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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: Billerica

CPR Onsite Year: 2014-2015

Program Area: Special Education

All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report dated 08/17/2015.

**Mandatory One-Year Compliance Date:** **08/17/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| SE 34 | Continuum of alternative services and placements | Partially Implemented |
| SE 52 | Appropriate certifications/licenses or other credentials -- related service providers | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 7B | Structured learning time | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 10 | Anti-Hazing Reports | Partially Implemented |
| CR 11A | Designation of coordinator(s); grievance procedures | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 18 | Responsibilities of the school principal | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |

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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:** Staff and parent interviews indicated that the parent advisory council (PAC) is not regularly participating in the planning, development and evaluation of the district's special education programs. |
| **Description of Corrective Action:** The District will file a request for Waiver with PQA for an acceptable alternate for a district level Special Education PAC as outlined in Administrative Advisory SPED 2015-1R. In the meantime, the district will continue its attempts to elicit parent interest and involvement with the parent community. A request will be posted on the Special Education website, a letter sent to all parents with the annual distribution of Procedural Safeguards Notice and 3 PAC meetings followed by parent trainings will be scheduled by February 1, 2016. |
| **Title/Role(s) of Responsible Persons:**Judith Norton, Director of Special Education | **Expected Date of Completion:**02/01/2016 |
| **Evidence of Completion of the Corrective Action:**1. Request for Waiver acceptance, materials and attendance from the 3 parent trainings.2. Documentation of efforts to recruit parent involvement. |
| **Description of Internal Monitoring Procedures:** The district will continue to post requests for parent involvement with PAC and until a PAC is formed will continue with an acceptable alternative through PQA. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit evidence of the district's completed waiver request that was filed with DESE. (The district uploaded an incomplete waiver request form along with the corrective action submission; a new form addressing question #3 should be completed and sent to DESE as soon as possible.) Also, submit evidence of parents participating in the planning, development, and evaluation of the district's special education programs. |
| **Progress Report Due Date(s):** 11/23/2015 |

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

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| **Criterion & Topic:** SE 34 Continuum of alternative services and placements | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews and parent surveys indicated that the district is not meeting the needs of all students with severe behavioral and emotional needs. While the district has specialized small group programs at the elementary and middle school levels that provide highly structured, multi-sensory and therapeutic learning environments, there is no longer a specific program at the high school for these students. The substantially separate social/emotional based program that offered full curriculum instruction, as well as academic and social/emotional/behavioral supports, is no longer in existence at the high school. Staff interviews indicated that students are now fully included with little supports at the high school level and that some students are not making effective progress and are failing courses. |
| **Description of Corrective Action:** A Billerica Memorial High School Committee has been established to develop programming for students with severe behavioral and emotional needs. Selected staff received training provided by WestEd in March 2015 and developed a 3 tiered outline of services and strategies for students. The committee has met several times and has set an agenda and timeline to establish goals, programming descriptions, personnel responsibilities, PD, staffing needs and full implementation date. |
| **Title/Role(s) of Responsible Persons:**Judith Norton, Director of Special EducationTom Murphy, Principal | **Expected Date of Completion:**02/01/2016 |
| **Evidence of Completion of the Corrective Action:**Finalized program description and documentation of implementation timeline. |
| **Description of Internal Monitoring Procedures:** Agenda and time-line completed by the committee to develop behavioral programming and services for those students with identified needs. Following the completion of the corrective action, the Director of Special Education and Guidance will assess the continuum of services available and provided for students, review the achievement of student behavioral goals to determine effectiveness and on-going needs such as staffing and PD. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 34 Continuum of alternative services and placements | **Corrective Action Plan Status:** Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**   |
| **Department Order of Corrective Action:**  |
| **Required Elements of Progress Report(s):** By November 23, 2015, submit a descriptive summary, including steps taken thus far, in developing programming to meet the needs of students with severe behavioral and emotional needs at the high school. In addition, submit evidence of the committee's planning meetings to include meeting agendas, staff attendance sheets, and a calendar for future committee meeting dates along with a timeline for the implementation of programming for students with severe behavioral and emotional needs. |
| **Progress Report Due Date(s):** 11/23/2015 |

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

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| **Criterion & Topic:** SE 52 Appropriate certifications/licenses or other credentials -- related service providers | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review and an interview indicated that not all related service providers in the district are appropriately licensed. |
| **Description of Corrective Action:** The school social worker passed the MTEL during the summer of 2015. A letter from the Assistant Superintendent has been submitted to DESE. It is expected that the social worker will receive her DESE license by the next CAP progress report date. |
| **Title/Role(s) of Responsible Persons:**Judith Norton, Director of Special Education | **Expected Date of Completion:**11/01/2015 |
| **Evidence of Completion of the Corrective Action:**Copy of DESE License |
| **Description of Internal Monitoring Procedures:** The Director of HR, monitors and maintains district compliance with teacher licensure and re-licensure, SESA, FLMA, ADA, MTRS, CORI, and other applicable laws and regulations. Additionally, he/she monitors evaluation of documentation (e.g. employment verification forms, applications, salary schedules, changes in employment status, licensure renewals, etc.) in conformance with CBA, and district policies and state requirements. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 52 Appropriate certifications/licenses or other credentials -- related service providers | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district submitted a staff list with licensure information for all school counselors; all counselors are appropriately licensed by DESE and/or the state of Massachusetts. The district did not, however, provide any licensure information for its physical therapists, for which there was an issue at the time of the on-site review. The district also did not indicate an internal monitoring process to ensure appropriate licensure for all related service providers. |
| **Department Order of Corrective Action:**Develop an internal monitoring process to ensure appropriate licensure for all related service providers and submit current licensure information for the physical therapist whose name was previously provided to the district. If the physical therapist is no longer employed in the district, compose a statement of assurance indicating this. |
| **Required Elements of Progress Report(s):** Submit a detailed description of the internal monitoring process to ensure appropriate licensure for all physical therapists. In addition, for the physical therapist who was in question, submit evidence of current licensure, or a statement of assurance from the district indicating that the physical therapist in question is no longer employed in the district. |
| **Progress Report Due Date(s):** 11/23/2015 |

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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:** Document review and staff interviews indicated that not all professional and paraprofessional staff are regularly trained on analyzing and accommodating diverse learning styles of all students in order to achieve an objective of inclusion in the general education classroom of students with diverse learning styles, and methods of collaboration among teachers, paraprofessionals and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. |
| **Description of Corrective Action:** All professional staff and paraprofessional staff will be trained on analyzing and accommodating diverse learning styles, methods of collaboration and special education regulations. The paraprofessional staff received the training on September 3, 2015. The professional staff will complete the training by October 15, 2015. |
| **Title/Role(s) of Responsible Persons:**Judith Norton, Director of Special Education | **Expected Date of Completion:**10/15/2015 |
| **Evidence of Completion of the Corrective Action:**Training tools (power points) and sign-in sheets |
| **Description of Internal Monitoring Procedures:** This training will be incorporated into our annual mandatory trainings conducted each year at the start of each school year. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 54 Professional development | **Corrective Action Plan Status:** Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit evidence of general education and special education teacher training on inclusive teaching practices and methods of collaboration among teachers, paraprofessionals and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. The district already submitted evidence of paraprofessional training that took place on September 3, 2015, but evidence of the provision of training for the paraprofessionals who missed the training must also be submitted. |
| **Progress Report Due Date(s):** 11/23/2015 |

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

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| **Criterion & Topic:** SE 55 Special education facilities and classrooms | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Observations and staff interviews indicated that the location of spaces used for the provision of related services at the Ditson Elementary School does not always allow for confidentiality of students receiving such services. Specifically, the social worker's office can only be accessed through the media lab classroom space, which is frequently used by general education classes. Students receiving special education support have to walk through classes that are in session, thereby not allowing for confidentiality. At the Hajjar Elementary School, the movement break room for special education students is located in an area that was previously used as a janitorial storage space. This room has an uncovered, built-in sink in the floor, which is unsafe for students using this space to take movement breaks. In addition, at Hajjar Elementary School, in order to access the social worker's office students have to walk through group counseling sessions taking place in the open space in the related service office suite, thereby not allowing for confidentiality. At the high school, special education classes are not fully integrated into the life of the school to maximize inclusion. Specifically, there is a cluster of five special education academic support and small group classrooms located on a first floor corner wing of the building; other than students with special education needs, no other students are passing through this wing of the building. |
| **Description of Corrective Action:** The high school special education classrooms have been changed so that compliance is complete. The Ditson Elementary social worker's space has been moved to provide for confidentiality. The Hajjar Elementary School space has been configured to allow for confidentiality. No students are services outside the individual offices in the suite. The Hajjar movement break room is scheduled to be renovated by October 15, 2015. |
| **Title/Role(s) of Responsible Persons:**Director of Special EducationDirector of Guidance | **Expected Date of Completion:**11/01/2015 |
| **Evidence of Completion of the Corrective Action:**School map with descriptions. Picture of the movement break room at Hajjar. |
| **Description of Internal Monitoring Procedures:** The Director of Special Education and Director of Guidance will require maps of each school annually outlining the special education and general education spaces. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By November 23, 3015, submit a descriptive summary that provides an update and timeline on the renovation of the movement break room at the Hajjar Elementary School. Indicate where the movement breaks are temporarily taking place and include a building map. (The district already submitted a building map indicating the reconfiguration of the related services suite and may resubmit this map with the addition of the location of the movement break room.) In addition, by November 23, 2015, submit a descriptive summary of the changes and classroom relocations that were made at the high school and include a building map specifically indicating the utilization of classroom spaces in the first floor corner wing of the building, noting the names/subjects for the special education classrooms and the general education classrooms. By February 19, 2016, the Department will conduct on-site visits to verify relocation of the instructional spaces at the Ditson Elementary School, Hajjar Elementary School, and the high school. |
| **Progress Report Due Date(s):** 11/23/201502/19/2016 |

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

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| **Criterion & Topic:** CR 7B Structured learning time | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that students are not required to take part in physical education all four years of high school. Specifically, students in grades 11 and 12 are not required to participate in physical education. |
| **Description of Corrective Action:** All students will be required to take part in physical education all four years of high school. Students will meet the requirement by participating in a physical education course or an organized program of instructional physical activity such as participation in interscholastic athletics, or through a private instructor or a community program, or through an independent study. |
| **Title/Role(s) of Responsible Persons:**Melinda Cripps, Guidance DirectorThomas Murphy, PrincipalDavid Lezenski, Athletic Director | **Expected Date of Completion:**08/16/2016 |
| **Evidence of Completion of the Corrective Action:**Evidence of completion of corrective action will be reflected in the language in the Program of Studies and the Parent / Student Handbook and in the graduation requirements. |
| **Description of Internal Monitoring Procedures:** The 4 year requirement of physical education will be tracked and monitored by the guidance department when assessing graduation requirements, and will be posted in the Aspen student information system graduation summary. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 7B Structured learning time | **Corrective Action Plan Status:** Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit evidence of the publication of the four year physical education graduation requirement in the 2015-2016 Program of Studies and Parent/Student Handbook. In addition, submit a detailed plan as to how the guidance department, athletic director, and principal will regularly track and monitor the students fulfilling the physical education requirement through alternative measures, such as participation in interscholastic athletics, independent study or through a private instructor or community program. |
| **Progress Report Due Date(s):** 11/23/2015 |

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

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| **Criterion & Topic:** CR 9 Hiring and employment practices of prospective employers of students | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the district does not require employers recruiting at the high school to sign a statement indicating that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices on the basis of race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. |
| **Description of Corrective Action:** Employers recruiting at the high school will sign a statement indicating that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices on the basis of race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. |
| **Title/Role(s) of Responsible Persons:**Melinda Cripps, Guidance DirectorThomas Murphy, Principal | **Expected Date of Completion:**08/16/2016 |
| **Evidence of Completion of the Corrective Action:**A form will be developed for employers recruiting at high school to sign a statement indicating the employer complies with applicable federal and state laws prohibiting discrimination. |
| **Description of Internal Monitoring Procedures:** Annually the guidance director will review with staff the form employers recruiting student need to complete. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** The district submitted a copy of its newly developed non-discrimination statement of assurance for employers recruiting at the high school to sign prior to recruiting and employing any high school students. The district must submit completed copies of these forms evidencing that the district is requiring potential employers of students to sign non-discrimination statements of assurance and ensuring compliance with applicable federal and state laws prohibiting discrimination in hiring or employment practices. |
| **Progress Report Due Date(s):** 11/23/2015 |

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

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| **Criterion & Topic:** CR 10 Anti-Hazing Reports | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the school is not maintaining a record of signed anti-hazing policy acknowledgements from designated officers of student groups and organizations; records are maintained for sports teams only. |
| **Description of Corrective Action:** Students participating in clubs sign the anti hazing policy and a record is kept. |
| **Title/Role(s) of Responsible Persons:**Thomas Murphy, PrincipalDebbie Kingston, Principal's Secretary | **Expected Date of Completion:**09/17/2015 |
| **Evidence of Completion of the Corrective Action:**A form is currently in use, but had not been submitted in the original self assessment. The form has been uploaded in additional documents. |
| **Description of Internal Monitoring Procedures:** Currently the principal's secretary sends out the form to club advisers and maintains a record of the signed anti-hazing policy. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10 Anti-Hazing Reports | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district indicated that it has a student acknowledgement form for its anti-hazing policy and submitted a copy of this form. Staff interviews and documentation indicated that at the time of the review, the district was not having designated officers of student groups and organizations sign this form and maintaining these records. It was only doing so for sports teams. As a result, the district must notify staff of the mandated use of these forms for all student teams, groups, and organizations. |
| **Department Order of Corrective Action:**Notify all high school staff of the mandated use of the student acknowledgement forms for the district's anti-hazing policy for all student teams, groups, and organizations. |
| **Required Elements of Progress Report(s):** Submit evidence of notification to all high school staff on the mandated use of the student acknowledgement forms for the district's anti-hazing policy for all student teams, groups, and organizations. Also, submit sample copies of signed anti-hazing acknowledgement forms from designated officers of student groups and organizations for the 2015-2016 school year. |
| **Progress Report Due Date(s):** 11/23/2015 |

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

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| **Criterion & Topic:** CR 11A Designation of coordinator(s); grievance procedures | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review indicated that the district does not publish the name, address, and telephone number of its designated Title II Coordinator. |
| **Description of Corrective Action:** The district will publish the name, address, and telephone number of its designated Title II Coordinator. |
| **Title/Role(s) of Responsible Persons:**Melinda Cripps, Director of Guidance | **Expected Date of Completion:**08/16/2016 |
| **Evidence of Completion of the Corrective Action:**The name, address, and telephone number of the Title II Coordinator will be added to the district website, the student handbook, and the staff training presentation. |
| **Description of Internal Monitoring Procedures:** Each year the Director of Guidance will ensure that the Title II Coordinator information is placed on the district website and in the student handbook. The Superintendent's office will ensure that the information will be presented in PowerPoint form each year to the staff. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 11A Designation of coordinator(s); grievance procedures | **Corrective Action Plan Status:** Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit evidence of the publication of the name, address, and telephone number of the district's designated Title II Coordinator. Note that this publication must be accessible to all students, parents, and staff. |
| **Progress Report Due Date(s):** 11/23/2015 |

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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:** Document review and staff interviews indicated that the district is not sending annual written notice to former students, who have not yet earned their competency determination and who have not transferred to another school, informing them of the availability of publicly funded post-high school academic support programs and encouraging participation in those programs. |
| **Description of Corrective Action:** The guidance department will be responsible for notifying students who leave school before earning their competency determination of post-high school academic support programs that are publicly funded. This notice will be sent annually for two years following withdrawal from school. |
| **Title/Role(s) of Responsible Persons:**Melinda Cripps, Director of Guidance | **Expected Date of Completion:**08/16/2016 |
| **Evidence of Completion of the Corrective Action:**Please see letter and packet attached. |
| **Description of Internal Monitoring Procedures:** The Guidance Department will be responsible for keeping a document recording when the written notice of the publicly funded post-high school programs is sent to each student that has left school before earning their competency determination. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** The district submitted a copy of its annual notice that will be sent to former students, who have not yet earned their competency determination and who have not transferred to another school, informing them of the availability of publicly funded post-high school academic support programs and encouraging participation in those programs. The district must now submit a list of former students, by initials, to whom the annual written notices were sent for this school year and indicate the dates on which the letters were sent. |
| **Progress Report Due Date(s):** 11/23/2015 |

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

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| **Criterion & Topic:** CR 18 Responsibilities of the school principal | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews indicated that the district's Curriculum Accommodation Plan (DCAP) is inconsistently implemented across grade levels and staff were not always aware of the plan or understood the supports in place to meet the needs of diverse learners in the general education classroom. Record review also indicated that when a student is referred for a special education evaluation, the student record does not include documentation on the use of instructional support services that were implemented prior to a student's referral. |
| **Description of Corrective Action:** A committee was convened during the 2014-2015 school year of teachers, coordinators and administrators to revise the DCAP. |
| **Title/Role(s) of Responsible Persons:**Thomas Murphy, PrincipalMelinda Cripps, Guidance Director | **Expected Date of Completion:**08/17/2016 |
| **Evidence of Completion of the Corrective Action:**The district has revised its DCAP to support the needs of diverse learners in the general education classroom. Annually the district will incorporate training on the instructional supports and the use of a DCAP. During the 2015-2016 school year the District will review with all staff the revised DCAP.A form will be developed and used to summaries the instructional supports used prior to a student's special education services. |
| **Description of Internal Monitoring Procedures:** Principal will ensure that the professional development on instructional supports is completed annually. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district indicated that the DCAP was revised in order to better support the needs of diverse learners within the general education classroom, and a copy of the revised DCAP was submitted. The district also noted that staff will be trained on the revised DCAP this year and a form will be developed in order to document instructional supports that were used prior to a student's referral for special education services. In the future, the district indicated that it will provide annual training on the DCAP. The district did not, however, indicate a manner in which it will oversee the use of the DCAP supports being documented and evidenced in the initial special education student records. |
| **Department Order of Corrective Action:**In order to ensure compliance with the use of the DCAP form and documentation of instructional supports that were implemented prior to a student's referral for special education, a special education administrative staff member should conduct an internal review of a representative sample of records in which initial IEPs were developed subsequent to implementation of all corrective actions. |

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| **Required Elements of Progress Report(s):** By November 23, 2015, submit evidence of staff training on the district's DCAP and implementation guidelines for various grade levels, and the instructional services and supports that will be consistently utilized by all schools. Evidence should include dated meeting agendas, staff attendance sheets, and training materials. Also, submit a copy of the DCAP form that will be used to document instructional support services that were implemented prior to a student's referral for special education.By February 19, 2016, submit a report of the results of an internal review of records in which initial IEPs were developed subsequent to implementation of all corrective actions, and include the following: the number of student records reviewed; the number of records in compliance; for any records not in compliance, determine the root cause(s) of the non-compliance; and the district's plan to remedy the non-compliance. \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s). |
| **Progress Report Due Date(s):** 11/23/201502/19/2016 |

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

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| **Criterion & Topic:** CR 23 Comparability of facilities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** See SE 55. |
| **Description of Corrective Action:** The high school special education classrooms have been incorporated throughout the building to allow students equal access to the building. |
| **Title/Role(s) of Responsible Persons:**Tom Murphy, Principal of BMHSMindy Cripps, Director of Guidance | **Expected Date of Completion:**11/01/2015 |
| **Evidence of Completion of the Corrective Action:**School map with descriptions has been uploaded. |
| **Description of Internal Monitoring Procedures:** The Director of Special Education and Director of Guidance will require maps of each school annually outlining the special education and general education spaces. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 23 Comparability of facilities | **Corrective Action Plan Status:** Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** See SE 55. |
| **Progress Report Due Date(s):** 11/23/201502/19/2016 |

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

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| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the district is not evaluating all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. |
| **Description of Corrective Action:** The district will evaluate all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. |
| **Title/Role(s) of Responsible Persons:**Dede Galdston, Assistant Superintendent of SchoolsDistrict Coordinators & Building Principals | **Expected Date of Completion:**08/16/2016 |
| **Evidence of Completion of the Corrective Action:**In order to provide evidence of completion of corrective action, at the annual review an agenda will be set and meeting notes will be documented. |
| **Description of Internal Monitoring Procedures:** Each year, a meeting will be held to review all K-12 programs to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district indicated that it will evaluate all aspects of its K-12 program annually to ensure that all students have equal access to all programs, including athletics and other extracurricular activities, by means of an annual review meeting with the Assistant Superintendent, District Coordinators, and school principals. The district did not indicate when this meeting will take place, nor did it indicate how all programming will be evaluated, and a means in which equal access data/information will be collected and summarized. |
| **Department Order of Corrective Action:**Develop a specific plan and timeline for when the annual review meeting will take place and how all aspects of the K-12 programming will be evaluated, as well as a means in which equal access data/information will be collected and summarized. Then, conduct the institutional self-evaluation. |
| **Required Elements of Progress Report(s):** By November 23, 2015, submit a descriptive summary of the specific plan and timeline for the district's annual review meeting to include a meeting date, a description of how all aspects of its K-12 programming will be evaluated, and how equal access data/information will be collected.By February 19, 2016, submit a copy of the institutional self-evaluation, indicating changes that will be made as a result of the evaluation. |
| **Progress Report Due Date(s):** 11/23/201502/19/2016 |