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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: Medway

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 04/29/2015.

**Mandatory One-Year Compliance Date:** **04/29/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 55 | Special education facilities and classrooms | 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 55 Special education facilities and classrooms | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Interviews and onsite observations at the John D. McGovern Elementary School indicated that the building contains three large pods, one located at the end of each wing of the building. One pod is used for occupational therapy and physical therapy services and while the walls for this pod are six feet in height, there is a large opening for the entrance/exit that does not have a door. Students passing in the hallway can observe the services taking place, leading to visual distractions, auditory distractions and a lack of confidentiality. | | |
| **Description of Corrective Action:**  Install a door in the PT space a the McGovern school so that visual and auditory distractions are minimize and confidentiality is maintained. | | |
| **Title/Role(s) of Responsible Persons:**  Kathleen M. Bernklow, Director Student Services  Peggy Yanuskiewicz, Principal | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Door installed in PT space at the McGovern school | | |
| **Description of Internal Monitoring Procedures:**  School principal, Maintenance Director and SpEd Administration will walk the school at the beginning of each school year to ensure that students therapy spaces meet requirements of this criterion. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved  **Status Date:** 06/01/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By September 18, 2015, the Department will conduct an on-site verification visit to ensure that the John D. McGovern Elementary School's occupational and physical therapy space has a door installed in the opening for the exit/entrance. This will minimize visual distractions, auditory distractions and provide confidentiality. | | |
| **Progress Report Due Date(s):**  09/18/2015 | | |

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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:**  A review of documentation and interviews indicated that the district does not 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, regardless of race, color, sex, religion, national origin, gender identity, limited English proficiency, sexual orientation, disability, or housing status. | | |
| **Description of Corrective Action:**  Institutional self review template | | |
| **Title/Role(s) of Responsible Persons:**  Kathleen M Bernklow, Director of Student Services  Medway Principals  Medway Athletic Director | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Medway Public Schools will create a template to evaluate the 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 extracurricular activities. Medway Public Schools will recommend changes based on the results of the evaluation | | |
| **Description of Internal Monitoring Procedures:**  At the annual leadership retreat, Medway administration will review the results of the self evaluation and recommend needed changes (if any) upon those results. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 06/01/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By September 18, 2015, the district will submit a copy of its institutional self-evaluation. | | |
| **Progress Report Due Date(s):**  09/18/2015 | | |

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

District: Medway Public School District

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Gabrielle Abrams, Assistant Superintendent

CAP Form will expand to as many lines as necessary. Before completing and emailing to pqacap@doe.mass.edu, please see separate *Instructions for Completing Corrective Action Plans.*

*All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report to the school or district.*

**Mandatory One-Year Compliance Date: October 20, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 5 Program Placement and | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of district documentation indicated that the district does not provide sufficient ESL instruction to promote and support the rapid acquisition of English language proficiency by ELL students as is required in G.L. c. 71A.*  *It is also stated in the documentation that the district does not have an ESL curriculum used for the ESL instruction or a plan to develop one. Therefore, there is no evidence showing whether the time dedicated to ESL services is used for English language development.* | | | |
| **Narrative Description of Corrective Action:**   * Medway Public Schools has supported the addition of a .2 ELL teacher at our Primary school who services 6 students. (Fall 2015) * As our ELL student numbers increase, there is an interest and plan to decentralize our ELL staff and have one staff per building responsible for ELD instruction. (Fall 2016) * For the FY16 school year, we have increased contact time for many of our students but still struggle to provide recommended time for our Transitional Level students due to the fact that there are oftentimes so few per grade and this would result in lack of developmentally appropriate time with age alike peers. (Fall 2016) * Ordering of Common Core aligned ELD resources from CENGAGE learning has taken place. (Fall 2015) * We have attended the low incidence convening to learn more about the DESE curriculum development project and have developed a plan to organize a low incidence district job alike curriculum development task force for the purpose of collaborating on appropriate ELD Curriculum development. As well, there is a plan identify and secure a pre-school screener to flag students in this age group. (On-going - Spring 2017) | | | |
| **Title/Role of Person(s) Responsible for Implementation:**      Gabrielle Abrams, Assistant Superintendent | | **Expected Date of Completion for Each Corrective Action Activity:**      Please see above. | |
| **Evidence of Completion of the Corrective Action:**    increase in FTEs associated with ELD instruction, documentation of ELD curriculum, increase in contact hours of transitional ELL students | | | |
| **Description of Internal Monitoring Procedures:**  Monthly meetings with ELL staff; professional development time allocation to ELD work; ACCESS and MCAS data | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 5** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:**  N/A | | | |
| **Department Order of Corrective Action:**   N/A | | | |
| **Required Elements of Progress Report(s):**   1. Please complete district information in the attached spreadsheet labeled ELL List by school for each ELL student in the district. 2. Please provide the Department with information about the process of developing ESL/ELD curriculum that will reflect the content to be taught and address the instructional needs of the ELL population at all levels. | | | |
| **Progress Report Due Date(s):  February 26, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 17 Program Evaluation | | | **Rating:** Not Implemented |
| **Department CPR Finding:** *The district submitted the draft of a self assessment of their CPR review as their program evaluation. Based on the lack of evidence, the Department concludes that the district does not have a comprehensive process to evaluate the effectiveness of its ELE programming in developing students’ English language skills and increasing their ability to participate meaningfully in the district’s educational program. Please see* [*http://www.doe.mass.edu/ell/ProgramEvaluation.pdf*](http://www.doe.mass.edu/ell/ProgramEvaluation.pdf) *.* | | | |
| **Narrative Description of Corrective Action:**   Adopt the DESE recommended program evaluation tool | | | |
| **Title/Role of Person(s) Responsible for Implementation:**    Gabrielle Abrams, Assistant Superintendent | | **Expected Date of Completion for Each Corrective Action Activity:**    Spring 2016 | |
| **Evidence of Completion of the Corrective Action:**      Completed program evaluation | | | |
| **Description of Internal Monitoring Procedures:**      Bi-monthly leadership meetings with principals, monthly ELL meetings | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 17** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:**   N/A | | | |
| **Department Order of Corrective Action:**   N/A | | | |
| **Required Elements of Progress Report(s):**   1. Please provide a copy of the most recent evaluation conducted by the district to identify the strengths and areas of improvement in developing ELLs’ English language skills and increasing their ability to participate meaningfully in the district’s educational program. 2. Please submit the description of program adjustments or changes made in response to the most recent ELE program evaluation. | | | |
| **Progress Report Due Date(s):  June 29, 2016** | | | |