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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: North Andover

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 09/04/2014.

**Mandatory One-Year Compliance Date:** **09/04/2015**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 6 | Determination of transition services | 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 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 22 | IEP implementation and availability | Partially Implemented |
| SE 29 | Communications are in English and primary language of home | Partially Implemented |
| SE 32 | Parent advisory council for special education | 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 | Not Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 11A | Designation of coordinator(s); grievance procedures | 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 23 | Comparability of facilities | Partially Implemented |
| CR 24 | Curriculum review | Not Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |
| CR 26A | Confidentiality and student records | Partially Implemented |

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| **Criterion & Topic:** SE 6 Determination of transition services | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Record review indicated that IEP Teams are not consistently determining whether students approaching graduation are likely to require continuing services from adult human service agencies. Specifically, the Additional Information section of the IEP which addresses whether or not there is a need for a Chapter 688 referral was not consistently completed for students approaching graduation. |
| **Description of Corrective Action:** 1. Meeting was held with the Evaluation Team Leaders to discuss the CPR findings on July 22, 2014. 2. A follow up meeting was held on September 22, 2014 to remind the ETLs to address the need for a Chapter 688 referral for all high school students approaching graduation. |
| **Title/Role(s) of Responsible Persons:**Leigh Ann Carbone, Director of Special Education | **Expected Date of Completion:**09/22/2014 |
| **Evidence of Completion of the Corrective Action:**Agendas and attendance sheets. |
| **Description of Internal Monitoring Procedures:** The director of special ed and the high school ETL will review 10 high school files by the end February to check for compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 6 Determination of transition services | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 18, 2014, submit dated meeting agendas, signed attendance sheets, and training materials from the Evaluation Team Leader (ETL) meetings held in July and September 2014. By February 23, 2015, submit a report of the results of an internal review of records in which IEPs were written subsequent to implementation of all corrective actions, and include the following: 1) The number of student records reviewed; 2) The number of records in compliance; 3) For any records not in compliance, determine the root cause(s) of the non-compliance; and 4) 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 role(s) and signature(s). |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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| **Criterion & Topic:** SE 8 IEP Team composition and attendance | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Record review and staff interviews indicated that a general education teacher is not always present at IEP Team meetings when a student is involved in a general education program. In addition, when a member of the Team does not attend an IEP Team meeting, the district does not always follow appropriate excusal procedures, which include: The district and the parent agreeing, in writing, that the attendance of the Team member is not necessary because the member´s area of the curriculum or related services is not being modified or discussed; orThe district and the parent agreeing, in writing, to excuse a required Team member´s participation and the excused member provides written input into the development of the IEP to the parent and the IEP Team prior to the meeting. |
| **Description of Corrective Action:** 1. Meeting was held with the ETLs to discuss the CPR findings on July 22, 2014. 2. Training was provided to all staff by Attorney Matt MacAvoy on August 26, 2014. 3. Follow up meeting was held with ETLs on Sept. 22 and the procedures as found in the procedural manual were reviewed. |
| **Title/Role(s) of Responsible Persons:**Leigh Ann Carbone, Director of Special EducationEvaluation Team Leaders | **Expected Date of Completion:**09/22/2014 |
| **Evidence of Completion of the Corrective Action:**Agendas, attendance sheets and powerpoint presentation |
| **Description of Internal Monitoring Procedures:** The director of special education and the ETLs will review 10 random files by the end of February 2015 for compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 18, 2014, submit dated meeting agendas, signed attendance sheets, and training materials from the Evaluation Team Leader (ETL) meeting held in July and staff training held in August 2014. By February 23, 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, and include the following: 1) The number of student records reviewed; 2) The number of records in compliance; 3) For any records not in compliance, determine the root cause(s) of the non-compliance; and 4) 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 role(s) and signature(s). |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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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:** Record review and interviews indicated that within 45 school working days after receiving the parent's written consent to an initial evaluation or a re-evaluation, the school district does not consistently determine whether the student is eligible for special education and provide the parent with either a proposed IEP and placement or a written explanation of the finding of no eligibility. |
| **Description of Corrective Action:** 1. Meeting was held with the ETLs to discuss the CPR findings on July 22, 2014. 2. Training was provided to all staff by Attorney Matt MacAvoy on August 26, 2014. 3. Indicator 11 will require collection of data beginning on Oct 1, 2014. The data will be used to ensure timelines are met. |
| **Title/Role(s) of Responsible Persons:**Leigh Ann Carbone, Director of Special EducationEvaluation Team Leaders | **Expected Date of Completion:**08/26/2014 |
| **Evidence of Completion of the Corrective Action:**Agendas, attendance sheets, powerpoint, results of Indicator 11 |
| **Description of Internal Monitoring Procedures:** The director of special education and the ETLs will review 10 random files by the end of February 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**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 18, 2014, submit dated meeting agendas, signed attendance sheets, and training materials from the Evaluation Team Leader (ETL) meeting held in July and staff training held in September 2014. By February 23, 2015, submit a report of the results of an internal review of records in which initial evaluations and re-evaluations occurred subsequent to implementation of all corrective actions, and include the following: 1) The number of student records reviewed; 2) The number of records in compliance; 3) For any records not in compliance, determine the root cause(s) of the non-compliance; and 4) 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 role(s) and signature(s). |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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| **Criterion & Topic:** SE 18B Determination of placement; provision of IEP to parent | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Record review and staff interviews indicated that the district is not providing parents with two copies of the proposed IEP and placement immediately following development at the IEP Team meeting. The district currently provides a completed IEP service delivery grid and a statement of the major goal areas associated with these services at the conclusion of the Team meeting, then one copy of the proposed IEP and placement is mailed to parents within two weeks. |
| **Description of Corrective Action:** This indictor was addressed during the last school year. A reminder to provide 2 copies of the IEP to parents was made during an ETL meeting on July 22 and repeated on September 22. |
| **Title/Role(s) of Responsible Persons:**Leigh Ann Carbone, Director of Special EducationEvaluation Team Leaders | **Expected Date of Completion:**09/02/2014 |
| **Evidence of Completion of the Corrective Action:**Agenda, attendance sheet, and N.1 notes indicating that 2 IEPs have been enclosed. |
| **Description of Internal Monitoring Procedures:** The director of special education and the ETLs will review 10 random files by the end of February to determine if the N.1 notes indicate that 2 IEPs have been enclosed. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit evidence of ETL training on the procedures for providing two copies of the proposed IEP and placement by November 18, 2014. By February 23, 2015, submit a report of the results of an internal review of student records, in which IEPs were developed subsequent to implementation of all corrective actions, and include the following: 1) The number of student records reviewed; 2) The number of records in compliance; 3) For any records not in compliance, determine the root cause(s) of the non-compliance; and 4) 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 role(s) and signature(s). |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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| **Criterion & Topic:** SE 22 IEP implementation and availability | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff and parent interviews along with parent surveys indicated that students are missing speech and language services, physical therapy and occupational therapy at the beginning of the school year for up to three weeks due to the difficulty in coordinating the services within the related service providers' schedules. |
| **Description of Corrective Action:** 1. Meeting was held with the ETLs to discuss the CPR findings on July 22, 2014. 2. Meeting held to discuss the CPR findings with the speech therapists on August 28, 2014. 3. CPR findings shared for a second time with the principals at a Leadership Meeting on September 10, 2014. |
| **Title/Role(s) of Responsible Persons:**Leigh Ann Carbone, Director of Special Education | **Expected Date of Completion:**09/11/2014 |
| **Evidence of Completion of the Corrective Action:**Agendas, attendance sheetsDocumentation of start dates for all service providers |
| **Description of Internal Monitoring Procedures:** All service providers were required to report their service start date to their building ETL.ETLs forwarded the information to the director. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 22 IEP implementation and availability | **Corrective Action Plan Status:** Partially Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:** The district indicated that trainings on the protocol for implementation of related services were held in July, August and September 2014 for ETLs, speech therapists, and principals. The district did not, however, indicate that physical and occupational therapists participated in any training. |
| **Department Order of Corrective Action:**Provide training on the protocol for implementation of related services for physical and occupational therapists. |
| **Required Elements of Progress Report(s):** By November 18, 2014, submit dated meeting agendas, signed attendance sheets, and training materials as evidence of training of related service staff, including physical and occupational therapists, ETLs, and principals. Also, submit evidence of the immediate provision of related service support for students. |
| **Progress Report Due Date(s):** 11/18/2014 |

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| **Criterion & Topic:** SE 29 Communications are in English and primary language of home | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Record review and staff interviews indicated that the district is not always sending written communications to parents in both English and the primary language of the home, if the primary home language is other than English. Specifically, some student records did not evidence translated Team Meeting Invitation (N3) forms or translated special education progress reports. |
| **Description of Corrective Action:** 1. Meeting was held with the ETLs to discuss the CPR findings on July 22, 2014. 2. Leigh Ann Carbone, Director of Special Ed. met with the special education teachers on August 27th and August 28th to review the CPR findings and advise them that any time it is noted on the IEP that a language other than English is spoken at home, all documents will need to be translated. These include meeting notices, IEPs, N.1 notes, progress reports and evaluations. The teachers were notified to contact Joanne Moran, Administrative Assistant, when they are in need of a translation, and she will assist them.3. ETLs were reminded to contact Joanne Moran, Administrative Assistant, for all translations at meeting on 9/22/14. ETLs were also asked to submit a list of all students in their buildings who require translations to the director to ensure compliance. |
| **Title/Role(s) of Responsible Persons:**Leigh Ann Carbone, Director of Special EducationEvaluation Team Leaders | **Expected Date of Completion:**09/22/2014 |
| **Evidence of Completion of the Corrective Action:**Agendas, attendance sheets |
| **Description of Internal Monitoring Procedures:** The director of special education and the ETLs will review 10 files of students who are identified as having a primary home language other than English to determine if all documents were translated. This will occur before the end of February 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**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 18, 2014, submit evidence of ETL and special education teacher training on the protocols for providing translations and the tracking log/list maintained by the Director of Special Education. In addition, for the individual student records identified by the Department, provide evidence of the required translated documents. By February 23, 2015, submit a report of the results of an internal review of records in which notices and/or progress reports were written subsequent to implementation of all corrective actions, and include the following: 1) The number of student records reviewed; 2) The number of records in compliance; 3) For any records not in compliance, determine the root cause(s) of the non-compliance; and 4) 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 role(s) and signature(s). |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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| **Criterion & Topic:** SE 32 Parent advisory council for special education | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Parent and staff interviews indicated that the parent advisory council (PAC) is not regularly participating in the planning, development and evaluation of the district's special education programs. |
| **Description of Corrective Action:** 1. Leigh Ann Carbone, Director of Special Ed. met with the PAC on September 10th to discuss the findings of the CPR. The members of the PAC were asked to provide input as to how they would like to be included in the planning, development and evaluation of the district's special education programs. With their participation, a survey regarding satisfaction with special education programs will be developed and sent to all parents of students on an IEP by the end of November. The results will be reviewed by the director and the PAC to identify common themes and discuss next steps. 2. Leigh Ann Carbone, Director of Special Ed., will continue to attend the monthly PAC meetings in an effort to foster communication and participation of PAC members in decisions regarding special education programs. |
| **Title/Role(s) of Responsible Persons:**Leigh Ann Carbone, Director of Special Education | **Expected Date of Completion:**02/28/2015 |
| **Evidence of Completion of the Corrective Action:**Agendas, attendance, survey |
| **Description of Internal Monitoring Procedures:** Follow-up survey in June 2015 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 18, 2014, submit evidence of PAC participation in the planning, development and evaluation of the district's special education programming. Include a copy of the parent survey that was collaboratively developed with the PAC and Director of Special Education. By February 23, 2015, submit a summary of the survey results, conclusions reached, and supporting evidence of follow-up PAC meetings or collaboration in which planning, development, or evaluation of programming was discussed with the Director of Special Education. |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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| **Criterion & Topic:** SE 54 Professional development | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that all professional and paraprofessional staff members are not regularly trained on the following: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; andMethods 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:** 1. Training on the State and federal special education requirements and related local special education policies and procedures was provided to all staff on opening day, August 26, 2014, by Atty. Matt MacAvoy. 2. A specific calendar of PD and collaboration meetings has been developed to ensure collaboration at all levels. |
| **Title/Role(s) of Responsible Persons:** Leigh Ann Carbone, Director of Special EducationGregg Gilligan, Assistant Supt. | **Expected Date of Completion:**06/16/2015 |
| **Evidence of Completion of the Corrective Action:** Powerpoint, PD calendar, attendance sheets, My Learning Plan |
| **Description of Internal Monitoring Procedures:** Review of attendance records for all PD and collaboration blocks. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 54 Professional development | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 18, 2014, submit the dated meeting agenda, attendance sheet, and training materials from the district's all staff training held on opening day. In addition, provide the district's planned dates for all staff training on 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. By February 23, 2015, submit evidence of all staff training on 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. |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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| **Criterion & Topic:** SE 55 Special education facilities and classrooms | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Observations and interviews indicated that special education classrooms are not equal in all physical respects to average standards of general education facilities and classrooms. Specifically, at the Kittredge Elementary School, the substantially separate special education classrooms are not fully integrated into the life of the school and are isolated from regular education programming due to the location in a separate wing in the basement. The designated space for occupational therapy and speech therapy is a small shared office adjacent to the loud gymnasium, which is only accessible by stairs, has concurrent instruction occurring with as many as five students and, due to distractions, services are sometimes conducted in the hallway or library while other students are present. There is no designated space for physical therapy; therefore, physical therapy services take place in the hallway, which does not allow for confidentiality. In addition, a special education resource room is located in a small space that is separated from any other classrooms and is situated directly across from the kitchen and cafeteria/gymnasium with many auditory distractions. At the Sargent Elementary School, there is a cluster of five special education classrooms in one wing of the building that are not immersed into the life of the school. While there are kindergarten classrooms located in the same hallway, the special education classrooms are all located together serving students K-5. In addition, a special education resource room is located in a small shared space with English language learner (ELL) instruction; there are up to ten students receiving concurrent services with a movable partition that does not allow for confidentiality or minimize auditory distractions. There is no designated space for physical therapy at the high school and services are delivered in a hallway, which does not allow for confidentiality. |
| **Description of Corrective Action:** The district is working with the facilities manager to look at the master plan in order to further address the space issues brought forward in this report.A new gymnasium was built at the Kittredge School, limiting the use of the cafeteria to lunch periods. This has greatly reduced the noise level except for lunch blocks. The schedule has been arranged to allow the OT and SLP to take their prep period and lunch during the lunch blocks. They will not see children at that time. The OT and SLP overlap schedules on one day only. During that day, they service children who require both services collaboratively. There are no students who have mobility issues at this time, but should the need arise, services would be delivered in one of the available open classrooms where the teacher would be taking a prep.The TIP program at the Kittredge school is not a substantially separate classroom, but is an inclusion model. The TIP space is located on the ground level that also houses a regular education classroom and the library.Physical Therapy at the Kittredge is delivered in the cafeteria during periods that it is not in use.The special education resource room that is across from the kitchen is on the same wing as the K-2 classrooms. The schedule has been arranged so that the special ed teacher has her prep and lunch during the lunch blocks. Students are not serviced in the resource room during lunch blocks.The Sargent School has moved the Learning Skills program for students in grades 3-5 to the second level of the building to include them with age-appropriate peers. The special education resource room and ELL share a full classroom that is separated by a divider. The ELL teacher is only in the building from 11:45-1:20. The schedule has been arranged so that there are no more than 5 students total in the room at any given time. The special ed teacher services only one or two students maximum during the shared time. The ELL teacher services up to a max of 4 students at a time. They overlap for a total of 5 students for one block of time only. Physical Therapy at the high school will be delivered in one of the open trainer rooms located next to the gymnasium to ensure privacy. |
| **Title/Role(s) of Responsible Persons:**Leigh Ann Carbone, Director of Special EducationGregg Gilligan, Asst. Superintendent Principals | **Expected Date of Completion:**09/02/2014 |
| **Evidence of Completion of the Corrective Action:**Teacher and specialists' schedulesFloor plan |
| **Description of Internal Monitoring Procedures:** Review of teacher and specialists' schedules by the end of February 2015 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 18, 2014, provide a detailed floor plan for the Kittredge School indicating the location of the classroom and related service spaces found inequitable and note the general education classrooms that surround them. In addition, submit the instructional groupings for OT and speech therapy, copies of the schedules for the OT, PT, SLP, and resource room teacher, and the Therapeutic Intervention Program (TIP) roster along with student schedules evidencing participation in inclusion classes. Provide a detailed floor plan for the Sargent School indicating the relocation of classroom spaces and submit instructional groupings and teacher schedules for the ELL and special education resource classes. Provide a detailed floor plan for the high school indicating the designation of space for physical therapy. The Department will conduct site visits prior to February 23, 2015. |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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| **Criterion & Topic:** CR 3 Access to a full range of education programs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review indicated that the district's policy regarding access to a full range of education programs does not include homelessness as a protected category. |
| **Description of Corrective Action:** All policies affected will be reviewed on October 16, 2014, a regularly scheduled School Committee Meeting to include the words, "housing status," as a protected category. A vote to adopt the corrected policies will be taken at the School Committee Meeting on November 6, 2014. |
| **Title/Role(s) of Responsible Persons:**Kevin Hutchinson, Superintendent | **Expected Date of Completion:**12/05/2014 |
| **Evidence of Completion of the Corrective Action:**The new policy will be published with the words, "housing status," included as a protected category. The revision/approval date will be noted on the published policy and submitted as evidence, as well as the School Committee minutes wherein the policies were reviewed and adopted. |
| **Description of Internal Monitoring Procedures:** The revised policy will be disseminated to all schools, and Principals will review the policies with their staff at their regularly scheduled monthly staff meetings. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit a copy of the updated policy regarding access to a full range of education programs along with evidence of the provision to staff and students. |
| **Progress Report Due Date(s):** 11/18/2014 |

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| **Criterion & Topic:** CR 7 Information to be translated into languages other than English | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that important information and documents being distributed to parents, such as handbooks and codes of conduct, are not translated into the major languages spoken by parents or guardians with limited English skills, and district recruitment and promotional materials being disseminated to residents in the area served by the district are not translated into the major languages spoken by residents with limited English skills. In addition, the district does not have an established system of oral interpretation to assist parents/guardians with limited English skills, including those who speak low-incidence languages. |
| **Description of Corrective Action:** Home Language surveys will be reviewed to insure that school information is being translated and sent home in the parent/guardian(s) native language as requested. The district will work with the Director of Personnel to insure that recruitment materials are available in major languages spoken by residents with limited English Skills. |
| **Title/Role(s) of Responsible Persons:**Gregg Gilligan, Assistant Superintendent | **Expected Date of Completion:**06/15/2015 |
| **Evidence of Completion of the Corrective Action:**The district is working with the Web Master to provide a translation tool on the District's website. A list of translation services has been compiled by the ELL Coordinator for those sensitive documents which need a verbatim translation of a low-incidence language. |
| **Description of Internal Monitoring Procedures:** The district will work with the ELL Coordinator to insure that all requests for translation of documents are fulfilled. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Partially Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:** The district indicated that the ELL Coordinator and Assistant Superintendent will review and ensure that school information is translated as necessary based upon results of the home language surveys. The district also noted that the webmaster is working to provide a translation tool on the district's website. The district did not, however, indicate how staff will be informed of the district's protocol for translations and did not provide a description of its system of oral interpretation to assist parents with limited English skills. |
| **Department Order of Corrective Action:**Indicate how staff will be informed of the district's protocol for translations and develop a system of oral interpretation to assist parents with limited English skills, which includes procedures to be followed and the names and roles of staff involved in the process. |
| **Required Elements of Progress Report(s):** Provide the tracking log to be used by the ELL Coordinator and Assistant Superintendent to ensure translated documents are provided, as necessary. In addition, submit evidence of translated documents to include handbooks and codes of conduct. Also provide a status update for the translation tool on the district's website. Provide a description of the district's system for oral interpretation to assist parents with limited English skills and provide evidence of staff notification on the district's protocol for translations. |
| **Progress Report Due Date(s):** 11/18/2014 |

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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 indicated that the district's policy regarding access to extracurricular activities does not include homelessness as a protected category. |
| **Description of Corrective Action:** All School Committee policies regarding the accessibility of extracurricular activities will be revised to include "housing status" as a protected category. The revised policies will be introduced at the October 16, 2014 School Committee meeting and will be voted on at the November 6, 2014 School Committee Meeting. |
| **Title/Role(s) of Responsible Persons:**Kevin Hutchinson, Superintendent | **Expected Date of Completion:**12/05/2014 |
| **Evidence of Completion of the Corrective Action:**The revised policies will be provided to the DESE, along with the School Committee Minutes approving the revised policies. The policies will be disseminated to all staff. |
| **Description of Internal Monitoring Procedures:** The Building Principals will discuss the revised policies at their regularly scheduled monthly staff meetings. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit a copy of the updated policy regarding access to extracurricular activities along with evidence of the provision to staff and students. |
| **Progress Report Due Date(s):** 11/18/2014 |

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

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| **Criterion & Topic:** CR 9 Hiring and employment practices of prospective employers of students | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review indicated that the district's Employer Confirmation Statement, which is the statement that employers of students sign to assure compliance with federal and state laws prohibiting discrimination in hiring or employment practices, does not include gender identity as a protected category. |
| **Description of Corrective Action:** The Employer Confirmation Statement will be revised to show that "gender identity" is a protected category in compliance with federal and state laws prohibiting discrimination in hiring or employment practices. |
| **Title/Role(s) of Responsible Persons:**Steve Nugent, H.S. Guidance Dept. Chair | **Expected Date of Completion:**12/05/2014 |
| **Evidence of Completion of the Corrective Action:**The actual Employer Confirmation Statement will be provided to the DESE indicating that "gender identity" as a protected category in its anti-discrimination statement. |
| **Description of Internal Monitoring Procedures:** The continued use of the revised Employer Confirmation Statement. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Provide a copy of the updated Employer Confirmation Statement along with evidence of provision to prospective employers of students. |
| **Progress Report Due Date(s):** 11/18/2014 |

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

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| **Criterion & Topic:** CR 11A Designation of coordinator(s); grievance procedures | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the district has not designated a staff person to serve as its Title II Coordinator. |
| **Description of Corrective Action:** School Committee Policy ACE (Nondiscrimination on the Basis of Handicap) will be revised to indicate that the Assistant Superintendent will be designated as the district's Title II Coordinator. The policy will be reviewed by the School Committee on October 16, 2014, and voted on at the School Committee's regularly scheduled meeting on November 6, 2014. |
| **Title/Role(s) of Responsible Persons:**Kevin Hutchinson, Superintendent | **Expected Date of Completion:**12/05/2014 |
| **Evidence of Completion of the Corrective Action:**The Minutes of the above-referenced School Committee meeting will be provided, as well as revised Policy ACE. The appointment of the Assistant Superintendent as the Title II Coordinator will be discussed at monthly building staff meetings, and Principals will provide sign-off sheets to indicate that staff were informed of the new policies. |
| **Description of Internal Monitoring Procedures:** In addition to reviewing the revised policies at building staff meetings, all policies are reviewed every year at the beginning of the school year. School Committee policies are available on the District's website under School Committee. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 11A Designation of coordinator(s); grievance procedures | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Provide evidence of the designation of the Assistant Superintendent as the district's Title II Coordinator along with evidence of staff notification. |
| **Progress Report Due Date(s):** 11/18/2014 |

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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 indicated that the district's notice for parents and students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion does not state that the student and the parent or guardian may meet with a representative of the district within ten days from the date the notice was sent. In addition, the district's annual notice to former students, who have not yet earned their competency determination and who have not transferred to another school, does not inform them of the availability of publicly funded post-high school academic support programs and encourage participation in those programs. |
| **Description of Corrective Action:** A new Notice to parents and students 16 and over who have dropped out of the high school without a diploma, certificate of attainment or completion will be sent to those parents/guardians and students. |
| **Title/Role(s) of Responsible Persons:**Steve Nugent, H.S. Guidance Department Chair | **Expected Date of Completion:**12/05/2014 |
| **Evidence of Completion of the Corrective Action:**A copy of the notice will be provided to the DESE. |
| **Description of Internal Monitoring Procedures:** Copies of all letters sent by the Guidance Department to families of students 16 and over who have dropped out of the high school without a diploma, certificate of attainment or completion will be sent to the Superintendent of Schools informing them of the availability of publicly funded post-high school academic support programs. |
| 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:** Partially Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:** The district indicated that it will send a new notice to parents and students 16 or over who have left school without a high school diploma, certificate of attainment, or certificate of completion. The district did not, however, differentiate between notices that should be sent to students who have left school. For currently enrolled students, notice must be sent within ten days from a student's fifteenth consecutive unexcused absence to parents and students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion stating that the student and the parent or guardian may meet with a representative of the district within ten days from the date the notice was sent. Annual notice should be sent to former students, who have not yet earned their competency determination and who have not transferred to another school, informing them of the availability of publicly funded post-high school academic support programs and encouraging participation in those programs. In addition, the district did not indicate how it will notify staff of these requirements. |
| **Department Order of Corrective Action:**Develop a notice to parents and current students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion stating that the student and the parent or guardian may meet with a representative of the district within ten days from the date the notice was sent. Develop another notice to be sent annually to former students, who have not yet earned their competency determination and who have not transferred to another school, informing them of the availability of publicly funded post-high school academic support programs and encouraging participation in those programs. Provide training to high school guidance staff and administration on the requirements of the two notices. |
| **Required Elements of Progress Report(s):** Submit copies of the two notices and a timeline for distribution of these letters. In addition, submit evidence of training on notice requirements for high school guidance staff and administration. |
| **Progress Report Due Date(s):** 11/18/2014 |

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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:** Observations and staff interviews indicated that the district is not providing English language learner (ELL) students with facilities comparable to those provided to the overall student population. At the Franklin Elementary School, the ELL instructional space is located in a small office that was previously designated as a storage space with no windows and no ventilation and there can be up to five students at one time creating an overcrowded work area. At the Kittredge Elementary School, ELL students do not have materials and resources accessible to them and the instructional space is located in a basement storage space with dim overhead lighting, no windows, little ventilation, and is only accessible through the kindergarten classroom. At the Atkinson Elementary School, ELL instruction for all grade levels occurs in a shared kindergarten classroom that has many auditory distractions. See also SE 55. |
| **Description of Corrective Action:** The district is working with the facilities manager and principals to look at the master plan in order to further address the space issues brought forward in this report. We will be looking to provide adequate space by examining current teacher and specialists' schedules (including prep periods when classrooms are available). Additionally, we will be working with the Assistant Superintendent for Finance and Operations to investigate modifications that will remedy the aforementioned space needs. |
| **Title/Role(s) of Responsible Persons:**Relevant School PrincipalsGreg Landry, Atkinson; Joe Clarke, Franklin; Richard Cushing, Kittredge | **Expected Date of Completion:**01/02/2015 |
| **Evidence of Completion of the Corrective Action:** Service delivery in an appropriate and comparable educational space will be made available for ELL students. |
| **Description of Internal Monitoring Procedures:** The initial meeting regarding this matter took place on September 29, 2014. This will be followed by additional meetings with an expected completion date of December 5, 2014. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 23 Comparability of facilities | **Corrective Action Plan Status:** Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 18, 2014, provide detailed floor plans for the Franklin, Kittredge, and Atkinson Elementary Schools, and note the general education classrooms that surround them. Also submit the ELL instructional groupings. For the Kittredge Elementary School, provide the list of resources and materials available to the ELL students.The Department will conduct site visits prior to February 23, 2015. |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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

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| **Criterion & Topic:** CR 24 Curriculum review | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the district does not ensure that individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. |
| **Description of Corrective Action:** We are in the process of revising our procedures to insure that the curriculum review will take place on an annual basis. |
| **Title/Role(s) of Responsible Persons:**Building Principals and Staff | **Expected Date of Completion:**01/31/2015 |
| **Evidence of Completion of the Corrective Action:**A sign off sheet will indicate that review has taken place in each building. |
| **Description of Internal Monitoring Procedures:** District Leadership meeting to review Criterion 24 and insure review completion. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Partially Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:** The district indicated that it is in the process of revising its procedures for ensuring curriculum review and that curriculum review will occur in each school building; however, it did not give any details about the procedures to be followed. |
| **Department Order of Corrective Action:**Develop specific procedures to be followed for ensuring 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.Provide teacher training on the procedures to be followed for ensuring 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. |
| **Required Elements of Progress Report(s):** Provide a detailed description of the procedures to be followed for ensuring 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.Submit copies of meeting agendas, attendance sheets, and training materials as evidence of teacher training on the procedures to be followed for ensuring 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. |
| **Progress Report Due Date(s):** 11/18/2014 |

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

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| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** Document review and 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. |
| **Description of Corrective Action:** The district will update procedures for Institutional self-evaluation to include all aspects of its K-12 program as enumerated above. |
| **Title/Role(s) of Responsible Persons:**Administration and Staff | **Expected Date of Completion:**08/15/2015 |
| **Evidence of Completion of the Corrective Action:** Copy of updated procedures. |
| **Description of Internal Monitoring Procedures:** A checklist will be used prior to the publication of the new procedures to insure that all aspects of its K-12 program have been addressed. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:** The district indicated that it will update its procedures for evaluating all aspects of its K-12 programming, but it did not provide any detailed plans for an annual evaluation of programming 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. Also, the district did not provide an internal monitoring plan indicating staff members who will oversee the annual evaluation. |
| **Department Order of Corrective Action:** Develop detailed plans for the district's annual evaluation of programming 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. Indicate the district's internal monitoring plan and include the name and roles of staff members involved, planned meetings, etc. for ensuring that an institutional evaluation of all district programming is completed to ensure equal access for all students. |
| **Required Elements of Progress Report(s):** By November 18, 2014, submit detailed plans for the district's annual evaluation of programming 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. Include a description of the district's internal monitoring plan, including the name and roles of staff members involved, planned meetings, etc. for ensuring that an institutional evaluation of all district programming is completed. By February 23, 2015, provide a copy of the institutional self-evaluation. |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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

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| **Criterion & Topic:** CR 26A Confidentiality and student records | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Record review indicated that the district does not maintain logs of access in special education or English learner education student records. |
| **Description of Corrective Action:** The ELL Coordinator will attach a log to each ELL student record. |
| **Title/Role(s) of Responsible Persons:**Marion Mako, ELL Coordinator | **Expected Date of Completion:**12/05/2014 |
| **Evidence of Completion of the Corrective Action:**A copy of the log. |
| **Description of Internal Monitoring Procedures:** A review of all ELL student files to insure that access logs have been completed. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 26A Confidentiality and student records | **Corrective Action Plan Status:** Partially Approved **Status Date**: 10/20/2014 |
| **Basis for Decision:** The district indicated that the ELL Coordinator will attach logs of access to all ELL student records and will review all files to ensure logs have been completed, but the district did not note that it would do so for special education student records. |
| **Department Order of Corrective Action:**Develop logs of access for special education student records and attach to all files. Also, develop an internal monitoring plan for ensuring each special education student record has a log of access. |
| **Required Elements of Progress Report(s):** By November 18, 2014, submit sample copies of logs of access for special education and ELL student records. Also, submit a description of the internal monitoring plan for ensuring that special education student records have logs of access.By February 23, 2015, submit a report of the results of an internal review of records to ensure that logs of access are maintained for special education and ELL student records, and include the following: 1) The number of student records reviewed; 2) The number of records in compliance; 3) For any records not in compliance, determine the root cause(s) of the non-compliance; and 4) 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 role(s) and signature(s). |
| **Progress Report Due Date(s):** 11/18/201402/23/2015 |

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

District: North Andover Public Schools

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: North Andover Public Schools/Marion Mako

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: December 8, 2015**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 3 Initial Identification | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Review of records, documentation, and staff interviews indicated that the district is not using appropriate procedures and assessments to identify students who may be English language learners. Specifically, the district does not consistently screen incoming students using a home language survey and an initial English proficiency assessment for reading, writing, speaking, and listening.* |
| **Narrative Description of Corrective Action:** The North Andover IT staff has been asked to include the home­language survey with the online registration forms using the survey template on the MA DESE website that is available in multiple languages. The completed forms will be reviewed by our ELE Coordinator, Marion Mako.W­APT has been used the last two years to assess all new incoming students who may be English language learners. If the student has ACCESS data from a previous school, that data will be used to determine placement and services. The district will use qualified staff and appropriate procedures and assessments to identify students who are ELLs . Their English proficiency is assessed in reading, writing, speaking and listening. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator  | **Expected Date of Completion for Each Corrective Action Activity:** 2/23/2015 |
| **Evidence of Completion of the Corrective Action:** The home­language survey is attached and the link is now available to parents as they complete the online registration forms. The district is already using the W­APT and will continue to review the ACCESS data from previous schools for placement purposes as well as services.  |
| **Description of Internal Monitoring Procedures:** The ELE Coordinator will meet with the ELE tutors during scheduled in­service days. ELE record reviews, work samples, and data for ELE students will used to measure student progress. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 3 Initial Identification | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Not Applicable |
| **Department Order of Corrective Action:** Not Applicable |
| **Required Elements of Progress Report(s):** **By May 15, 2015,** submit a roster of incoming students by grade level whose parents indicated a home language other than English; identify on this roster the number of those students who were found to need English Language Education and their proficiency level. This roster should include only students who have enrolled since January 2015.**By October 1, 2015**, conduct an internal review of 10 student records to ensure that WAP-T assessment data in all four domains and/or previous ACCESS data and levels of proficiency are documented and included in the student record. Report the number of ELE records reviewed at each level and the number that contained the students’ level of proficiency. If any non-compliance is identified, the district will report the root cause and its proposed plan of action to remedy each student record reviewed. **\*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 role(s) and signature(s).** |
| **Progress Report Due Date(s): May 15, 2015; October 1, 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:** Not Implemented |
| **Department CPR Finding:** *See ELE 10 regarding the content of the parent notification letter.* |
| **Narrative Description of Corrective Action:** The district will use the DESE Waiver and the waiver forms will be made available in the appropriate languages. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator  | **Expected Date of Completion for Each Corrective Action Activity:** 2/23/2015 |
| **Evidence of Completion of the Corrective Action:** The completed DESE Waivers from ELE students will be kept in the ELL students’ folders in their cumulative files.  |
| **Description of Internal Monitoring Procedures:** Files will be reviewed for students whose parents opt out to ensure they contain the new waiver. |
| 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 [x]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Although the district submitted proposal to utilize DESE Waiver forms, the Department’s finding is based on the content of the initial and annual parent notice. Please note the district appears to have confused the waiver process with opting out. A waiver requires the district has established more than one language support program for parents to choose from. A parent who has opted a student out of ELE has rejected the option of enrolling the student in the district’s English language program. |
| **Department Order of Corrective Action:**  See Department Order of Corrective Action for ELE 10. |
| **Required Elements of Progress Report(s):** See Required Elements of Progress Reporting for ELE 10. |
| **Progress Report Due Date(s): May 15, 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:** *A review of documentation and staff interviews indicated that current hours of ESL instruction ELLs at proficiency levels one and two receive are insufficient are, 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* |
| **Narrative Description of Corrective Action: ELE 5 ­ Program Placement and Structure –** The district uses assessment data to plan and implement educational programs for students at different instructional levels. The district places ELL students in Sheltered English Immersion classrooms. SEI has two components, English as a Second Language (ESL) instruction and sheltered content instruction. The district provides ELL students with content instruction and ESL instruction that is aligned to the 2011 Massachusetts Curriculum Frameworks and integrates WIDA English Language Development (ELD) Standards.Students are being placed with SEI trained teachers, or teachers taking the SEI course. Merrimack College Fellows are strategically placed to provide additional support for ELL students.Currently students at the elementary schools receive the following ­ Level 3­ receive 45 minutes a day Level 4­receive 45 minutes a day Level 5­ receive 45 minutes a dayLevel 1 ­2 students receive 45 minutes a day with their grade level. They are also serviced with a group one grade level below, or above, when possible. At Atkinson two level 1­2 students participate in the grade 3 and grade 4 group. One newcomer is in 3 groups ­ grades 2, 3 and 4. At Franklin two level 1­2 students participate in a grade 1 and grade 2 group for a total of 1.5 hours a day. Students also receive reading support or early literacy support for 45 minutes a day.At the HS students receive 60 minutes of ESL support in addition to MCAS support and academic support through the TEAM program. Also, a certified ESL teacher has been hired to provide an additional four hours to work with Level 1 students. Students are also placed in cooperative games, food prep and other courses that facilitate the learning of basic interpersonal communications skills (BICS) before being placed in classes with a high academic language demand. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator, Building Principals, ELE Tutors  | **Expected Date of Completion for Each Corrective Action Activity:** June 2015 for next school year  |
| **Evidence of Completion of the Corrective Action:** Student schedules will reflect the changes made.  |
| **Description of Internal Monitoring Procedures:** Students schedules will be included in their ESL folder in their cumulative file. |
| 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 [x]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** The district did not propose a corrective action plan to remedy the identified noncompliance. The district should note that ESL instruction can only be delivered by ESL licensed teachers and reading/literacy support or the support provided by Merrimack College Fellows cannot replace the ESL instruction ELLs need to demonstrate proficiency of English language and can effectively participate in grade level content instruction. |
| **Department Order of Corrective Action:** N/A |
| **Required Elements of Progress Report(s):** 1. Please provide a detailed plan that shows that the district is providing sufficient ESL instruction to ensure the rapid acquisition of English to all ELL students during the 2014-2015 school year. Please see the Department's Transitional Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners found at <http://www.doe.mass.edu/ell/TransitionalGuidance.pdf> for assistance.
2. Please complete district information in the attached spreadsheet labeled ELL List by school for each ELL student in the district.
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| **Progress Report Due Date(s): May 15, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 6 Program Exit and Readiness | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews with the staff indicated that sometimes ELLs at English proficiency level 3 can be reclassified as Former Limited English Proficient (FLEP) although ELLs at this proficiency level require significant support to participate meaningfully in all aspects of the district’s general education program and therefore, should not be considered for reclassification.. The school’s current practice for reclassifying ELLs as Former Limited English Proficient (FLEP) is not consistent 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) |
| **Narrative Description of Corrective Action:** Scores are carefully examined in June, and each domain (listening, speaking, reading, and writing) is reviewed and evaluated separately. Other scores such as GRADE, DIBELS, MCAS and other DDMs are also reviewed in addition to regular grade­level subject grades. The staff takes into account the scores were from January and not from the end of the school year. Many students show great progress in the second half of the school year and are not at the level of their January testing anymore. (See attached).Students won’t be recommended to exit unless they achieve an overall score on ACCESS for ELLs of at least 5 (bridging), along with a composite ACCESS for ELLs’ literacy score (reading and writing above 4.0). In addition to ACCESS for ELLs’ test scores, the district will evaluate and consider other evidence of the students’ performance in making decisions about reclassification of a students as non­ELL. Scores from locally administered diagnostic reading, language, and other academic assessments, the students’ academic classroom performance and grades, the written observations and recommendations documented by the students’ classroom teachers and the students’ performance on other MCAS content area tests will be taken into consideration.The district does not limit or cap the amount of time in which an ELL student can remain in a language support program. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator  | **Expected Date of Completion for Each Corrective Action Activity:** 6/2015 |
| **Evidence of Completion of the Corrective Action:** Completion of DESE exit criteria sheet completed for each student at the end of the academic school year to inform placement for the next academic school year.  |
| **Description of Internal Monitoring Procedures:** Exit procedures checklist will be in ELL folders.  |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 6 Program Exit and Readiness | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Districts can evaluate and consider other evidence of students’ performance in making decisions about reclassifications **in addition to** the exit criteria that has been provided in the *“Transitional Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners August 2013”.*  |
| **Department Order of Corrective Action:** N/A |
| **Required Elements of Progress Report(s):** Please submit a description of the district’s reclassification procedures as well as supporting documents such as annual review forms for all reclassified students for the SY 2014-15. |
| **Progress Report Due Date(s): May 15, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 7 Parent Involvement | **Rating:** Not Implemented |
| **Department CPR Finding:** *Review of documentation and interviews indicated that the district has not developed ways to include parents or guardians of ELL students in matters pertaining to their children’s education and ELE programs. Specifically, the district has no established system for translation of documents which notify parents of special events or activities pertaining to their children and encouraging them to attend or participate in any school-based or parent advisory councils for English learner education, nor does the district have a set system for oral interpretation allowing for parent-teacher communication in other languages.* |
| **Narrative Description of Corrective Action:** The ELE Coordinator will meet with all new ELL parents to discuss student progress, establish relationships, and identify any barriers that may interfere with parents’ ability to fully participate in school activities. The HLS will have a box for checking if translation and/or translators are needed. All schools will give thought to establishing an ELL parent council and create outreach to involve ELL parents in PTO activities and other school wide activities. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator  | **Expected Date of Completion for Each Corrective Action Activity:** 6/2015 |
| **Evidence of Completion of the Corrective Action:**        |
| **Description of Internal Monitoring Procedures:** The ELE Coordinator will keep a log of parent meetings and translation requests in a synopsis of the meeting in ELL students’ files. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 7 Parent Involvement | **Status of Corrective Action:** [ ]  Approved [x]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Although the district proposes to have the ELE Coordinator meet with all new ELL parents to discuss student progress, establish relationships, and identify any barriers that may interfere with parent’s ability to fully participate in school activities, it does not address parents of students who are already enrolled in the ELE programs. Additionally, although the district notes that the HLS will have a box for translations and/or translators, the district does not specifically develop a procedure to ensure translation and interpretation for parents either with newly enrolled students or students already enrolled in the district who require these services. Finally, the district proposal that all schools will give thought to establishing an ELL parent council and create outreach to involve ELL parents is not sufficient. The district must provide multiple opportunities and a variety of methods for parent-teacher communication in all district schools.  |
| **Department Order of Corrective Action:** See Required Elements of Progress Reporting. |
| **Required Elements of Progress Report(s):** **By May 15, 2015,** provide the district’s variety of methods to engage parents of ELLs, such as PTO and school-based councils, availability of interpreters at school meetings, translated notices of school activities, and an ELL parent advisory council.**By May 15, 2015**, provide the district’s procedures to ensure that translations and interpretation are provided to parents who require them (based on the HLS). This procedure will also address outreach to parents of students who are currently enrolled who may need materials translated and translators. Ensure that all relevant staff have received training on these procedures, and submit evidence of that training, including a copy of the procedures, signed attendance sheets, and the name/role of the presenter.**By October 1, 2015,** submit evidence of the district’s methods to engage parents of ELLs, such as fliers or notices advertising school activities translated in the district’s major languages. **By October 1, 2015**, create a sample of approximately 10 students whose parents have indicated a need for translations and interpretation. Review this sample to ensure that translated documents and use of interpreters has been documented in student file. Report the number of records reviewed at each level and the number that contained evidence of translations and interpretation as required. If any non-compliance is identified, the district will report the root cause and its proposed plan of action to remedy each student record reviewed. **\*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 role(s) and signature(s).** |
| **Progress Report Due Date(s): May 15, 2015; October 1, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 8 Declining Entry to a Program | **Rating:** Not Implemented |
| **Department CPR Finding:** *Review of records, documentation and staff interviews indicated that the district does not provide English language support to students whose parents have declined entry to its sheltered English immersion program.*  |
| **Narrative Description of Corrective Action:** When district has a student whose parents refuse ELE services, a meeting is arranged with the guidance counselors and the ELE teacher to explain the program and answer any questions and/or concerns. If the parents still refuse ELE services, the student is assigned to a classroom with an SEI trained teacher and/or additional support staff. They will also be supported through reading or literacy interventions, or other services, if needed. The student will receive English language support. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator  | **Expected Date of Completion for Each Corrective Action Activity:** 2/15/2015 |
| **Evidence of Completion of the Corrective Action:** A log will be kept in the ELL students’ folders of the meeting date(s), participants, and outcome.  |
| **Description of Internal Monitoring Procedures:** Files will be reviewed at the beginning of the school year and in January to identify those students who may need additional support. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 8 Declining Entry to a Program | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Not Applicable |
| **Department Order of Corrective Action:** Not Applicable |
| **Required Elements of Progress Report(s):**  **By May 15, 2015**, create a sample of approximately 5-10 students whose parents have opted the student out of English learner education programming. Review this sample to ensure that communication with parents and evidence of student support and progress monitoring are in the file. Report the number of records reviewed at each level and the number that contained evidence of communication and support/monitoring as required. If any non-compliance is identified, the district will report the root cause and its proposed plan of action to remedy each student record reviewed. **\*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 role(s) and signature(s).** |
| **Progress Report Due Date(s): May 15, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 9 Instructional Grouping | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews and document review indicated that the district does not group ELLs in the district’s elementary schools by proficiency level for the purpose of ESL instruction.* |
| **Narrative Description of Corrective Action:** Students are grouped by grade level due to the intervention and literacy blocks scheduled school­wide at the elementary schools. This prevents the student from missing academic instruction at their grade level. the district only groups ELL students of different ages together in instructional settings if their levels of English proficiency are similar. The district’s grouping of students ensures that ELL students receive effective content instruction at appropriate proficiency level. ESL instruction is aligned to the Massachusetts Curriculum Frameworks and integrates components of the WIDA English Language Development (ELD) Standards.At the moment we have 20 students at the Atkinson; 7 at Franklin; 5 at Sargent; 19 at Thomson; and 3 at Kittredge Elementary Schools. *Avenues* is the curriculum that is being used in addition to other materials. *Avenues* has differentiations for each proficiency level available to the teacher. This summer the ELE staff would like to work on curriculum mapping and integrate the CCSS to better align the ESL curriculum with the CCSS curriculum at each grade level.We are a low incidence district of 68 students at 7 schools. Currently our groups average about 3 students per grade level at the elementary schools.We have 2­3 students per proficiency/grade level group at the MS for a total of 8 students and 4 students in grades 9­12 at the HS. |
| Instructional Groupings:High School ­three 9th grade students at level 1;two 11th grade students at level 3;Middle School ­ two students at level 1 (one 6th grader, one 8th grader); three students at level 2 (two 6th graders, one 8th grader); three students at level 3­4 (two 7th graders, one 8th grader)Franklin ­ No kindergarten students; Grade 1 ­ three students at level 1; one student at level 3; Grade 2 ­ one students at level 1; Grade 3 ­ two students at level 3;Sargent ­ No kindergarten students; Grade 1 ­ one student at level 1; Grade 2 ­ one student at level 2; one student at level 3; Grade 3 ­ three students at level 3;Atkinson ­ Kindergarten students are serviced in class; Grade 1 ­ two students at level 2; one student at level 1; Grade 2 ­ two students at level 2; one student at level 1 (third grader); Grade 3­ four students at level 1 (one is a 4th grader, same language); one student at level 2; one student at level 3; Grade 4 ­ two students at level 1; one student at level 3; Grade 5 ­ three students at level 3;Thomson ­ Kindergarten students are serviced in class; Grade 1 ­ six students at level 1; Grade 2 ­ two students at level 1, one student at level 2; Grade 3 ­ four students at level 3; Grade 4 ­ one student at level 4;Kittredge ­ Kindergarten students serviced in class; Grade 1 ­ two students at level l. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator, ELE Tutors, and Building Principals  | **Expected Date of Completion for Each Corrective Action Activity:** 9/2015 |
| **Evidence of Completion of the Corrective Action:** Student schedules and student unit scores will be kept in the ELL folders along with progress monitoring forms.  |
| **Description of Internal Monitoring Procedures:** Three times a year, at report card times, the progress of the students will be evaluated and a progress report will be send home with the report cards. It will also include the test grades of the Avenues curriculum units that have been completed.. A copy will be filed in the ELL folders as well. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 9 Instructional Grouping | **Status of Corrective Action:** [ ]  Approved [ ]  Partially Approved [x]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Appropriate instructional grouping is required to provide ESL instruction tailored to the students’ English language proficiency levels. The district did not propose a corrective action plan to remedy the identified noncompliance, but only provided information regarding the students’ grade levels and English language proficiency levels.  |
| **Department Order of Corrective Action:** N/A |
| **Required Elements of Progress Report(s):** Provide a copy of the 2014-15 ESL teacher schedules for all grade levels district wide.All schedules should include the following for each block of time: * + Names of the ELL students
	+ Grade level for each student;
	+ English proficiency level for each student
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| **Progress Report Due Date(s): May 15, 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:** *Review of records and documentation indicated that the parent notification letter does not inform parents of the following required elements:** *Program placement or the method of instruction used in the program;*
* *How the program will meet the educational strengths and needs of the student;*
* *How the program will specifically help the child learn English;*
* *The specific exit requirements;*
* *The parents’ right to apply for a waiver, or to decline to enroll their child in the program; and*
* *If the student has additional education needs that require special education services, how the Title III program will meet the objectives of the Individualized Education Plan (IEP).*
 |
| **Narrative Description of Corrective Action:** The district will use the online DESE template to inform the parent and also provide a translated copy if requested. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator, ELE Tutors  | **Expected Date of Completion for Each Corrective Action Activity:** 2/15/2015 |
| **Evidence of Completion of the Corrective Action:** Copies of parent notification letters will be kept in the ELL folders.  |
| **Description of Internal Monitoring Procedures:** ELE Coordinator will check and make sure all files at the 7 schools in the district have the checklist in the ELL folders and that all the appropriate items are in the ELL folders. |
| 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:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Not Applicable |
| **Department Order of Corrective Action:** Not Applicable  |
| **Required Elements of Progress Report(s):** **By May 15, 2015**, review a sample of approximately 5-10 students for evidence of newly adopted DESE template notice for parents in the files. Report the number of records reviewed at each level and the number that contained the new parent notice. If any non-compliance is identified, the district will report the root cause and correct each record to ensure 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 role(s) and signature(s).** |
| **Progress Report Due Date(s): May 15, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 11 Equal Access to Academic Programs and Services | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Staff interviews indicated that ELL students at the middle school do not have equal access to all academic programs and services. Due to middle school class scheduling, ELL students are missing core academic courses such as Language Arts, Mathematics, and Social Studies in order to receive language support services.* |
| **Narrative Description of Corrective Action:** The scheduling takes into account that when possible the Middle School ELL students should only miss social studies because of ESL pull­out. Due to the different rotating schedules of grades 6, 7 and 8 sometimes students will miss a few minutes of their academic block. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator, Building Principals  | **Expected Date of Completion for Each Corrective Action Activity:** 5/2015 |
| **Evidence of Completion of the Corrective Action:** Student schedules reflecting their pull­out time with the ESL specialist.  |
| **Description of Internal Monitoring Procedures:** A copy of the student’s current schedules will be kept in their ELL folders. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 11 Equal Access to Academic Programs and Services | **Status of Corrective Action:** [ ]  Approved [ ]  Partially Approved [x]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** The Department found that middle school ELLs were missing core academic courses such as Language Arts, mathematics, and Social Studies in order to receive language support services. The district’s proposal to schedule students ESL pull-out services only during Social Studies does not resolve ELL middle schools lack of equal access to all academic programs and services.  |
| **Department Order of Corrective Action:** The district will schedule ESL instruction for ELL middle school students so that this required instruction does not interfere with their equal access to core academic classes. |
| **Required Elements of Progress Report(s):** Submit a revised schedule for ELLs at the middle school demonstrating that ESL is not scheduled during any of the core academic subjects **due May 15, 2015.** |
| **Progress Report Due Date(s): May 15, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 13 Follow-up Support | **Rating:** Not Implemented |
| **Department CPR Finding:** *Review of records, documentation and staff interviews indicated that the district is not actively monitoring students who have exited an ELL program for two years.*  |
| **Narrative Description of Corrective Action:** Follow­up forms for years 1 and 2 are already developed, and we have tried to implement them with minimal success. Steps will be taken from here on to ensure that teachers return them to the ELE Coordinator for review after each grading period ­ 3 times a year. North Andover will use the forms developed by DESE to track student progress after they have been designated FLEP. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator  | **Expected Date of Completion for Each Corrective Action Activity:** 6/2015 |
| **Evidence of Completion of the Corrective Action:** DESE follow­up monitor forms will be used to track FLEP student progress for two years.  |
| **Description of Internal Monitoring Procedures:** ELE Coordinator will check and make sure that current progress monitoring forms are placed in the ELL student folders twice a year. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 13 Follow-up Support | **Status of Corrective Action:** [ ]  Approved [x]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** The district indicated that it has created follow-up forms for year 1 and year 2 of students who have met the FLEP criteria but will use the DESE student forms to track progress. However, the district notes that its prior implementation met with minimal success.  |
| **Department Order of Corrective Action:** Conduct training for ELL teachers and all relevant staff on the use of the follow-up monitoring forms based on the Department’s template. Develop an internal system of oversight to ensure that FLEP students are appropriately monitored for at least 2 years and the monitoring forms are maintained in the student record. The system should include periodic reviews by the ELL director or her/his designee. |
| **Required Elements of Progress Report(s):** **By May 15, 2015**, submit evidence of staff training, including an agenda, training materials, and signed attendance sheets, indicating name and role of staff.**By May 15, 2015,** submit a description of the oversight system for reviewing the development of appropriate monitoring plans, including the date of the system's implementation and the staff responsible for the oversight.**By October 1, 2015**, review a sample of approximately 5-10 FLEPPED students for evidence of monitoring follow-up. Report the number of records reviewed at each level and the number that contained the new parent notice. If any non-compliance is identified, the district will report the root cause and correct each record to ensure 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 role(s) and signature(s).** |
| **Progress Report Due Date(s): May 15, 2015; October 1, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 14 Licensure Requirements | **Rating:** Partially Implemented |
| **Department CPR Finding:** *District documentation and staff interviews indicated that not all district ESL teachers/tutors that provide students with ESL instruction hold an appropriate license or current waiver issued by the Massachusetts Department of Elementary and Secondary Education.* |
| **Narrative Description of Corrective Action:** The ESL teacher/tutors have the appropriate licenses. |
| **Title/Role of Person(s) Responsible for Implementation:** Building Principals  | **Expected Date of Completion for Each Corrective Action Activity:**       |
| **Evidence of Completion of the Corrective Action:** Copies of license or waiver  |
| **Description of Internal Monitoring Procedures:** All staff will have the appropriate license before they are hired. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 14 Licensure Requirements | **Status of Corrective Action:** [ ]  Approved [ ]  Partially Approved [x]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** The district did not propose a corrective action plan to remedy the identified noncompliance.  |
| **Department Order of Corrective Action:** N/A |
| **Required Elements of Progress Report(s):** Provide evidence of the licensure of the current ESL teacher(s) by the progress report due date. To the extent the teacher(s) who delivers ESL instruction is not yet licensed, provide a report of the program director’s monitoring of the teacher’s progress toward certification throughout the 2014-2015 school year until the licensure is secured. Subsequent to this progress report and the outcomes of reviewing ESL teacher licensure, a copy of any job posting and application information that may remain on file in the event the currently uncertified teacher fails to acquire proper certification by **October 1, 2015**. |
| **Progress Report Due Date(s): May 15, 2015; October 1, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 16 Equitable Facilities | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *Observations and staff interviews indicated that ELL instructional spaces at the Franklin Elementary School, Atkinson Elementary School, Kittredge Elementary School, and Sargent Elementary School are not comparable to the instructional spaces provided to other students. At the Franklin School, the ELL instructional space is located in a small office that was previously designated as a storage space with no windows or ventilation and there can be up to five students at one time in this very little space. At the Kittredge School, ELL students do not have materials and resources accessible to them; the instructional space is located in a basement storage space with dim overhead lighting, no windows, little ventilation, and is only accessible through the kindergarten classroom. At the Atkinson School, ELL instruction for all grade levels occurs in a shared kindergarten classroom that has many auditory distractions. At the Sargent School, the ELL instructional space is shared with a special education support class with instruction occurring concurrently creating many distractions.* |
| **Narrative Description of Corrective Action:***.* The Franklin, Kittredge, and Sargent Schools have relocated their ELL students to a more appropriate location. At the Atkinson School changes have been made in scheduling to reduce the amount of overlap of instructional time. The Atkinson ELL space will be looked at by the District’s Facilities Manager to determine if modifications can be made to the current location. |
| **Title/Role of Person(s) Responsible for Implementation:** Building Principals  | **Expected Date of Completion for Each Corrective Action Activity:**       |
| **Evidence of Completion of the Corrective Action:** DESE representatives will visit the facilities to determine the appropriateness of the new location.  |
| **Description of Internal Monitoring Procedures:** The district will continuously monitor ELL instructional space to insure that it is comparable to the instructional space provided to other students. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 16 Equitable Facilities | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval: Not Applicable** |
| **Department Order of Corrective Action:** The district has submitted detailed floor plans for the Franklin, Kittredge, and Atkinson Elementary Schools, noting the general education classrooms that surround them, and the ELL instructional groupings for these 3 schools under SE 55 and CR 23 via WBMS. For the Kittredge Elementary School, the district has provided a list of resources and materials available to the ELL students for CR 23, also submitted in WBMS. A Department representative conducted a comprehensive site visit to the district on January 16, 2015 to review the corrective actions. |
| **Required Elements of Progress Report(s): See SE 55 and CR 23.** |
| **Progress Report Due Date(s): See SE 55 and CR 23.** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 17 Program Evaluation | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Review of documentation and staff interviews indicated that the district has not conducted periodic evaluations of the effectiveness of its ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the educational program.* |
| **Narrative Description of Corrective Action:** The ELE Program Coordinator and ELE tutors review the annual ACCESS data every June to make sure that adequate progress is being made by all students. Placement decisions are discussed at the end of the school year to plan for the next year. No formal reports have been written up but in the future, the district will begin an annual review of the student data using ACCESS scores, MCAS data and other district common assessment data. This has been done in the past, but not on a consistent or annual basis. A formal report will be published. Where the district documents that the program is not effective, it will take steps to make appropriate program adjustments or changes that are responsive to the outcomes of the program evaluation. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator and building principals  | **Expected Date of Completion for Each Corrective Action Activity:** 7/1/2015 |
| **Evidence of Completion of the Corrective Action:** Completed annual review  |
| **Description of Internal Monitoring Procedures:** The district review at the end of each school year will be scheduled with ELE tutors and the ELE Coordinator. |
| 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 [x]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** The district’s proposed corrective action is not sufficiently detailed to constitute a plan of action. |
| **Department Order of Corrective Action:** Review the Department’s evaluation model at <http://www.doe.mass.edu/ell/resources.html> (District ELE Program Evaluation). Using the Department’s form as guidance, developed a detailed evaluation plan that includes data collection, data analysis, goal/task setting and associated timelines.  |
| **Required Elements of Progress Report(s):** **By May 15, 2015,** submit a revised ELE program evaluation plan as described in the Department’s Order of Corrective Action. **By October 1, 2015**, submit evidence of data analysis from the evaluation’s implementation, along with projected programming changes based on this evidence.  |
| **Progress Report Due Date(s): May 15, 2015; October 1, 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 records indicated that ELL student records do not consistently contain all of the required documentation. All records do not include the following elements:* * *home language survey*
* *results of identification and proficiency tests and evaluations*
* *MCAS*
* *information about students’ previous school experiences*
* *copies of parent notification letters*
* *progress reports and report cards in the native language, if necessary*
* *evidence of follow-up monitoring, if applicable*
 |
| **Narrative Description of Corrective Action:** The ELE Program Coordinator has addressed this with the ELE staff, and more accurate records will be kept. Each student will have a separate ELL folder as part of their cumulative folder with the DESE checklist attached to it. The missing data has been MCAS results and report cards. These are in the students’ cumulative folders but not in a separate ELL folder. Home language surveys will now be included with the online registration forms and a copy of this will be kept with the new ELL student folder as part of the file. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Coordinator  | **Expected Date of Completion for Each Corrective Action Activity:** 7/1/2015 |
| **Evidence of Completion of the Corrective Action:** Completed ELL folders in the students’ cumulative folders will be maintained  |
| **Description of Internal Monitoring Procedures:** ELL student files will be continually updated with current information and reviewed in September and January by the ELE Coordinator to insure the documents mentioned above are included. |
| 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:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Not Applicable  |
| **Department Order of Corrective Action:** Not Applicable |
| **Required Elements of Progress Report(s):** **By October 1, 2015**, conduct an internal review of approximately 10 ELL student files representative of the district’s elementary, middle, and high schools. Review each record to ensure that it contain copies of home language survey, results of identification and proficiency tests and evaluations, MCAS, information about students’ previous school experiences when available, copies of parent notification letters, progress reports and report cards in the native language, if necessary and evidence of follow-up monitoring if applicable*.* Additionally, please review each record to ensure that ELL families have received information in their primary language, should they require it. Report the number of records reviewed at each level and the number that contained the new parent notice. If any non-compliance is identified, the district will report the root cause and correct each record to ensure 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): October 1, 2015** |