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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: Hampshire

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 10/01/2014.

**Mandatory One-Year Compliance Date:** **10/01/2015**

**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 6 | Determination of transition services | Partially Implemented |
| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 12 | Frequency of re-evaluation | Partially Implemented |
| SE 14 | Review and revision of IEPs | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 25 | Parental consent | 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 37 | Procedures for approved and unapproved out-of-district placements | Partially Implemented |
| SE 54 | Professional development | 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 14 | Counseling and counseling materials free from bias and stereotypes | 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 |

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, documents and interviews indicate that for students in the middle school and high school Life Skills programs, the district routinely utilizes educational evaluations that were conducted three to six years prior as a replacement for full re-evaluations in determining a student's eligibility, level of need and transition planning for students aged 14-22. | | |
| **Description of Corrective Action:**  Life Skills staff did not routinely request cognitive assessments as part of three year re-evaluations at least every six years. Although parents receive parents' rights annually, records do not contain documentation that parents were informed that they could have assessments done. Conversations with parents occurred but were not documented. Also, transitional assessments were not done for students 14-22.  If consent for three year re-evaluations for life skills students in the middle and high school, does not contain the required assessments, there will be documentation that the parents have been informed that they have the right to request evaluations. This will be documented in the N1. Transitional Assessments will be completed for students 14-22 | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director and Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Agendas and sign-ins from department professional development. | | |
| **Description of Internal Monitoring Procedures:**  Annual internal record reviews will be conducted to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district plans did not include the development of procedures for ensuring that three year evaluations are conducted every three years, with informed parental consent.  The description of district monitoring procedures to ensure the districts conducts a full re-evaluation at least every three years for middle and high school students in the Life Skills program, documents district recommendations for necessary assessments, informs parents of the right to request additional assessments, and, if applicable, documents reasons the parent and district agree that assessments for a full 3 year re-evaluation are unnecessary, is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  The district must develop written procedures to ensure that every three years the IEP Team of every student in the Life Skills program will use current assessments to determine continued eligibility for special education services. These procedures must include the use the Evaluation Consent Form (N1A) along with the Notice of Proposed School District Action (N1) to document the reasons the district is or is not recommending assessments to establish continued eligibility, and informing parents of their right to request assessments regardless of district recommendation.  The district must develop a plan that details how it will conduct on-going monitoring of internal records to ensure use of current assessments every three years to determine continued eligibility for special education services, complete all elements of the N1 and N1A for a re-evaluation, and document this in the student record. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. | | |
| **Required Elements of Progress Report(s):**  Provide a copy of the district's written procedures ensuring that every three years the IEP Team of every student in the Life Skills program will use current assessments to determine continued eligibility for special education services. These procedures must include the use the Evaluation Consent Form (N1A) along with the Notice of Proposed School District Action (N1) to document the reasons the district is or is not recommending assessments to establish continued eligibility, and informing parents of their right to request assessments regardless of district recommendation, by March 26, 2015.  Provide evidence that staff receive training on district procedures to conduct a full re-evaluation of continued special education eligibility every three years using current assessments that by March 26, 2015. This evidence must include the agenda, sign-in sheet with the signature and title of staff persons in attendance, and any other handouts.  Provide a plan that details how the district will conduct internal record reviews to ensure the district is conducting a complete re-evaluation of each student in the Life skills program every three years and documenting, if applicable, parent and district agreement that an assessment for a full 3 year re-evaluation is not necessary. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 26, 2015.  Provide a list of students in the Life Skills program who have had a re-evaluation meeting scheduled for the 2014-2015 school year, and provide copies of the N1A and N1 form for each student, by June 1, 2015. | | |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 | | |

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

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| **Criterion & Topic:**  SE 6 Determination of transition services | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, documents and interviews indicate that the Team does not consistently discuss and document the student's transition needs annually on the Transition Planning Forms and IEP, commencing at the age of 14. | | |
| **Description of Corrective Action:**  Some staff were not aware that they needed to invite the student to the IEP meeting when the student will turn 14 during the IEP or already is 14. Some staff were not aware that they were required to complete the transition form at each annual review meeting.  Professional Development Plan will include a refresher on inviting all students to their meetings and to have the discussion about transition planning. All staff will be re-trained to complete the transition planning form and to include the information in the IEP and special education files. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director and Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Agendas and sign-ins from department professional development.  PD to include: The idea behind Transition Planning: to include the student and to complete the form, student always is invited and on the invitation. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review-July, 2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 6 Determination of transition services | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined the root cause for the finding that IEP Teams were not annually discussing or documenting transition needs for students age 14-22 was due to staff being unaware that the Team is required to discuss and document transition needs on the Transition Planning Form and IEP at every annual review Team meeting for students age 14-22. The district plans to provide evidence to the Department that staff have received training on district procedures, but does not indicate that it will develop written procedures for staff to follow to ensure continued compliance.  The description of the district's internal monitoring process to verify every Team annually documents discussion of the student's transition needs on the Transition Planning Form and IEP for students age 14-22 is not sufficiently detailed. It does not indicate the district has a plan to review student records on an on-going basis. | | |
| **Department Order of Corrective Action:**  Develop written procedures to ensure every Team annually, beginning no later than when the student is 14 years old, discusses transition needs and updates the Transition Planning Form and IEP services. Please refer to Technical Assistance Advisory SPED 2009-1: Transition Planning to Begin at Age 14, http://www.doe.mass.edu/sped/advisories/09\_1ta.html.  Provide a description how the district will conduct on-going internal review of student records to verify that the IEP Team annually documents discussion of the student's transition needs on the Transition Planning Form and the IEP beginning no later than when a student is age 14. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. | | |
| **Required Elements of Progress Report(s):**  Provide documentation of staff training on district procedures developed regarding the requirements for the Team to complete the mandated Transition Planning form and include transition goals in the IEP when the student is age 14-22 by March 26, 2015. Documentation must include the meeting agenda, signature and title of staff members in attendance, written procedures and handouts.  Provide a description of the district's plan for on-going compliance. Include information on person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 26, 2015  After staff receive training, conduct a review of the records of students age 14-22, to ensure the transition planning form and corresponding IEP goals are found in each record. Report the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by June 1, 2015.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 | | |

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| **Criterion & Topic:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, documents and interviews indicate that at least one year prior to the student reaching the age of 18, the district does not inform both the student and the parent/guardian of the rights that will transfer from the parent/guardian to the student upon the student reaching his or her 18th birthday. Furthermore, upon the student reaching the age of 18, the school district does not implement procedures to obtain consent from the student to continue his or her special education program. | | |
| **Description of Corrective Action:**  Current procedure:  Pupil Services Secretary sent letters out prior to 18th birthday (not early enough).  Pupil Services Secretary sent out decision forms to student and parents and kept returned letters on file in the Pupil Services Director's office, not in the special education file.  New procedure:  1. Letter goes out in September for all students turning the age of 17 during the next school year. Need to send out letters at least on or before the student turns 17.  2. When the student turns 18, they will be asked by their special education liaison to sign the form on 18th birthday.  3. The signed forms will be kept in the special education file. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director and Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  All students who turn 18 prior to graduating will have signed form in the special education file.  Agendas and sign-ins from department professional development. | | |
| **Description of Internal Monitoring Procedures:**  The new procedure will be implemented and tracked by an internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined the root cause for not informing students and parents at least one year prior to the student's 18th birthday that the right to consent for IEP services would transfer to student upon the student's 18th birthday was that the procedures needed revision.  The description of the district's internal monitoring procedures to ensure the district informs both the student and the parent/guardian at least one year prior to the student reaching the age of 18 that consent for IEP services will transfer from the parent/guardian to the student upon the student's 18th birthday and documents the student's consent to the IEP, is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  Provide a description of the on-going administrative review plan to ensure compliance that includes person(s) responsible for identifying students who will reach the age of 17 and mailing letters and how frequently student records will be reviewed. | | |
| **Required Elements of Progress Report(s):**  Submit documentation of staff training on revised district procedures to inform students and parents at least one year prior to the student's 18th birthday that the right to consent to IEP services will transfer to the student upon the student's 18th birthday, and students age 18 and older consent to their IEP services. Documentation of this training must include the meeting agenda, signature and title of staff members in attendance, revised written procedures, the form 18 year old students will sign, and any other handouts by March 26, 2015.  Submit a list of students who will reach age 17 during the 2014-2015 school year and a copy of the letter that was sent to each student and parent in September 2014 to inform them of the rights that will transfer from the parent to the student upon the student's 18th birthday by March 26, 2015.  Submit a list of students who turned 18 during the 14-15 school year and documentation that they consented to the continuation of their IEP services by June 1, 2015. | | |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 | | |

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| **Criterion & Topic:**  SE 12 Frequency of re-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, documents and interviews indicate that for students enrolled in the middle school and high school Life Skills programs, the district does not conduct a full re-evaluation every three years in order to determine whether a student continues to be eligible for special education, and there is no evidence that the parent and district agree that it is unnecessary to conduct the re-evaluations. Furthermore, there is no documentation that parents were advised that no further assessments were needed, the reasons for this, and no documentation that parents were advised of their right to request assessments. | | |
| **Description of Corrective Action:**  Life Skills staff did not routinely request cognitive assessments as part of three year re-evaluations at least every six years. Although parents receive parents rights annually, records do not contain documentation that parents were informed that they could have assessments done. Conversations with parents occurred but were not documented.  Professional development will be done to ensure staff understand that:  If consent for three year re-evaluations for life skills students in the middle and high school, does not contain the required assessments, there will be documentation that the parents have been informed that they have the right to request evaluations. This will be documented in the N1, will be sent home to parents and will be placed in the special education file. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2014 |
| **Evidence of Completion of the Corrective Action:**  Agendas and sign-ins from department professional development. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 12 Frequency of re-evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district plans did not include the development of procedures for ensuring that three year evaluations are conducted every three years, with informed parental consent.  The description of district monitoring procedures to ensure the districts conducts a full re-evaluation at least every three years for middle and high school students in the Life Skills program, documents district recommendations for necessary assessments, informs parents of the right to request additional assessments, and, if applicable, documents reasons the parent and district agree that assessments for a full 3 year re-evaluation are unnecessary, is not sufficiently detailed. | | |

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| **Department Order of Corrective Action:**  The district must develop written procedures to ensure that every three years the IEP Team of every student in the Life Skills program will use current assessments to determine continued eligibility for special education services. These procedures must include the use the Evaluation Consent Form (N1A) along with the Notice of Proposed School District Action (N1) to document the reasons the district is or is not recommending assessments to establish continued eligibility, and informing parents of their right to request assessments regardless of district recommendation.  The district must develop a plan that details how it will conduct on-going monitoring of internal records to ensure use of current assessments every three years to determine continued eligibility for special education services, complete all elements of the N1 and N1A for a re-evaluation, and document this in the student record. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. |
| **Required Elements of Progress Report(s):**  Provide a copy of the district's written procedures ensuring that every three years the IEP Team of every student in the Life Skills program will use current assessments to determine continued eligibility for special education services. These procedures must include the use the Evaluation Consent Form (N1A) along with the Notice of Proposed School District Action (N1) to document the reasons the district is or is not recommending assessments to establish continued eligibility, and informing parents of their right to request assessments regardless of district recommendation, by March 26, 2015.  Provide evidence that staff receive training on district procedures to conduct a full re-evaluation of continued special education eligibility every three years using current assessments that by March 26, 2015. This evidence must include the agenda, sign-in sheet with the signature and title of staff persons in attendance, and any other handouts.  Provide a plan that details how the district will conduct internal record reviews to ensure the district is conducting a complete re-evaluation of each student in the Life skills program every three years and documenting, if applicable, parent and district agreement that an assessment for a full 3 year re-evaluation is not necessary. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 26, 2015.  Provide a list of students in the Life Skills program who have had a re-evaluation meeting scheduled for the 2014-2015 school year, and provide copies of the N1A and N1 form for each student, by June 1, 2015. |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 |

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

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| **Criterion & Topic:**  SE 14 Review and revision of IEPs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, documents and interviews indicate that a Team meeting is not consistently held at least annually, on or before the anniversary date of the student's IEP, to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate. | | |
| **Description of Corrective Action:**  Parents do not always respond to a request for an annual team meeting prior to the due date.  Corrective Plan:  Staff will:  -attempt to schedule the annual team meeting well in advance of the annual date  -will send out a meeting invitation with an attendance form and a note stating that if the team meeting time does not work for the parent, the meeting can be rescheduled to a mutually convenient time. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Meeting invitations and attendance forms indicating meetings that were offered to parents prior to the annual review date will be filed in the special education file with a note if parents reschedule the meeting.  Agendas and sign-in sheets from staff professional development. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 14 Review and revision of IEPs | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district plans to schedule Team meetings well in advance of the IEP expiration date and document communications with parents, including attempts to secure parent participation at Team meetings and parent requests to reschedule a Team meeting. The district will provide staff with professional development training on the district's new procedures. However, district did not detail procedures to ensure the district schedules Team meetings well in advance of the annual date.  The district's description of its internal monitoring process to ensure meetings to review each student's IEP are held at least annually is not sufficiently detailed. | | |

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| **Department Order of Corrective Action:**  Develop written procedures that detail how the district will ensure a Team meeting is held on or before the anniversary date of the IEP.  The district will provide a plan for on-going internal record reviews to ensure every IEP is scheduled to be reviewed by the Team at least annually and parent requests for rescheduling meetings are documented. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. |
| **Required Elements of Progress Report(s):**  Provide evidence to the Department that staff have received training on district procedures to schedule Team meetings well in advance of the annual date and document communications with parents, including attempts to secure parent participation at Team meetings and parent requests to postpone Team meetings, in student records. This evidence must include the agenda, written procedures, and sign-in sheet with the signature and title of staff persons in attendance, procedures and other handouts by March 26, 2015.  Provide a plan that details how the district will conduct on-going internal record reviews to ensure annual review or three year re-evaluation Team meetings are held within one year of the previous Team meeting and parent communications are documented in student records. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 26, 2015.  Provide a report on the results of an internal monitoring of records for students who had annual IEP Team meetings after the date staff received training. For this report, submit the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by June 1, 2015.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 |

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

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, documents and interviews indicate that the district, within 3-5 days following the development of the IEP, does not consistently provide the parent with two (2) copies of the proposed IEP and proposed placement along with the Notice of Proposed School District Action (N1); or as an alternative, immediately after the Team, the district does not provide a summary of the key agreements of the meeting which must, at a minimum, include a completed service delivery grid describing the types and amounts of special education and/or related services proposed by the district and a statement of the major goal areas associated with these services, followed by two (2) copies of the proposed IEP and placement within 10 school days. | | |
| **Description of Corrective Action:**  Parents did receive a draft copy of the IEP at the meeting, however there was not one in the file to document this.  Corrective Plan:  -Parents will receive a copy of a draft IEP at the team meeting. Any changes that happen at the meeting will be noted on the parent copy.  -When parents do not receive a copy of the draft IEP at the meeting, they will be given a meeting summary form that does contain a list of goals and a services delivery grid page.  -Timelines:  Staff will get the completed IEP's to the principal within 5 working days of the meeting.  The principal will review, sign and pass along the IEP to the special education secretary in a timely way so that the IEP's can be to parents within 10 working days.  Implementation of a checklist with teaching staff to ensure the all the required paperwork gets to the special education secretary to be filed, including an N1.  Special Education Secretaries will be made aware that they need to send home two full copies of the IEP and make note of that in the file.  Professional Development for all special education secretaries to include:  -draft IEP or meeting summary to parents at the end of the team meeting  -use of the checklist of required paperwork  -time lines for required paperwork  -updating them on the requirement of sending home two full copies of the IEP with an N1 to the parent within 10 working days with the date they were mailed. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Evidence in the file: notes as to what date the two copies of the IEP's were sent out, timelines were met and check list shows all paperwork in file.  Agenda and sign in for professional development. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined the root cause parents did not always receive two copies of a proposed IEP to sign was that the district needed to revise its plan for processing IEPs and provide professional development to special education secretaries. The district's proposed plan does not indicate that revised procedures will include documenting on the Notice of Proposed District Action Form (N1) that two copies of the IEP are sent to parents, nor does it indicate Team chairs will participate in this training. In addition, the description of district monitoring procedures to ensure parents receive two copies of a proposed IEP is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  The district must develop a plan that details how it will conduct on-going internal record reviews. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training held for special education secretaries and Team chairpersons on revised district procedures to ensure parents receive two copies of a proposed IEP and this is documented on the N1 in the student record, including an agenda, procedures, and sign-in sheet with the signature and title of staff persons in attendance by March 26, 2015.  Submit a plan that details how the district will conduct on-going internal record reviews to ensure ongoing compliance. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 26, 2015.  Review a sample of student records who have had Team meetings after staff receives training, for evidence of documentation on the N1 that parents have received two copies of the IEP. Submit to the Department a report on the findings of the review, including the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by June 1, 2015.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 | | |
| 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 record review, documents and interviews indicate that the Team does not document the basis for a student's removal from the general education environment on the IEP, justifying its conclusion that students cannot be educated in a less restrictive environment, with the use of supplementary aids and services. | | |
| **Description of Corrective Action:**  Staff state that the student is removed from the general education classroom but do not say why the student is removed from the general education setting. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The non-participation justification statements will include a statement specific to the student explaining why they need to be removed from the general education setting to receive special education services.  Agendas and sign-ins from department professional development. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined the root cause for not documenting the reason for removal from the general education environment in student IEPs was that staff require professional development to understand information that must be included in the non-participation justification statement in the IEP and that this statement must be individualized to each student.  The description of district monitoring procedures to ensure every IEP contains an individualized statement to explain why the student requires removal from the general education environment is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  The district must develop a plan that details how it will conduct on-going monitoring of student records to ensure the district documents on each IEP the basis for each individual student's removal from the general education environment and why the Team determined that the student cannot be educated in a less restrictive environment with the use of supplementary aids and services. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. | | |

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| **Required Elements of Progress Report(s):**  Provide evidence that staff received training on procedures to document the reason for a student's removal from the general education environment in the IEP and why the Team determined that the student cannot be educated in a less restrictive environment with the use of supplementary aids and services. This evidence must include the agenda, written procedures, and sign-in sheet with the signature and title of staff persons in attendance by March 26, 2015.  Provide a plan that details how the district will conduct on-going internal record reviews to ensure ongoing compliance. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 26, 2015.  Provide a report on the findings of an administrative review of records for students who have had Team meetings after staff received training, to ensure the Team documents the basis for a student's removal from the general education environment on the IEP. For this report, submit the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by June 1, 2015.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 |

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

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| **Criterion & Topic:**  SE 25 Parental consent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, documents and interviews indicate that the district does not seek informed written parental consent to conduct a reevaluation for students enrolled in the middle school and high school Life Skills programs. See SE 12. | | |
| **Description of Corrective Action:**  Life Skills program staff did not always complete evaluations every three years to determine eligibility, therefore there were no consent for evaluation sent to parents or filed. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Special educations files for middle school and high school life skills program students will include consent for three-year re-evaluation assessments. Some mandatory assessments may be waived by parent but some assessments will be done every three years.  Professional Development will include the expectation that every three years students will be assessed to determine eligibility. Agendas and sign-ins from professional development will document the professional development. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 25 Parental consent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  See SE 12 | | |
| **Department Order of Corrective Action:**  See SE 12 | | |
| **Required Elements of Progress Report(s):**  See SE 12 | | |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 | | |

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

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| **Criterion & Topic:**  SE 29 Communications are in English and primary language of home | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, documents and interviews indicate that for parents/guardians whose primary language is other than English, communications are not in both English and the primary language of the home. There is no evidence in student records documenting that notices are provided orally or by some other form of communication. | | |
| **Description of Corrective Action:**  Some staff were not aware of the translated IEP forms on the DESE website and who needed forms translated.  PD will be conducted to:  \*ensure that all staff know student/family home language preference  \*where to access translated forms  \*how to use google translate or babble fish or translator in the building to translate the content of special education forms and documents for families who identify a preference for this documentation in their home language | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The Main Office staff will photo copy Family Home Language Surveys for special education students and give them to the special education secretary, who will file them in the special education file.  If a parent requests special education documents in a language other than English, the Special Education Secretary will notify the Special Education Liaison.  The Special Education Liaison will work with the Principal to get the documents translated on translated Special Education forms.  Both an English version of the Special Education forms as well as a translated set of Special Education forms will be filed in the Special Education file. | | |
| **Description of Internal Monitoring Procedures:**  Internal record reviews will show compliance-if there are any families enrolled who have requested school documents in a language other than English. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 29 Communications are in English and primary language of home | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |

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| **Basis for Decision:**  The district determined the root cause for communications not being consistently provided in the primary language of the home was that staff was not informed of the language preference of students and parents or the availability of translated IEP forms and district resources to obtain translations and interpreters. The district will revise its procedures and train staff on new procedures. However, the district's plan does not include a procedure to document oral communication of important information and indicates the district plans to use a computer program, instead of a qualified interpreter or translator, to provide parents with communications in the primary language of the home. |
| **Department Order of Corrective Action:**  Provide a revised description of procedures to provide parents with translated special education forms and notices that details how staff will document oral or other forms of communication with the parent and indicates that contents of IEP forms and notices, as well as other important notices, will be completed by a qualified translator or interpreter. Also provide a list of contact information for agencies the district has identified as able to provide oral interpretations and translated documents for special education. |
| **Required Elements of Progress Report(s):**  Provide staff with training on the district's procedures to ensure special education documents and information are translated when the Home language survey indicates the primary language of the home is not English by March 26, 2015. This evidence must include the agenda, handouts, copy of written procedures, and sign-in sheet with the signature and title of staff persons in attendance.  Provide contact information for agencies the district has identified as able to translate or interpret special education forms and notices, and the languages they serve by March 26, 2015.  Provide a plan that details how the district will conduct internal record reviews to ensure Home Language surveys are filed in the special education record, special education documents are translated, and verbal communications about special education matters in the parent's home language are documented. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 26, 2015.  After staff receives training, conduct an administrative review of special education records of students who have parents that have been identified by the Home Language Survey as having a primary home language other than English. Submit the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by June 1, 2015  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 |

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

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews indicated that Hampshire Public Schools has not established its own Parent Advisory Council (PAC), but participates as a member of the larger Hampshire Regional School District PAC, approved by waiver by the Department for the 2012-2013 school year. That waiver has now expired and must be resubmitted for approval for the 2014-2015 school year. | | |
| **Description of Corrective Action:**  The waiver for the Parent Advisory Council (PAC) has expired and will be re-submitted by the Pupil Services Director. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The approved waiver will be evidence of the alternative way the district is meeting the regulation. | | |
| **Description of Internal Monitoring Procedures:**  A waiver form will be resubmitted each year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district must provide a copy of a letter from the Department approving a waiver from the regulation requiring the district to establish a parent advisory council on special education for the 2014-2015 school year by March 26, 2015. | | |
| **Progress Report Due Date(s):**  03/26/2015 | | |

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

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| **Criterion & Topic:**  SE 37 Procedures for approved and unapproved out-of-district placements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, documents and interviews indicate that the district does not document the monitoring of individual students placed in public and private out-of-district programs for the provision of programs and services. Also, monitoring plans are not evident in the files of every eligible student who has been placed out-of-district. | | |
| **Description of Corrective Action:**  Although there is at least one annual visit and participation of at least one team meeting and ongoing review of incident reports and progress reports, there was no form that documented the monitoring. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  New monitoring form will be filled out and filed in the student's file. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 37 Procedures for approved and unapproved out-of-district placements | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The proposed corrective action states the district will develop a form to document its efforts to monitor the progress of students placed out of district. However, the description of the district's internal monitoring process is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  The district must provide a description of how it will conduct on-going administrative review of student records to ensure documentation of program oversight of individual students placed out of district is filed in student records, including person(s) responsible for conducting record reviews, how often reviews will be conducted, and how review activities will be documented. | | |
| **Required Elements of Progress Report(s):**  Submit a plan on how the district will conduct on-going administrative review of student records to ensure documentation of program oversight of individual students placed out of district is completed and filed in student records by March 26, 2015. These procedures must include person(s) responsible for conducting record reviews, how often reviews will be conducted, and how review activities will be documented.  Submit to the Department a list of students placed out of district and a copy of the monitoring form developed by the district by March 26, 2015.  Submit a copy of the completed monitoring form that is found in the student's record of each out-of-district student by June 1, 2015. | | |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 | | |

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

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| **Criterion & Topic:**  SE 54 Professional development | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews indicate that the district does not provide training for staff members on analyzing and accommodating for the diverse learning styles of all students in order to achieve an inclusive environment in the general education classroom. Training also does not include methods of collaboration among teachers, paraprofessionals, and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. | | |
| **Description of Corrective Action:**  The district has provided professional development to all staff on this topic. The district will continue to provide professional development on inclusive practices and teaching all students. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Agendas and sign-ins from professional development, consultation, department and faculty meetings when appropriate.  Documentation of ongoing work with the principal to build upon the teacher collaboration time that exists in the middle school and in the high school.  Existing online training will include a new component on meeting the needs of diverse learners in the general education setting. | | |
| **Description of Internal Monitoring Procedures:**  Annual sign-in sheets for the annual mandatory trainings with this new addition. Sign-ins from other trainings done at the high school and middle school. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **Corrective Action Plan Status:** Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide documentation of staff training on analyzing and accommodating the diverse learning styles of all students in order to achieve an inclusive environment or methods of collaboration among teachers, paraprofessionals, and teacher assistants to accommodate diverse learning styles of all students in the general education classroom by March 26, 2015. Documentation must include the agendas, signature and title of staff members in attendance, and handouts from professional development, consultation, department and faculty meetings, and online training.  Submit a plan that details how the district will ensure it provides staff with all trainings required by the Department. This plan must include person(s) responsible for knowing requirements and scheduling trainings, how often a training on these tops will be offered, or who will be responsible for tracking individual staff participation and how participation will be documented by March 26, 2015. | | |
| **Progress Report Due Date(s):**  03/26/2015 | | |

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

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Interviews and documents indicate that the district has established a system of oral interpretation to assist parents/guardians with limited English skills, but important information and documents, such as handbooks, codes of conduct, and notices going home are not being translated into the major languages spoken by parents or guardians with limited English skills. | | |
| **Description of Corrective Action:**  The district does provide oral interpretation to assist parents/guardians with limited English skills for school meetings and phone calls. This is only documented in the IEP. Other school meetings, translation is not always documented. Major notices are not always translated into parents' home language.  The district needs to identify what languages are spoken by families in order to know what languages to use when translating important school documents. Family home language surveys will be reviewed, as well as how this is noted on the school database so that families get important school notices in the language they request via the family home language survey. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The district will translate important documents such as, handbooks, codes of conduct and notices for graduation into the major languages identified by parents in the family home language survey when have limited English skills. | | |
| **Description of Internal Monitoring Procedures:**  Annual review of major documents to ensure there are translated versions for parents with limited English skills. | | |
| 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:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district will gather information from home language surveys to determine the languages it will provide translation of important documents such as student handbook, code of conduct and notices. However, the district's plan to ensure ongoing compliance is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  Develop written procedures to annually review information from Home Language Surveys to determine the major languages of the district and translating important documents. These procedures must include person(s) responsible for ensuring each family completes a home language survey, reviewing the content to determine the major languages of the district, and procuring translations of handbooks, codes of conduct and notices in the major languages. | | |
| **Required Elements of Progress Report(s):**  Provide written procedures for how the district processes information from Home Language Surveys that includes person(s) responsible for ensuring each family completes a home language survey and who reviews the content to inform the person in charge of translating important school information, such as handbooks, codes of conduct and notices, into the major languages spoken by the district by March 26, 2015.  Provide the results of the review of Home Language Surveys that includes the number of parents who requested translation of materials disaggregated by the languages they speak by March 26, 2015.  Provide a copy of the student handbook, code of conduct and notices in both English and the major languages of the district and include a statement of how this information was disseminated to students and parents by June 1, 2015. | | |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 | | |

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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:**  Document review and interviews indicate that the student handbook does not include procedures for the discipline of students with Section 504 Accommodation Plans. Also, the handbook does not contain procedures for accepting, investigating and resolving complaints alleging discrimination or harassment. | | |
| **Description of Corrective Action:**  504 will be added the discipline section of the handbook. The addition of procedures for accepting, investigating and resolving complaints alleging discrimination or harassment will be added to the handbook. A Connect Message will go out prompting parents to review the new sections of the handbook posted on the website. It will include page numbers and sections of the updated sections for easy reference. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Revised copy of the handbook and print out of the Connect Ed Message. | | |
| **Description of Internal Monitoring Procedures:**  Annual review of the handbook to ensure that 504 students are included in the discipline section. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district proposes to update the student handbook to include procedures for the discipline of students with Section 504 accommodation plans and also procedures for accepting, investigating and resolving complaints alleging discrimination or harassment. The district will use a Connect Ed Message to inform students, parents, and staff of these changes. However, the district's description of its internal monitoring process to ensure ongoing compliance is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  Develop written procedures to annually review the student handbook to ensure its procedures for the discipline of students with Section 504 Accommodation Plans and procedures for accepting, investigating and resolving complaints alleging discrimination or harassment comply with current law and regulation. | | |
| **Required Elements of Progress Report(s):**  The district must submit a copy of its written procedure to annually review the student handbook to ensure its procedures for the discipline of students with Section 504 Accommodation Plans and procedures for accepting, investigating and resolving complaints alleging discrimination or harassment comply with current law and regulation by March 26, 2015. These written procedures must indicate a timeline for completion and the person(s) responsible for ensuring contents of the student handbook comply with current law, and those responsible for reviewing, publishing and distributing the handbook.  Submit a copy of the section of the student handbook that includes procedures for the discipline of students with Section 504 accommodation plans and also procedures for accepting, investigating and resolving complaints alleging discrimination or harassment by March 26, 2015.    Also submit a copy of the text of the Connect Ed Message sent to students, parents, and staff with the date the Connect Ed Message was sent by March 26, 2015. Submit the address of the link to the district's website where these revisions to the student handbook are posted by March 26, 2015. | | |
| **Progress Report Due Date(s):**  03/26/2015 | | |

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

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| **Criterion & Topic:**  CR 14 Counseling and counseling materials free from bias and stereotypes | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews indicate that the district does not provide English language learners with the opportunity to receive guidance and counseling in a language they understand. | | |
| **Description of Corrective Action:**  Currently the district does not have English Language Learners who do not speak English. Should the district have a student who does not speak English in the future, the district will provide a translator for any student who may need guidance or educational counseling in another language. Should a student need clinical counseling at school in a language other than English, the district would contract out with a local agency to provide counseling in the student's preferred language. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  List of local agencies who provide non-English speaking clinical counseling. List of interpretation services available for use in the local area. | | |
| **Description of Internal Monitoring Procedures:**  Annual review of the list of students' preferred languages. If there are students who require guidance counseling or clinical counseling, a description of the district's action to get those services provided in the student's first language will be provided. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 14 Counseling and counseling materials free from bias and stereotypes | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district will develop a list of local agencies to contact when a student needs to receive guidance and counseling services in a language they understand. However, the district's plan to ensure ongoing compliance is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  Develop written procedures for ensuring that all students receive counseling and guidance services in a language they understand that includes the title of the staff person(s) responsible for gathering information from home language surveys and reviewing this list, time of year/frequency this will be reviewed and how this information will be communicated to counseling professionals who will provide services in the student's home language. | | |
| **Required Elements of Progress Report(s):**  Submit a list of local agencies that have qualified professionals able to provide counseling in a variety of languages or an interpreter if a student were to require counseling services in his or her home language by March 26, 2015. This list must include the name and contact information for each agency and indicate the languages spoken by counselors and interpreters at each.  Submit a written plan of district procedures to annually review the list of students identified through the Home Language Survey as requiring communication in their home language and provide them with the opportunity to receive guidance and counseling services in a language they understand by March 26, 2015. This plan must include the title of the staff person(s) responsible for gathering information from home language surveys and reviewing this list, and indicate what time of year this will be reviewed and how this information will be communicated to professionals who will provide services in the student's home language. | | |
| **Progress Report Due Date(s):**  03/26/2015 | | |

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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:**  Documents and interviews indicate that within ten days from a student's fifteenth consecutive unexcused absence, the district does not provide written notice to students age 16 or over and their parents or guardians informing them that the student and the parent or guardian may meet with a representative of the district within ten days from the date of the notice. The meeting may be extended for up to 14 days at the request of the parent and/or guardian. Also, the district does not send written notice annually for two years to former students who have not yet earned their competency determination and who have not transferred to another school, to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs. | | |
| **Description of Corrective Action:**  The Pupil Services Director, Principal and Guidance Director will develop a written protocol to include the mandatory written notices regarding unexcused absences:  A notice will be sent within ten days from a student's fifteenth consecutive unexcused absence.  The district notice to students age 16 or over and their parents or guardians informing them that the student and the parent or guardian may meet with a representative of the district within ten days from the date of the notice. The meeting may be extended for up to 14 days at the request of the parent and/or guardian.  The district will also develop an written procedure to:  -send written notice annually for two years to former students who have not yet earned their competency determination and who have not transferred to another school, to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Kristen Smidy, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Notices will be kept on file in the student's educational file for two years after their anticipated graduation date. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Approved  **Status Date:** 01/16/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide a written description of how the district will track students who have excessive absences and those who have left school to identity students and parents that require appropriate notification. This description must indicate staff member(s) responsible for gathering data, reviewing the information, distributing these required notices. It must also state how frequently this information will be reviewed and notices will be sent by March 26, 2015.  Provide the template of the newly developed letter that will be sent to students age 16 or over, and their parents, to address absences within 10 days after the 15th day of absence, ensuring it includes the required language 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, and that, at the request of the parent or guardian, the district may consent to an extension of the time for the meeting of not longer than fourteen days, and that the student has the right to return to school after deciding to leave, by March 26, 2015.  Provide the template of the annual written notice that will be sent to former students who have not yet earned their competency determination and who have not transferred to another school in the previous two years, to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs, by March 26, 2015.  Provide a list of students 16 and over who have had 15 days of absence in the 2014-2015 school year, with the copy of the letter that was sent to each student and their parents by June 1, 2015.  Provide a list of former students that left the district without obtaining a diploma or competency determination in the previous two years with a copy of the letter that was sent to each former student by June 1, 2015. | | |
| **Progress Report Due Date(s):**  03/26/2015  06/01/2015 | | |