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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: River Valley Charter (District)

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 03/21/2014.

**Mandatory One-Year Compliance Date:** **03/21/2015**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 2 | Required and optional assessments | Partially Implemented |
| SE 3A | Special requirements for students on the autism spectrum | Partially Implemented |
| SE 11 | School district response to parental request for independent educational evaluation | Partially Implemented |
| SE 15 | Outreach by the School District (Student Find) | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| SE 47 | Procedural requirements applied to students not yet determined to be eligible for special education | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 6 | Availability of in-school programs for pregnant students | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicated that the school does not consistently provide educational assessments, including a history of the student's educational progress in the general curriculum and teacher assessment that addresses attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults. | | |
| **Description of Corrective Action:**  The district's policy is that Special Education Case Managers will be responsible for completing and reviewing educational assessments at all Team meetings, including a history of the student's educational progress in the general curriculum and teacher assessment that addresses attention skills, participation behaviors, communication skills, memory and social relations with groups, peers, and adults. The district will conduct and submit evidence of training of the Special Education Team on the district's policy regarding the completion of Educational Assessments at the corrective action training. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The evidence will be a copy of district policy and procedures and documentation that the corrective action training took place, including a dated agenda and attendance sheet with names and titles of staff. | | |
| **Description of Internal Monitoring Procedures:**  By October 30, 2014, the Special Education Coordinator will conduct a file review of 10 students who have had IEP meetings to check for adherence to policy regarding the completion and review of educational assessments at all Team meetings. Samples will be selected from each level, and the district will maintain the following documentation and make it available to the Department upon request: a) list of the student names and grade level for the records reviewed; b) the records that were in compliance; c) the root cause for any non-compliance and a description of the corrective actions to be taken by the district to address any identified non-compliance; d) date of the review; name of the person who conducted the review, their role, and signature. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  For those students identified by the Department in need of Educational Assessments A and B, the school must complete the missing assessments and reconvene the IEP Team if necessary to determine whether to amend or revise the IEP. Provide evidence of the completion of the assessments and include N1s and/or Team meeting invitations, by September 26, 2014.  Submit a detailed description of the internal tracking system to ensure that consented-to assessments are completed within 30 days of receipt of parent consent. Identify the person(s) responsible for the oversight, including the date of the system's implementation. Submit this information by September 26, 2014.  Following implementation of all corrective actions, conduct a file review of 10 students who have had IEP meetings post-training to ensure that Ed Assessments A & B are completed for each initial and re-evaluation. Provide a detailed narrative of the internal review, and indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by December 15, 2014.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  09/26/2014  12/15/2014 | | |

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| **Criterion & Topic:**  SE 3A Special requirements for students on the autism spectrum | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  According to interviews and document review, the school does not have a process in place to ensure that, for students with a disability on the Autism Spectrum, IEP Teams consider and specifically address the verbal and nonverbal communication needs of the child; the need to develop social interaction skills and proficiencies; the needs resulting from the child's unusual responses to sensory experiences; the needs resulting from resistance to environmental change or change in daily routines; the needs resulting from engagement in repetitive activities and stereotyped movements; the need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from autism spectrum disorder; and other needs resulting from the child's disability that impact progress in the general curriculum, including social and emotional development. | | |
| **Description of Corrective Action:**  The district will create a checklist for the IEP Team to consider and address at Team meetings whenever an evaluation indicates that a child has a disability on the Autism Spectrum, which includes autistic disorder [autism], Asperger's disorder, pervasive developmental disorder not otherwise specified, childhood disintegrative disorder, and Rhett's Syndrome as defined in the Diagnostic and Statistical Manual of Mental Disorders, fourth edition (DSM-IV, 2000). The checklist will guide the IEP Team to consider and address the following:    1) the verbal and nonverbal communication needs of the child;  2) the need to develop social interaction skills and proficiencies;  3) the needs resulting from the child's unusual responses to sensory experiences;  4) the needs resulting from resistance to environmental change or change in daily  routines;  5) the needs resulting from engagement in repetitive activities and stereotyped  movements;  6) the need for any positive behavioral interventions, strategies, and supports to  address any behavioral difficulties resulting from autism spectrum disorder;  7) and other needs resulting from the child's disability that impact progress in the  general curriculum, including social and emotional development.  At the corrective action training, the district will train the Special Education Case Managers in the use and role of this checklist at Team meetings when the child has a disability on the Autism Spectrum. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The evidence will be a copy of the checklist, and the agenda, attendance sheet, and meeting notes from the corrective action training on the purpose and completion of the checklist with the Special Education Team. | | |
| **Description of Internal Monitoring Procedures:**  By October 30, 2014, the Special Education Coordinator will conduct a file review of any student on the Autism Spectrum who has had an IEP meeting to check for evidence of the use of the checklist at Team meetings. The district will maintain the following documentation and make it available to the Department upon request: a) list of the student names and grade level for the records reviewed; b) the records that were in compliance; c) the root cause for any non-compliance and a description of the corrective actions to be taken by the district to address any identified non-compliance; d) date of the review; name of the person who conducted the review, their role, and signature. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3A Special requirements for students on the autism spectrum | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide a copy of the ASD checklist and evidence of training all Special Education Case Managers in the use and role of this checklist at Team meetings when the child has a disability on the Autism Spectrum; include signed attendance sheet(s), agenda, and relevant training materials. This progress report is due September 26, 2014.  Submit a detailed description of the internal oversight and tracking system to ensure that IEP Teams use the checklist when developing IEPs for students on the autism spectrum. This internal oversight system will be an ongoing part of district practices. Identify the person(s) responsible for the oversight and include the date  of the system's implementation. This progress report is due September 26, 2014.  Following implementation of all corrective actions, conduct a file review of 3-5 students with ASD who have had IEP development meetings post-training to ensure that all 7 areas of need are considered and specifically addressed in IEPs. Provide a detailed narrative of the internal review, and indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by December 15, 2014.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  09/26/2014  12/15/2014 | | |

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| **Criterion & Topic:**  SE 11 School district response to parental request for independent educational evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student records and documents indicated that IEP Teams do not reconvene to consider the independent educational evaluation and whether a new or amended IEP is appropriate within ten (10) school days from the time the independent educational evaluation report is received. | | |
| **Description of Corrective Action:**  When a parent gives the district an independent educational evaluation, the Team will meet within 10 working school days. The district will review the requirement with the Special Education Team at the corrective action training. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The evidence will be a copy of the agenda, attendance sheet, and meeting notes from the corrective action training with the Special Education Team. | | |
| **Description of Internal Monitoring Procedures:**  By October 30, 2014, the Special Education Coordinator will conduct a file review of any student who has had an independent educational evaluation for evidence that the IEP Team reconvened within 10 working school days of receiving it to consider the Independent Educational Evaluation and whether a new or amended IEP is appropriate. The district will maintain the following documentation and make it available to the Department upon request: a) list of the student names and grade level for the records reviewed; b) the records that were in compliance; c) the root cause for any non-compliance and a description of the corrective actions to be taken by the district to address any identified non-compliance; d) date of the review; name of the person who conducted the review, their role, and signature. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 11 School district response to parental request for independent educational evaluation | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide evidence of training to Special Education Team on the revised Independent Education Evaluation procedures; include signed attendance sheet(s), agenda, and relevant training materials. This is due September 26, 2014.  Submit a detailed description of the internal oversight and tracking system to ensure that an IEP Team meeting is convened within 10 days of receipt of an Independent Education Evaluation report, whether privately or publicly funded, to consider the evaluation report. This internal oversight system will be an ongoing part of district practices. Identify the person(s) responsible for the oversight and include the date of the system's implementation. This progress report is due September 26, 2014.  Following implementation of all corrective actions, conduct a file review of 3-5 students with a privately or publicly funded IEE to ensure that an IEP Team meeting was convened within 10 days to review the assessment report. Provide a detailed narrative of the internal review, and indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by December 15, 2014.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  09/26/2014  12/15/2014 | | |

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| **Criterion & Topic:**  SE 15 Outreach by the School District (Student Find) | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  According to document review, the school's published process to refer students for a special education evaluation indicated that the school support team will determine whether a student needs a referral, rather than the parent. | | |
| **Description of Corrective Action:**  The Family Handbook will be updated to include that a student may be referred for an evaluation by a parent, or any person in a caregiving or professional position concerned with the student's development. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  Evidence will be a scanned page of the updated Family Handbook delivered to the Department. | | |
| **Description of Internal Monitoring Procedures:**  N/A | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 15 Outreach by the School District (Student Find) | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide the relevant pages from the school's Family Handbook to demonstrate that a student may be referred for an evaluation by a parent or any person in a caregiving or professional position concerned with the student's development. Provide this documentation by September 26, 2014. | | |
| **Progress Report Due Date(s):**  09/26/2014 | | |

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student records indicated that following the development of the IEP, the school provides a Team meeting summary, but does not send two copies of the proposed IEP and placement within 10 days to the parent. | | |
| **Description of Corrective Action:**  Special Education Case Managers will send two copies of the proposed IEP and placement to the parent within 10 days of Team meetings. Special Education Case Managers will document on N1 forms under enclosures that two copies of the IEP were sent to parents and include a copy of N1 forms in students' files. At the corrective action training, the district will review with the Special Education Team the policy regarding the provision of two copies of the proposed IEP to parents and documentation on N1 forms (under enclosures) of the provision of two copies of the proposed IEP to parents at the corrective action training. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  On the N1 forms that accompany all IEP proposals, under enclosures it will be documented that two copies of the IEP were sent to parents. | | |
| **Description of Internal Monitoring Procedures:**  By October 30, 2014, the Special Education Coordinator will conduct a file review of 10 students who have had IEP meetings for evidence, looking specifically at N1 forms under enclosures, that two copies of the IEP were sent to parents. Samples will be selected from each level. The District will maintain the following documentation and make it available to the Department upon request: a) List of the student names and grade level for the records reviewed; b) the records that were in compliance; c) the root cause for any non-compliance and a description of the corrective actions to be taken by the district to address any identified non-compliance; d)date of the review; e)name of the person(s) who conducted the review, their role(s), and signature(s). | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide evidence of training to the Special Education Team regarding provision of two copies of the proposed IEP to parents and documentation on N1 forms (under enclosures); include signed attendance sheet(s), agenda, and relevant training materials. This is due September 26, 2014.  Submit a detailed description of the internal oversight and tracking system to ensure that N1s routinely include the statement of two copies of the proposed IEP and placement page. This internal oversight system will be an ongoing part of district practices. Identify the person(s) responsible for the oversight and include the date of the system's implementation. This is due September 26, 2014.  Following implementation of all corrective actions, conduct a file review of 10 students with IEP development meetings convened post-training to ensure that parents are sent 2 copies of the proposed IEP & placement page. Provide a detailed narrative of the internal review, and indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by December 15, 2014.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  09/26/2014  12/15/2014 | | |

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

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student records indicated that the school's IEP Teams do not consistently explain why the removal of a student from the general education classroom is critical to the student's program or provide the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  Special Education Case managers will ensure that IEP Teams consider and clearly explain in the IEP why the removal of the student from the general education classroom is critical to the student's program. (Previously emphasis has been placed on what services are delivered outside of the general education classroom rather than why it is necessary to deliver these services outside of the general education classroom.) At the corrective action training, the district will train the Special Education Case Managers on the importance of the Team explaining why the removal of a student from the general education classroom is critical to the student's program. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The evidence will be a copy of the agenda, attendance sheet, and meeting notes from the corrective action training with the Special Education Team. | | |
| **Description of Internal Monitoring Procedures:**  By October 30, 2014, the Special Education Coordinator will conduct a file review of 10 students who have had IEP meetings to check for evidence that the IEP teams considered and clearly explained in the IEP why the removal of the student from the general education classroom is critical to the student's program. Samples will be selected from each level, and the district will maintain the following documentation and make it available to the Department upon request: a) list of the student names and grade level for the records reviewed; b) the records that were in compliance; c) the root cause for any non-compliance and a description of the corrective actions to be taken by the district to address any identified non-compliance; d) date of the review; name of the person who conducted the review, their role, and signature. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide evidence of training to the Special Education Team regarding justifying why the removal of a student from the general education classroom is critical to the student's program; include signed attendance sheet(s), agenda, and relevant training materials. This is due September 26, 2014.  Submit a detailed description of the internal oversight and tracking system to ensure that IEPs contain an appropriate Non-Participation Justification statement. This internal oversight system will be an ongoing part of district practices. Identify the person(s) responsible for the oversight and include the date of the system's implementation. This is due September 26, 2014.  Following implementation of all corrective actions, conduct a file review of 10 students with IEP development meetings convened post-training to ensure that Non-Participation Justification statements consistently explain why the removal of a student from the general education classroom is critical to the student's program or provide the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Provide a detailed narrative of the internal review, and indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by December 15, 2014.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  09/26/2014  12/15/2014 | | |

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  According to document review and interviews, River Valley Charter School has not established a parent advisory council on special education. | | |
| **Description of Corrective Action:**  River Valley Charter School will establish a more active parent advisory council on special education. The Special Education Coordinator and a parent member of River Valley Charter School's parent advisory council will meet with an area's school's parent advisory council that has a high level of parent participation to learn more about how it is organized, operates, decides upon meeting topics, publicizes meetings, and engages its members. At the next RVCS parent advisory council meeting on May 29, 2014, the Special Education Coordinator and parent member of the RVCS parent advisory council will share what they learned from their meeting with the area school's parent advisory council and consider ways in which it can increase attendance and involvement of its members. The parent advisory council will create a handbook which will include its duties and by-laws regarding officers and operational procedures. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  1. The district will provide a list of names of active members to the Department by October 30, 2014.  2. The district will offer membership to all parents with disabilities and other interested parties through the family handbook, at the beginning of the school year through emails, as well as when each parent advisory council meeting is announced through the emails to the parent community, in the "Happenings" newsletter, and on the school website.  3. The Parent Advisory Council will create a handbook detailing its duties which include but are not limited to: advising the district on matters that pertain to the education and safety of students with disabilities; meeting regularly with school officials to participate in the planning, development, and evaluation of the school district's special education programs.  4. The parent advisory council will establish by-laws regarding officers and operational procedures and will publish these by-laws in the parent advisory council handbook.  5. The district's board of directors will provide assistance to the parent advisory council without charge, upon reasonable notice, and subject to the availability of staff and resources.  6. The district will conduct, in cooperation with the parent advisory council, at least one workshop annually on the rights of students and their parents and guardians under the state and federal special education laws. | | |
| **Description of Internal Monitoring Procedures:**  The district will maintain the following documentation and make it available to the Department upon request: a) notes from the Special Education Coordinator and RVCS parent member's meeting with the area school's more established parent advisory council; b) copies of emails in which membership to the parent advisory council is offered to all parents with disabilities and other interested parties; c) copies of the "Happenings" newsletters that announce upcoming parent advisory council meeting topics and dates/times; d)a copy of the parent advisory council handbook; e) agendas, meeting notes, and attendance sheets from parent advisory council meetings; f) list of the names of the active members of the parent advisory council. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide notes from the Special Education Coordinator and RVCS parent member's meeting with the area school's more established parent advisory council; b) copies of emails in which membership to the parent advisory council is offered to all parents with disabilities and other interested parties; c) copies of the "Happenings" newsletters that announce upcoming parent advisory council meeting topics and dates/times; d)a copy of the parent advisory council handbook; e) agendas, meeting notes, and attendance sheets from parent advisory council meetings; f) list of the names of the active members of the parent advisory council. Provide this documentation by December 15, 2014. | | |
| **Progress Report Due Date(s):**  12/15/2014 | | |

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| **Criterion & Topic:**  SE 47 Procedural requirements applied to students not yet determined to be eligible for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  According to document review, the school's distributed disciplinary policy for students with disabilities does not include the procedural requirements for students not yet determined to be eligible for special education. | | |
| **Description of Corrective Action:**  Prior to disciplinary action if the district has knowledge that the student may be a student with a disability we will finish conducting evaluations and will provide all protections available to the student until and unless the student is not eligible for special education services. We will determine if there was prior knowledge of a disability by looking to see if there was a written concern from a parent, a request for an evaluation, or if the district had expressed concern to the director. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The policy will be written and published in the River Valley Charter School Family Handbook. | | |
| **Description of Internal Monitoring Procedures:**  N/A | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 47 Procedural requirements applied to students not yet determined to be eligible for special education | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide the relevant section from the school's Family Handbook describing disciplinary procedures for students not yet determined to be eligible for special education by September 26, 2014. | | |
| **Progress Report Due Date(s):**  09/26/2014 | | |

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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 school's nondiscrimination statement does not contain gender identity or homelessness in its list of protected categories. | | |
| **Description of Corrective Action:**  River Valley Charter School has updated its non-discrimination statements to include gender identity and homelessness as protected classes. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  A copy of the school's non-discrimination statement will be shared with the Department. Additionally the school will provide the Department with copies of the school's lottery application and advertising information, as well as the related pages from the school's Family Handbook | | |
| **Description of Internal Monitoring Procedures:**  N/A | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide documentation to demonstrate that the school's non-discrimination statement has been updated with gender identity and homelessness as protected categories, including the school's lottery application and advertising information and relevant sections from the school's Family Handbook. Provide this documentation by September 26, 2014. | | |
| **Progress Report Due Date(s):**  09/26/2014 | | |

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| **Criterion & Topic:**  CR 6 Availability of in-school programs for pregnant students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Interviews with administrative staff indicated that pregnant students would be permitted to remain in regular classes and participate in extracurricular activities throughout their pregnancy and after giving birth without obtaining a physician's certification. While the school's nondiscrimination statement includes sex as a protected category, the school has not designated a staff member to administer grievance procedures with regard to its nondiscrimination policy under Title IX. | | |
| **Description of Corrective Action:**  River Valley will identify an individual to serve as the school's designated staff member to conduct grievance procedures regarding non-discrimination as required under Title IX. The name of the identified individual will be published in the school's Family Handbook. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will be a copy of the Board minutes wherein the individual is designated as well as a copy of the relevant pages from the school's Family Handbook. | | |
| **Description of Internal Monitoring Procedures:**  N/A | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 6 Availability of in-school programs for pregnant students | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide the relevant sections from the school's Family Handbook identifying the individual to serve as the school's designated staff member to conduct grievance procedures regarding non-discrimination as required under Title IX. Provide this documentation by September 26, 2014. | | |
| **Progress Report Due Date(s):**  09/26/2014 | | |

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

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the school has not established a system of oral interpretation to assist parents/guardians with limited English skills, including those who speak low-incidence languages. Document review also indicated that the charter school's recruitment and promotional materials being disseminated to residents in the area served by the school are not translated into the major languages spoken by residents with limited English skills. | | |
| **Description of Corrective Action:**  River Valley Charter School will publicly advertise the availability of translation and interpretation services in the school lobby. In addition, all external enrollment promotional materials will indicate the availability of translation and interpretation services. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  River Valley will provide the Department with a copy of a publicly posted document indicating the availability of translation and interpretation services. Additionally, River Valley will provide the Department with a copy of its enrollment promotion materials. | | |
| **Description of Internal Monitoring Procedures:**  N/A | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide a copy of the publicly posted document describing the availability of translation and interpretation services and a copy of RVCS' enrollment & promotion materials. This documentation is due September 26, 2014. | | |
| **Progress Report Due Date(s):**  09/26/2014 | | |

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

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  According to document review, the school's code of conduct does not include a reference to M.G.L. c. 76, section 5, and its non-discrimination policy does not include gender identity as a protected category. Additionally, the disciplinary policy for students on 504 Plans does not include appropriate procedures and re-directs parents to an unnamed 504 coordinator. | | |
| **Description of Corrective Action:**  The school's code of conduct will include a reference to M.G.L. c. 76, section 5 and the non-discrimination policy will include gender identity as a protected class. Further, the disciplinary policy for students on 504 plans will include appropriate procedures. Last, the school will include a designated individual, specifically named, in the Family Handbook. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The school's Code of Conduct will be submitted to the Department (as part of the Family Handbook). It will include specific inclusion of M.G.L. c. 76, section 5. It will also indicate the inclusion of gender identity as a protected class. The school will also provide the Department with a copy of the section of the Family Handbook wherein the specific 504 Plan Designee is named. | | |
| **Description of Internal Monitoring Procedures:**  N/A | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide the relevant sections of the school's Code of Conduct/Family Handbook with the inclusion of M.G.L. c. 76, section 5; gender identity in the nondiscrimination statement; and the individual's name and contact information serving as the 504 Coordinator. This documentation is due September 26, 2014. | | |
| **Progress Report Due Date(s):**  09/26/2014 | | |

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

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  According to document review, the school does not identify by name the persons designated to coordinate compliance under Title IX and Section 504. | | |
| **Description of Corrective Action:**  The School will identify and individually name the designated Title IX compliance coordinator in the Family Handbook and on the school website. Families receive the Handbook annually and it is also made available on the school website. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  A copy of the Family Handbook will be provided to the Department as evidence of this notification. | | |
| **Description of Internal Monitoring Procedures:**  N/A | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide the relevant section from the school's Family Handbook with the designated Title IX compliance coordinator. Provide this documentation by September 26, 2014. | | |
| **Progress Report Due Date(s):**  09/26/2014 | | |

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

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| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the school does not provide physical restraint training for employees hired after the school year begins within a month of their employment. | | |
| **Description of Corrective Action:**  The school will ensure that every employee hired after the school year begins will be provided with physical restraint training within one month of their employment hiring date. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The school will maintain a list of employees who have received restraint training in the staff information system, Rediker. In addition, a hiring checklist will be stored in the employee file to ensure proper procedures are followed upon hiring. | | |
| **Description of Internal Monitoring Procedures:**  New hire forms will be reviewed and checked off for every new hire to ensure proper procedures are followed upon hiring. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide a list of new hires between October-December 2014 with documentation of physical restraint training by December 15, 2014. | | |
| **Progress Report Due Date(s):**  12/15/2014 | | |

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

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| **Criterion & Topic:**  CR 21 Staff training regarding civil rights responsibilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the school's staff training on civil rights responsibilities does not include gender identity as a protected category. | | |
| **Description of Corrective Action:**  The school will provide staff with training about their civil rights responsibilities, including gender identity as a protected category. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  Notes from training will be provided to the Department as evidence of civil rights training, especially noting gender identity as a protected class. | | |
| **Description of Internal Monitoring Procedures:**  N/A | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide training materials from civil rights training that includes gender identity as a protected category, due September 26, 2014. | | |
| **Progress Report Due Date(s):**  09/26/2014 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the school does not evaluate all aspects of its K-8 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 school will participate in a self-evaluation to evaluate all aspects of its K-8 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, English proficiency, sexual orientation, disability or housing status, have equal access to all programs. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director | | **Expected Date of Completion:**  10/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The school will publish on its website certification notice of a self study that evaluates all of its K-8 programs to ensure that all students have equal access to all programs. | | |
| **Description of Internal Monitoring Procedures:**  N/A | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date**: 05/06/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide a detailed plan of how the school will conduct a self-evaluation to evaluate all aspects of its K-8 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, English proficiency, sexual orientation, disability or housing status, have equal access to all programs. Provide this documentation by September 26, 2014. | | |
| **Progress Report Due Date(s):**  09/26/2014 | | |