Areas pertaining to the civil rights criteria are highlighted. | | |
| **Title/Role(s) of Responsible Persons:**  Paula Giaquinto, Assistant Superintendent of Curriculum | | **Expected Date of Completion:**  06/30/2015 |
| **Evidence of Completion of the Corrective Action:**  The Assistant Superintendent will share and discuss this checklist at the FPS District Curriculum Instruction, Assessment and Professional Development Committee which will be meeting monthly in 14-15. All Curriculum Directors and teacher and administrator representatives from various schools attend. They will be directed to disseminate the checklist to all cohorts of staff with whom they work. The checklist will also be emailed to all Principals for dissemination to their school staff members, along with this narrative. As staff members review educational materials during the 14-15 school year, they will be directed to record their materials evaluation on the checklist, complete the top portion, and submit it to their school Principal or Curriculum Director. | | |
| **Description of Internal Monitoring Procedures:**  Staff members may be conducting these reviews during their building-based team, common planning time or professional learning community sessions (elementary and middle school staff meet weekly; FHS staff meet twice monthly), their professional development sessions (early release times one day each month) or during other curriculum alignment and review days as offered. These completed checklists will need to remain on file at the school or curriculum office and accompany requests for purchases to the Business Office beginning in 14-15. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date**: 10/22/2014 | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 16, 2015, the district will provide a copy of the Criteria for Evaluating Instructional Materials and Programs checklist along with a copy of an agenda showing discussion and dissemination of this document at a District Curriculum Instruction, Assessment and Professional Development Committee monthly meeting. In addition, please provide a checklist completed by a district staff member. | | |
| **Progress Report Due Date(s):**  01/16/2015 | | |

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

**District: Fitchburg Public Schools**

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Bonnie Baer-Simahk

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 4 Waiver Procedures** | | | **Rating:**  **Partially Implemented** |
| **Department CPR Finding:** *Review of student records and staff interviews indicated that notice provided to parents does not include information regarding waiver procedures.* | | | |
| **Narrative Description of Corrective Action:** Our district now uses the standard parent notification form provided by ELLevation/ESLReps, which has been revised and approved by the MA DESE since the time of our Program Review. Information about waivers is included on this form. Going forward we will be using the approved form. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Bonnie Baer-Simahk, ELL Director | | **Expected Date of Completion for Each Corrective Action Activity:** 10/30/14 | |
| **Evidence of Completion of the Corrective Action:** Copy of approved Parent Notification Letter and a screen shot of the language translations available in the ELLevation system. | | | |
| **Description of Internal Monitoring Procedures:** The letters are mailed out to parents from the ELL Department, under the oversight of the ELL Director who will assure that the approved letters which include the information regarding waiver procedures are the letters which are mailed out to parents. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 4 Waiver Procedures** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** In addition to the district’s implementation of the Parent Notification Letter, provide training to all appropriate staff on the waiver procedures to ensure thatstaff members are aware of the requirement and understand the district’s waiver procedures. | | | |
| **Required Elements of Progress Report(s):**  By **February 27, 2015,** please submit a copy of the approved Parent Notification Letter and a screen shot of the language translations available in the ELLevation system, along with evidence of staff training to appropriate staff on the district’s procedures to inform parents of their right to apply for a waiver. Evidence of training may include email, agenda, signed attendance sheets with staff name(s)/role(s), and training materials.  By **May 29, 2015,** submit the results of an administrative review of a representative sample of ELL student records across grade level buildings (elementary, middle, high), for evidence that parents were informed of their right to a waiver. Include the number of records reviewed, the number found to be in compliance, the root cause(s) for any identified noncompliance and the district’s remedy to address any noncompliance.  **\*Please note that 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 level for the record review; b) Date of the review; c) Name of the person(s) who conducted the review, their role(s), and their signature(s).** | | | |
| **Progress Report Due Date(s): February 27, 2015 May 29, 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 ELLs at proficiency levels 1and 2receive only 85minutes of ESL instruction per day, when the recommended hours of ESL instruction for this level of proficiency is 2.5 hours per day. Current hours of ESL instruction provided to ELL students at proficiency levels 1 and 2 are not consistent with the 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)*.* | | | |
| **Narrative Description of Corrective Action:**  A thorough investigation and analysis of ESL schedules will be conducted this year by the ELL director to determine the extent to which ELLs at proficiency levels 1 and 2 receive the recommended hours of ESL instruction, and where adequate instructional time is not in place, to formulate a plan for that to be corrected. The investigation has already begun, as ESL teachers have submitted their schedules, *(October, 2014)* and the ELL director has compiled a report of student schedules by proficiency level at each school. *(October, 2014)*  The ELL coach will provide technical assistance and consultation to ESL teachers and principals in the development of schedules for their level 1 and 2 students consistent with the Transitional Guidance document.The ELL Director will meet with each principal and ESL teacher at all the buildings, to report the results of the investigation and to formulate plans to ensure ongoing adequate level 1 and 2 student schedules.*(February, 2015)*  The Transitional Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners August 2013has been distributed at the Language Assessment Team meetings (*June, 2014*) as is done annually. These guidelines have been communicated to new administrators at the full leadership team at the Administrative Retreat, (*August, 2014*) and will be reviewed again at an upcoming Administrative Council meeting, *(November, 2014)* at which point the *ELL Proficiency Level and Instructional Time Report* will be discussed. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** ELL Director, ELL Coach, Principals, ESL Teachers. | | **Expected Date of Completion for Each Corrective Action Activity:**  October, 2014  February, 2015  June, 2014  August 2014  November, 2014 | |
| **Evidence of Completion of the Corrective Action:** Meeting agendas, *ELL Proficiency Level and Instructional Time Report,* Level 1 and 2 student schedules, Related Correspondence | | | |
| **Description of Internal Monitoring Procedures:** ELL coach will meet with the ELL director regularly to report on progress on adequate level 1 and 2 student schedule development. ELL director will report to the Superintendent and Cabinet on the results of the investigation and analysis, as well as the building-based plans for provision of adequate level 1 and 2 schedules, along with related recommendations. | | | |
| 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:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  Please complete district information in the attached spreadsheet labeled ELL List by school for each ELL student in the district. | | | |
| **Progress Report Due Date(s): February 27, 2015 May 29, 2015** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 10 Parent Notification** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:** *Staff and parent interviews indicated that the district does not always provide translation or interpreting services for parent-teacher conferences, when the parent’s level of English proficiency may require such services. Also sometimes family members, including students, are used as translators.* | | | |
| **Narrative Description of Corrective Action:** The Fitchburg Public Schools will create a formal procedure for oral and written interpretation to assist parents. This procedure will include how to access and obtain translation services. The school handbooks will be translated into the major languages spoken in Fitchburg and available to parents on the District web-site and will be printed at their request. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Bonnie Baer-Simahk is responsible for development of the formal procedure, in collaboration with Central Office leadership. | | **Expected Date of Completion for Each Corrective Action Activity:** 8/20/2015 | |
| **Evidence of Completion of the Corrective Action:** The process/procedure for requesting oral or written translation. A list of available translators to complete oral/written translations. Training agenda and sign-off sheet | | | |
| **Description of Internal Monitoring Procedures:** Monitoring of the request and process from schools for translation through central office | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 10 Parent Notification** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** Conduct training to all appropriate staff on the procedures for provision of oral/written translations as indicated by the Home Language Survey in the same manner and frequency as general education reporting for progress reports and report cards. | | | |
| **Required Elements of Progress Report(s):**  By **February 27, 2015**, please submit evidence of the district’s formal procedures to access and obtain oral or written translation of report cards and progress reports. Evidence of training may include email, agenda, signed attendance sheets with staff name(s)/role(s), and training materials.  By **May 29, 2015,** submit the results of an administrative review of a representative sample of ELL student records across grade level buildings (elementary, middle, high), for evidence that parents were provided oral or written translations as indicated by the HLS. Include the number of records reviewed, the number found to be in compliance, the root cause(s) for any noncompliance and the district’s remedy to correct any identified noncompliance.  **\*Please note that 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 level for the record review; b) Date of the review; c) Name of the person(s) who conducted the review, their role(s), and their signature(s).** | | | |
| **Progress Report Due Date(s): February 27, 2015 May 29, 2015** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 18 Records of ELL Students** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:** *Review of student records indicated that the report cards and progress reports are frequently not included in the student record and are not in the native language if indicated. In addition, copies of parent notification letters are sometimes not included in the student record; when the letters are present, they are not always in the native language of the parent when required.* | | | |
| **Narrative Description of Corrective Action:** Staffing changes in the ELL department have contributed to some misunderstandings regarding which documents need to be kept in the ELL student record, and whether or not documents for multiple years should be maintained. In addition, an internal transition to more contemporary electronic storage of records may have contributed to this misunderstanding. Some documentation which was previously updated by hand each year is now automatically populated with updated information on a new Cume Folder Report, which IS replaced each year. Some ESL teachers were discarding the previous year’s parent notification letter when updating it with the current year. During the 2014-15 school year, the ELL Director will communicate directly with the ESL teachers and principals in each school regarding the expectation to maintain on file paper copies of all of these documents, each year, and throughout the course of the student’s school years. This expectation will be communicated to ESL teachers at a professional development session as well. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ELL Director  Principals | | **Expected Date of Completion for Each Corrective Action Activity:**  ELL Dept. Meeting:11/4/14  Following each grading period | |
| **Evidence of Completion of the Corrective Action:** Agenda, 11/4/14 PD, Student ELL Records | | | |
| **Description of Internal Monitoring Procedures:** Principals will ensure that ESL report cards and progress reports, along with Parent Notification Letters are routinely filed in the ELL record, and that staff do not remove outdated documents from the ELL record. ELL director will conduct cume reviews. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 18 Records of ELL Students** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** Conduct training to all relevant staff on the district’s procedures to ensure that parent notification letters, report cards and progress reports are always included in the student record and provided in the parent/guardian’s native language if indicated. Additionally, with the staffing changes, the district may wish to create checklist for the student’s ELL folder which include a list of all required documents. | | | |
| **Required Elements of Progress Report(s):**  By **February 27, 2015,** please submit evidence of staff training to appropriate staff on the district’s procedures to ensure parent notification letters, report cards and progress reports are always included in the student record and provided in the parent/guardian’s native language as indicated. Evidence of training may include agenda, signed attendance sheets with name(s)/role(s), and training materials.  By **May 29, 2015,** submit the results of an administrative review of a representative sample of ELL student records across grade level buildings (elementary, middle, high), for evidence that parent notification letters, report cards, and progress reports are consistently contained within the files of English Language Learners and provided in the native language as indicated by the HLS. Include the number of records reviewed, the number found to be in compliance, the root cause(s) for any continued noncompliance and the district’s remedy to correct any identified noncompliance.  **\*Please note that 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 level for the record review; b) Date of the review; c) Name of the person(s) who conducted the review, their role(s), and their signature(s).** | | | |
| **Progress Report Due Date(s): February 27, 2015 May 29, 2015** | | | |