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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: Wareham

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 08/28/2015.

**Mandatory One-Year Compliance Date:** **08/28/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 14 | Review and revision of IEPs | Partially Implemented |
| SE 22 | IEP implementation and availability | Partially Implemented |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| SE 36 | IEP implementation, accountability and financial responsibility | Partially Implemented |
| SE 48 | Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education | Partially Implemented |
| SE 49 | Related services | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 7C | Early release of high school seniors | Not Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 22 | Accessibility of district programs and services for students with disabilities | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 26A | Confidentiality and student records | Partially Implemented |

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| **Criterion & Topic:** SE 8 IEP Team composition and attendance | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Record review, staff interviews, and parent surveys indicated that a regular education teacher is not always present at IEP Team meetings in which the student may be involved or is involved in the regular education program. When a member of the Team is not present at the IEP Team meeting, the district does not follow appropriate procedures for excusing the Team member, which include:The district and the parent agreeing, in writing, that the attendance of the Team member is not necessary because the member´s area of the curriculum or related services is not being modified or discussed; orThe district and the parent agreeing, in writing, to excuse a required Team member´s participation and the excused member providing written input into the development of the IEP to the parent and the IEP Team prior to the meeting. |
| **Description of Corrective Action:** The district has developed excusal forms for use at team meetings for the purposes described above. The Director of Student Services will provide training for the team chairs regarding appropriate use of these forms. |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**Training agendas with attendance sheets and training materials will be submitted along with samples of the excusal forms. |
| **Description of Internal Monitoring Procedures:** The Director of Student Services will conduct on-site school based file reviews and collect data pertaining to the use of excusal forms when required in team meetings. Results of the data will be submitted. The on-site file reviews will occur 3 times. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district indicated that excusal forms were developed in order to excuse required Team members' attendance at IEP Team meetings and that Team chairpersons would be trained on the use of the excusal forms. The district did not, however, indicate that it would review the requirement of having a general education teacher present at IEP Team meetings in which the student may be involved or is involved in the regular education program. |
| **Department Order of Corrective Action:**In addition to the provision of training for Team chairpersons on the use of the excusal form, provide training on the requirement of having a general education teacher present at IEP Team meetings for students who may be involved or are involved in the regular education program. |
| **Required Elements of Progress Report(s):** By December 8, 2015, submit evidence of Team chairperson training on the requirement of having a general education teacher present at IEP Team meetings in which the student may be involved or is involved in the regular education program and the procedures to be followed if a required Team member is unable to attend, including the appropriate use of the Team member excusal form. Evidence should include a dated meeting agenda, staff attendance sheet, and training materials. By February 29, 2016, submit a report of the results of an internal review of records, in which IEP Team meetings were held 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):** 12/08/201502/29/2016 |

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| **Criterion & Topic:** SE 14 Review and revision of IEPs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Record review and parent surveys indicated that the district is not always conducting an annual review Team meeting on or before the anniversary date of the 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:** The Director of Student Services will conduct training for the team chairs regarding timelines pertaining to annual review meetings. She will work with the team chairs to develop a meeting schedule for the year. |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**Training agendas, attendance sheets, and materials will be submitted. |
| **Description of Internal Monitoring Procedures:** The Director of Student Services will conduct on-site file reviews in each building to monitor compliance in this area. Data will be collected and submitted. Three on-site reviews will take place in each school building. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 14 Review and revision of IEPs | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 8, 2015, submit evidence of Team chairperson training on adherence to annual review meeting timelines. Evidence should include a dated meeting agenda, staff attendance sheet, and training materials. By February 29, 2016, submit a report of the results of an internal review of records in which IEP Team meetings were held 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):** 12/08/201502/29/2016 |

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| **Criterion & Topic:** SE 22 IEP implementation and availability | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews indicated that at the high school, not all teachers described in the IEP are specifically informed of their responsibilities related to the implementation of the IEP and the specific accommodations, modifications, and supports that must be provided pursuant to it. Interviews also indicated that not all high school students are receiving services consistent with their signed IEPs. |
| **Description of Corrective Action:** The goal of the training will be to develop a plan for keeping teachers fully informed of their responsibilities pertaining to the implementation of the IEP. We will also develop a system of oversight to ensure that all SPED students receive services as outlined on the IEP. |
| **Title/Role(s) of Responsible Persons:**The Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**Training agendas, materials, and sign in sheets will be submitted, along with a description of the plan for keeping teachers fully informed and the plan for ensuring that all SPED students receive the services on their IEP. Evidence of meeting with teachers will also be included. |
| **Description of Internal Monitoring Procedures:** The Director of Student Services will conduct 3 on-site reviews of files and will review student schedules to make sure they are receiving the appropriate SPED services. Results of an internal monitoring system regarding informing teachers will also be reviewed and submitted. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 22 IEP implementation and availability | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 8, 2015, submit evidence of high school teachers being specifically informed/trained on their responsibilities related to the implementation of the IEP and the specific accommodations, modifications, and supports that must be provided pursuant to it. Also, provide a descriptive summary of the procedures in place for overseeing and ensuring that all high school students are receiving services consistent with their signed IEPs. By February 29, 2016, submit a report of the results of an internal review of student records for high school students receiving "pull-out" and "push-in" support services in which the 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):** 12/08/201502/29/2016 |

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| **Criterion & Topic:** SE 32 Parent advisory council for special education | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Parent and staff interviews indicated that the parent advisory council (PAC) is not regularly participating in the planning, development and evaluation of the district's special education programs. |
| **Description of Corrective Action:** The Director of Student Services will meet regularly with representatives of the PAC in order to keep them informed, to develop a strong partnership with mutual goals and to include them in the planning, development and evaluation of our SPED programs. |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**Meeting agendas and signatures will be provided along with a summary of the meetings. |
| **Description of Internal Monitoring Procedures:** Meetings will be scheduled in advance in order to ensure their regularity. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit a 2015-2016 school year calendar for scheduled meetings with district administrators and parent advisory council (PAC) members in which parents will participate in the planning, development, and evaluation of the district's special education programs. In addition, submit evidence of any meetings that have been held since the beginning of the school year along with any additional supporting evidence of communications with PAC members that reflect participation in the planning, development and evaluation of the district's special education programs. |
| **Progress Report Due Date(s):** 12/08/2015 |

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| **Criterion & Topic:** SE 36 IEP implementation, accountability and financial responsibility | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** See SE 22. |
| **Description of Corrective Action:** see SE 22 |
| **Title/Role(s) of Responsible Persons:**see SE 22 | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**see SE 22 |
| **Description of Internal Monitoring Procedures:** see SE 22 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 36 IEP implementation, accountability and financial responsibility | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** See SE 22. |
| **Progress Report Due Date(s):** 12/08/201502/29/2016 |

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| **Criterion & Topic:** SE 48 Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews indicated that high school students in the Young Adult Program for students with cognitive delays ages 18 - 22 do not have the opportunity to participate in art, music, or vocational education elective classes with their general education peers. Observations and staff interviews indicated that preschool students in the district's two full day substantially separate programs at Minot Forest Elementary School do not have access to any outdoor areas for recess. While all other full day elementary school students go outside for recess, students in the full day substantially separate preschool programs are not allowed outside due to safety concerns, as there is no fenced in area for these students. |
| **Description of Corrective Action:** The Director of Student Services will meet with staff at the high school regarding inclusion of the students in the Young Adult Program in music, art and voc. ed. elective classes with their general ed. peers. Plans will be made, and schedules developed to reflect the changes. The outdoor area at Minot has already been altered so students can participate in outside recess. |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**Student schedules will be submitted along with a meeting agenda, sing-in sheet and meeting summary. Ms. Benjamin already observed the changes at Minot pertaining to the playground. |
| **Description of Internal Monitoring Procedures:** During periodic on-site file reviews, the Director of Student Services will ask to review current student schedules to ensure ongoing compliance. The schedules will be submitted. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 48 Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** When the Department visited the district for a Corrective Action Plan (CAP) meeting on September 9, 2015, a site visit was conducted at the Minot Forest Elementary School to verify that the preschool students now have access to a safe, outdoor play area. The district has constructed a new, age appropriate play area for younger students; it is accessible to all students and the principal reported that all students receive a fifteen minute daily period of recess. No further actions are required. Submit evidence of high school staff notification of the need for general education inclusion for students in the Young Adult Program. Also, submit a class roster and copies of all schedules for students in the Young Adult Program evidencing that each student has the opportunity to participate in art, music, or vocational education elective classes with their general education peers. |
| **Progress Report Due Date(s):** 12/08/2015 |

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| **Criterion & Topic:** SE 49 Related services | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews indicated that high school students are not receiving the appropriate amount of special education counseling services, as IEP Teams are writing IEPs based on staff availability and not individual student need. A school psychologist provides counseling for some students once per week, but according to staff, students' social/emotional needs are not met given the current staffing levels. |
| **Description of Corrective Action:** A full-time licensed social worker and a full time school psychologist have both been hired for the high school. As a result, students with counseling on their IEP's are receiving their services. |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**Student schedules will be submitted with evidence of counseling services. |
| **Description of Internal Monitoring Procedures:** During on-site file reviews, the Director of student services will check current student schedules to ensure ongoing compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 49 Related services | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 8, 2015, submit evidence of the hiring of the full-time licensed social worker and school psychologist at the high school. Evidence should include job descriptions, copies of the social worker and school psychologist's service delivery schedules, and representative sample copies of students' service delivery grids indicating regularly scheduled counseling services with the social worker and/or school psychologist. By February 29, 2016, submit a report of the results of an internal review of records for high school students receiving counseling services, in which the 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):** 12/08/201502/29/2016 |

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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 general education teachers, special education teachers and paraprofessionals 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:** Workshops will be developed at the building level by Special Education staff. The audience will include general ed. and special ed. teachers and paraprofessional. Topics will include methods of collaboration and supporting students with diverse learning styles in an inclusion setting. |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**Training agendas, attendance sheets, and training materials will be submitted as evidence. |
| **Description of Internal Monitoring Procedures:** The Director of Student Services will work closely with the special ed. staff in each building to monitor the development and implementation of the training. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 54 Professional development | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit evidence of training for general education teachers, special education teachers and paraprofessionals on the topics of methods of collaboration and supporting students with diverse learning styles in inclusion settings. Evidence should include dated meeting agendas, staff attendance sheets, and training materials. |
| **Progress Report Due Date(s):** 12/08/2015 |

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| **Criterion & Topic:** SE 55 Special education facilities and classrooms | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews and observations indicated that the substantially separate autism spectrum disorder (ASD) program for grades 5-8 at Wareham Middle School is located in a back hallway which no other students pass through and is surrounded only by district technology offices. The location of this classroom does not maximize the inclusion of such students into the life of the school.Staff interviews and observations also indicated that at Minot Forest Elementary School, the substantially separate preschool classroom for students with ASD is located in a partition-divided classroom shared with occupational therapy (OT) and physical therapy (PT). The ASD classroom can have up to nine students, three paraprofessionals, and one teacher in an overcrowded space and the partition is not soundproof, leading to significant auditory distractions for the ASD class, as well as for OT and PT service delivery. In addition, the grade 3-4 substantially separate program for students with significant developmental delays is located in a very small classroom with six students, two paraprofessionals, and one teacher, causing it to become overcrowded. |
| **Description of Corrective Action:** The classroom at the middle school will be relocated. The classroom issues described above at Minot have already been resolved. |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**Maps of the buildings will be submitted as evidence of relocation. |
| **Description of Internal Monitoring Procedures:** The Director of Student Services will work with the middle school principal on appropriate relocation of the ASD classroom. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district indicated that the ASD program at the middle school will be relocated and the classroom issues at the Minot Forest Elementary School have already been resolved. The district did not, however, provide any details as to how the classroom issues have been resolved at the Minot Forest, nor did it indicate any specific plans and a timeline for the relocation of the ASD program at the middle school. |
| **Department Order of Corrective Action:**Develop a descriptive summary of the re-designation of spaces at the Minot Forest Elementary School, specifically indicating how the classroom space issues have been resolved for the substantially separate preschool classroom for students with ASD, the OT and PT space, and the grade 3-4 substantially separate program for students with significant developmental delays. Also, develop a plan and timeline for which the Director of Student Services and the middle school principal will relocate the ASD classroom in order to maximize the inclusion of students. |
| **Required Elements of Progress Report(s):** By October 23, 2015, submit the descriptive summary of the re-designation of spaces at the Minot Forest Elementary School, specifically indicating how the classroom space issues have been resolved for the substantially separate preschool classroom for students with ASD, the OT and PT space, and the grade 3-4 substantially separate program for students with significant developmental delays. Include a building map indicating the relocation of spaces and the surrounding classrooms. Also by October 23, 2015, submit a detailed plan and timeline for the relocation of the ASD classroom at the middle school. By December 8, 2015, submit building maps indicating the relocation of the ASD classroom at the middle school and the surrounding classrooms. By February 29, 2016, DESE will conduct site visits to the Minot Forest Elementary School and the middle school to verify the classroom spaces and relocations. |
| **Progress Report Due Date(s):** 10/23/201512/08/201502/29/2016 |

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| **Criterion & Topic:** CR 3 Access to a full range of education programs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** See SE 48. |
| **Description of Corrective Action:** see se 48 |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**see se 48 |
| **Description of Internal Monitoring Procedures:** see se 48 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 3 Access to a full range of education programs | **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 48. |
| **Progress Report Due Date(s):** 12/08/2015 |

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| **Criterion & Topic:** CR 7C Early release of high school seniors | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the district is releasing high school seniors more than 12 school days before the regular scheduled closing date of the school. |
| **Description of Corrective Action:** The Director of Student Services will work with the superintendent and high school principal to adjust the school schedule in order to be compliant with this timeline. |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**A calendar will be submitted for review. |
| **Description of Internal Monitoring Procedures:** We will check the school calendar. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 7C Early release of high school seniors | **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 an updated Student Learning Time Worksheet for the 2015-2016 school year along with a school year calendar evidencing that the conclusion of the seniors' school year nor graduation is more than 12 school days before the regular scheduled closing date of the high school. |
| **Progress Report Due Date(s):** 10/23/2015 |

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| **Criterion & Topic:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review and staff interviews indicated that the district does not publish the names, office addresses, and phone numbers of the persons designated as its non-discrimination coordinators for coordinating compliance under Title IX and Section 504 . The district lists only the titles of the staff responsible. Document review also indicated that the non-discrimination statement on the flyers advertising the high school's Chapter 74 Marketing Program does not include disability as a protected category and lists "gender expression" rather than "gender identity". |
| **Description of Corrective Action:** This language has already been added. |
| **Title/Role(s) of Responsible Persons:**Dr. Shaver-Hood, Superintendent | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**The updated documents will be submitted. |
| **Description of Internal Monitoring Procedures:** Review of documentation. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit evidence of publication of the names, office addresses, and phone numbers of the persons designated as the district's non-discrimination coordinators for coordinating compliance under Title IX and Section 504. In addition, submit evidence of the non-discrimination statement on the flyers advertising the high school's Chapter 74 Marketing Program which includes disability as a protected category and specifically lists "gender identity" as well. |
| **Progress Report Due Date(s):** 10/23/2015 |

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| **Criterion & Topic:** CR 22 Accessibility of district programs and services for students with disabilities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Observations and staff interviews indicated that the Minot Forest Elementary School, which serves all students in preschool and grades 3-5, is not entirely accessible for those with mobility impairments. The handicap chair lift does not work, thereby not allowing any interior access to the handicap bathroom and cafeteria/auditorium located on the second floor, or the gymnasium located in the basement. These areas are only accessible via pathways outside of the building. In addition, the auditorium stage is not accessible to mobility-impaired students. |
| **Description of Corrective Action:** The chair lift has already been fixed and is awaiting inspection. The district will acquire a ramp for the stage. |
| **Title/Role(s) of Responsible Persons:**Dr. Shaver-Hood, Superintendent | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**The inspection report will be submitted along with documentation pertaning to the ramp. |
| **Description of Internal Monitoring Procedures:** Observation of both items. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 22 Accessibility of district programs and services for students with disabilities | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 8, 2015 submit the inspection report for the handicap chair lift at the Minot Forest Elementary School. Also, provide a statement of assurance attesting to the acquisition of a ramp that allows mobility-impaired students to access the auditorium stage.By February 29, 2016, DESE will conduct a site visit to the Minot Forest Elementary School to verify that the handicap chair lift is in working order and allows interior access to all levels in the school building and mobility-impaired students have access to the auditorium stage through the use of a ramp. |
| **Progress Report Due Date(s):** 12/08/201502/29/2016 |

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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:** see se 55 |
| **Title/Role(s) of Responsible Persons:**see se 55 | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**see se 55 |
| **Description of Internal Monitoring Procedures:** see se 55 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 23 Comparability of facilities | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** See SE 55. |
| **Department Order of Corrective Action:**See SE 55. |
| **Required Elements of Progress Report(s):** See SE 55. |
| **Progress Report Due Date(s):** 10/23/201512/08/201502/29/2016 |

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

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| **Criterion & Topic:** CR 26A Confidentiality and student records | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Record review indicated that the district does not maintain logs of access in special education or English learner education student records. |
| **Description of Corrective Action:** Logs of access will be utilized. The Director of Student Services will provide training to staff. |
| **Title/Role(s) of Responsible Persons:**Beverly Shea, Director of Student Services | **Expected Date of Completion:**12/08/2015 |
| **Evidence of Completion of the Corrective Action:**Training attendance sheets, agendas, and materials will be submitted along with the log of access form. |
| **Description of Internal Monitoring Procedures:** On-site file reviews will take place 3 times during this process. Date will be collected and submitted. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 26A Confidentiality and student records | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 8, 2015, submit a copy of the log of access form to be used for special education and English learner education (ELL) student records along with evidence of staff notification/training on the use of these logs of access.By February 29, 2016, submit a report of the results of an internal review of records to ensure that logs of access are maintained for special education and ELL student records, and include the following: 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):** 12/08/201502/29/2016 |

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

Charter School or District: Wareham Public Schools

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Wareham Public Schools/Maureen Manning

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: November 4, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 1 Annual English Language Proficiency Assessment  | **Rating:** Not Implemented |
| **Department CPR Finding:** *A review of ACCESS participation rates as shown in the state database revealed that the district did only assess the English proficiency of 89 % of the ELL students in the district.* |
| **Narrative Description of Corrective Action:** The ELE teacher will be trained in the new online ACCESS testing with a building administrator. Before tests are ordered, the ELL teacher will meet with the ELL Director to discuss the training and ordering plan for the year. The ELL teacher will then meet with each building principal (or their designee), in each building with ELLs, to ensure that the ELL student roster is accurate and that tests are ordered for each ELL. After tests have been order, the ELE teacher will email the Director to inform her that all tests have been ordered, including a list of students, grade, tier & test. Before testing the roster will be checked against the students participating to ensure that all students required to take the test are present. A list of any students who are absent for the testing will be emailed to the building principal and ELE Director, along with the make-up test date(s) for those students from the ELE teacher. After all make up tests, the ELE teacher will send an email to the building principals, cc’d to the ELE Director that lists the roster of students required to take the test, along with an indication next to each name that states whether or not the test was administered.  |
| **Title/Role of Person(s) Responsible for Implementation:** Joseph Marcus, ELE teacher | **Expected Date of Completion for Each Corrective Action Activity:** ACCESS Training~ October 8, 2015 ACCESS Ordering~ November 12, 2015, Roster/Testing Recheck, January 12, 2016, Testing~ January 18, 2016, Makeups~ January 25, 2016 Final report~ February 1, 2016 |
| **Evidence of Completion of the Corrective Action:** Collection of training registration/attendance certificate, rosters, ordering form receipts, attendance records, test sign in sheets, final report and emails.  |
| **Description of Internal Monitoring Procedures:**  The ELE manual will be revised to include this procedure in a checklist format, so that internal monitoring can be completed each year during the ACCESS training, ordering and testing window. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 1 | **Status of Corrective Action:** [x]  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):** Please submit all the documents the district identified as evidence of completion of the corrective action by the progress report due date.  |
| **Progress Report Due Date(s):** June 29, 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 Structure | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A review of district documentation indicated that ELLs in K-8 receive only 40 minutes of ESL instruction two/three times a week and 80 minutes of ESL instruction two/three times a week at the district’s high school regardless of their proficiency levels. The district does not provide sufficient ESL instruction appropriate to the student’s level of English proficiency to ensure that ELL students gain the proficiency in English that will promote and support the rapid acquisition of English language proficiency by ELL students as is required in G.L. c. 71A.*  |
| **Narrative Description of Corrective Action:** As a result in the increase in number of ELLs last year, the district doubled the amount of services as of August 31, 2015. The district now has a full-time ELE teacher in place of the half-time teacher who was working last year when the roster was dramatically lower. |
| **Title/Role of Person(s) Responsible for Implementation:** Maureen Manning/Joe Marcus | **Expected Date of Completion for Each Corrective Action Activity:** 8/31/15 |
| **Evidence of Completion of the Corrective Action:** Signed contract from new full time, dually certified ELE teacher.  |
| **Description of Internal Monitoring Procedures:** The ELE teacher will keep an accurate roster of students and a schedule of services which includes the minutes they are being served daily. Any changes to either document will be emailed to the Director for her review. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 5 | **Status of Corrective Action:** [x]  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):** Please complete district information in the attached spreadsheet labeled ELL List by school for each ELL student in the district. |
| **Progress Report Due Date(s):** February 19, 2016 |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 6 Program Exit and Readiness  | **Rating:** Not Implemented |
| **Department CPR Finding:** *The documentation submitted by the district does not include a description of the district’s reclassification process and exit criteria. Therefore, there is no evidence showing that the district does not reclassify ELLs as Former Limited English Proficient (FLEP) until they are deemed English proficient or limit or cap the amount of time in which an ELL student can remain in a language support program.* |
| **Narrative Description of Corrective Action:** The ELE Manual has been updated to include the district’s existing reclassification process. The Language Acquisition Team (LAT) will review it each spring during individual LAT student meetings, held for all ELLs in the district. |
| **Title/Role of Person(s) Responsible for Implementation:** Joe Marcus, ELE Teacher & LAT Chair | **Expected Date of Completion for Each Corrective Action Activity:** Manual updated 11/20/15, LAT meetings held by June 1, 2016 |
| **Evidence of Completion of the Corrective Action:** STEP Classification/Reclassification forms that are filled out by the LAT each spring.  |
| **Description of Internal Monitoring Procedures:** The Director reviews all LAT minutes and STEP Classification/Reclassification forms each June. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 6 | **Status of Corrective Action:** [x]  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 submit a description of the criteria the district considers to reclassify ELLs as FLEP and other supporting documents such as annual review forms.
2. Please submit a roster of the reclassified students with their most recent ACCESS scores and other relevant data the district considered for reclassification.
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| **Progress Report Due Date(s):** June 29, 2016 |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 10 Parent Notification | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Review of records and staff interviews indicated that the district is not consistently providing parents with annual notification letters, written in both English and the home language when necessary, informing parents of the reasons for identification of the student as ELL; the child’s level of English proficiency; program placement and/or the method of instruction used in the program; how the program will meet the educational strengths and needs of the student; how the program will specifically help the child learn English; the specific exit requirements; and the parents’ right to apply for a waiver or to decline to enroll their child in the program.* *In addition, the district is not providing parents/guardians of ELL students with reports cards and progress reports in the same manner and with the same frequency as general education reporting. While ELL students receive report cards, the report cards do not include information about students’ language acquisition skills/development, nor were they always translated when necessary.*  |
| **Narrative Description of Corrective Action:** Annual notification letters will be sent within the first month of every school year to all parents of ELLs, or within the first month of enrollment for students who transfer into the district and a copy will be placed in each student’s file. ELE progress reports are now being sent home in the report card envelopes to all ELE students and a copy is placed in each ELE file. The ELE Director will review files in the fall and spring of each year. |
| **Title/Role of Person(s) Responsible for Implementation:** Maureen Manning | **Expected Date of Completion for Each Corrective Action Activity:** File review by 11//30/15 & 5/30/16 |
| **Evidence of Completion of the Corrective Action:** Files will contain 1 annual notification letter and up to 3 progress reports each academic year, depending on the student’s date of enrollment.  |
| **Description of Internal Monitoring Procedures:** The ELE Director will review files in the fall and spring of each year. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 10 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:**  |
| **Department Order of Corrective Action:**  |
| **Required Elements of Progress Report(s):** Submit a copy of the district’s annual parent notification letter and the ELL progress report form and distribution schedule by **February 19, 2016**. Submit the results of an internal review of records to ensure the provision of annual parent notification letters in English and translated, as necessary, and the provision of progress reports and report cards in the same manner and with the same frequency as general education reporting and indicate:* Number of records reviewed
* Number of records in compliance
* Root cause for any non-compliance found
* Corrective actions taken to remedy each individual file

Submit this information by **June 29, 2016.** *\*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 record review; 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):** February 19, 2016; June 29, 2016 |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 11Equal Access to Academic Programs and Services | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Record review, document review, and staff interviews indicated that the district is not consistently providing ELL students with informative notices regarding activities, responsibilities, and academic standards, which are provided to all students, in a language and mode of communication that they understand.* |
| **Narrative Description of Corrective Action:** Notices regarding activities, responsibilities and academic standards will be translated for those parents requesting translation services. Teachers or advisors having forms needing translation will forward it to the ELE Director two weeks in advance of its distribution. The ELE Director will then forward it to the appropriate translators who will translate the document(s) and email it/them back to the ELE Director who will, in turn, email the document(s) to the appropriate teacher. (In addition, our LEP parents are offered assistance with our partners at the Wareham Free Library. They are able to come in weekly with their child’s paperwork from the schools and review it with a literacy tutor at no charge). |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Director, ELE Teacher district teachers and advisors | **Expected Date of Completion for Each Corrective Action Activity:** ongoing |
| **Evidence of Completion of the Corrective Action:** Samples of translated notices regarding activities, responsibilities and academic standards in a variety of languages. Monthly email from ELE teacher to SEI teachers.  |
| **Description of Internal Monitoring Procedures:** The ELE teacher will email the district SEI teachers monthly as a reminder to have any documents needing translation sent to the ELE Director a minimum of two weeks in advance of distribution. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 11 | **Status of Corrective Action:** [ ]  Approved [ ]  Partially Approved [x]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** The district indicated that the ELE Director will make arrangements for translations of notices regarding activities, responsibilities, and academic standards for those parents requesting translation services, and monthly e-mails will be sent to SEI teachers by the ELE teacher. The finding is based upon the provision of translated notices to students, yet the district did not indicate how ELL students themselves would be provided with translations of informative notices. The district also did not describe the specific procedures for notifying teachers and advisors of the need for translated documents as well as the steps to be taken for the provision of such documents.  |
| **Department Order of Corrective Action:** Develop a formalized protocol for the district’s provision of informative notices to ELL students in a language and mode of communication that they understand. The plan must include information as to how students will be identified as needing translations, how requests for translations are made, a list of staff involved, and the name/role of the person responsible for arranging and overseeing provision of translated documents. Develop a monitoring schedule and tracking log for ensuring that documents are translated as necessary for identified students, and note the name/role of staff responsible for the internal monitoring and tracking system.  |
| **Required Elements of Progress Report(s):** Submit a copy of the district’s protocol for the provision of informative notices to ELL students in a language and mode of communication that they understand by **February 19, 2016**. Provide evidence of all staff notification for the district’s protocol for provision of translated informative notices along with samples of translated documents by **February 19, 2016.**  Submit a copy of the monitoring schedule and tracking log to be used for the provision of translated informative notices by **February 19, 2016.**   |
| **Progress Report Due Date(s):** February 19, 2016 |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 12 Equal Access to Nonacademic and Extracurricular Programs  | **Rating:** Partially Implemented |
| **Department CPR Finding:** *See ELE 11.* |
| **Narrative Description of Corrective Action:** In this district, the ELE Director also serves as one of the 2 Directors of Beyond School Time, therefore, all notices regarding any non-academic and extracurricular programs come out of this office. Therefore, notices regarding non-academic and extracurricular programs will be translated for those parents requesting translation services. (In addition, our LEP parents are offered assistance with our partners at the Wareham Free Library. They are able to come in weekly with their child’s paperwork from the schools and review it with a literacy tutor at no charge).  |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Director/Directors of Beyond School Time  | **Expected Date of Completion for Each Corrective Action Activity:** ongoing |
| **Evidence of Completion of the Corrective Action:** Samples of translated notices regarding activities, responsibilities and academic standards in a variety of languages.  |
| **Description of Internal Monitoring Procedures:** At monthly Beyond School Time Directors meetings, Directors will discuss flyers that will be needed, so that they can be sent to the appropriate translators in advance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 12 | **Status of Corrective Action:** [ ]  Approved [ ]  Partially Approved [x]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** *See ELE 11 and note that this criterion is specific to notices of nonacademic programs and extracurricular activities.*  |
| **Department Order of Corrective Action:** *See ELE 11* and specifically include a monitoring schedule and tracking log for ensuring that notices for extracurricular activities and nonacademic programs are translated as necessary for identified students, and note the name/role of staff responsible for the internal monitoring and tracking system.  |
| **Required Elements of Progress Report(s):** *See ELE 11.*Submit a copy of the monitoring schedule and tracking log to be used for the provision of translated notices for extracurricular activities and nonacademic programs along with sample translated notices by **February 19, 2016**.  |
| **Progress Report Due Date(s):** February 19, 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 district’s ELE program manual as their program evaluation. However, staff interviews indicated 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:** The district has adopted the District ELE Program Evaluation, as found at [*http://www.doe.mass.edu/ell/ProgramEvaluation.pdf*](http://www.doe.mass.edu/ell/ProgramEvaluation.pdf)*.*. This document has been added as an addendum to the district ELE Manual and will be completed yearly by the LAT during the annual LAT meetings in June.  |
| **Title/Role of Person(s) Responsible for Implementation:** Joe Marcus, ELE Teacher & LAT Chair | **Expected Date of Completion for Each Corrective Action Activity:** June 25, 2016 |
| **.** |
| **Description of Internal Monitoring Procedures:** This document will be completed yearly by the LAT during the annual LAT meetings in June. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 17 | **Status of Corrective Action:** [x]  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.
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| **Progress Report Due Date(s):** June 29, 2016 |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 18 Records of ELL Students | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Record review indicated that records did not consistently include home language surveys, results of identification and proficiency tests and evaluations, copies of parent notification letters, and progress reports and report cards, translated if necessary.*  |
| **Narrative Description of Corrective Action:** The ELE teacher will place copies of HLS, ID, proficiency tests and evaluations, copies of parent notification letters, progress and report cards in each ELL’s file as these forms are completed. |
| **Title/Role of Person(s) Responsible for Implementation:** ELE Teacher, ELE Director | **Expected Date of Completion for Each Corrective Action Activity:** 11/30/15 & 5/30/16 |
| **Evidence of Completion of the Corrective Action:** All files will contain copies of these documents.  |
| **Description of Internal Monitoring Procedures:** The ELE teacher and ELE Director will have a joint review of files in the fall and spring of each year. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 18 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:**  |
| **Department Order of Corrective Action:**  |
| **Required Elements of Progress Report(s):** Provide a sample document checklist from the ELE teacher and ELE Director’s file review from the fall 2015. Submit this information by **February 19, 2016.** Submit the results of an internal review of records to ensure that student records contain all required documentation and indicate:* Number of records reviewed
* Number of records in compliance
* Root cause for any non-compliance found
* Corrective actions taken to remedy each individual file

Submit this information by **June 29, 2016.** *\*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 record review; 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):** February 19, 2016**;** June 29, 2016 |

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

Charter School or District: Wareham Public Schools

Corrective Action Plan Forms

Program Area: Career/Vocational Technical Education

Prepared by: Wareham High School/Cynthia Sylvia

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: August 23, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** CVTE 6 | **Rating:** Partially Implemented  |
| **Department CPR Finding:** *Document review and staff interviews revealed that the district does not have a Department-approved admission policy or appropriate application for admission.(Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03(6))* |
| **Narrative Description of Corrective Action:** A CVTE Formal Admission Policy and Admission Application has been written and submitted to DESE for approval. We are currently awaiting feedback in order to move forward with School Committee approval in November. |
| Title/Role of Person(s) Responsible for Implementation: Cynthia Sylvia/Department Chair | **Expected Date of Completion for Each Corrective Action Activity:** November 2015 |
| **Evidence of Completion of the Corrective Action:** School Committee Meeting Minutes for November.  |
| **Description of Internal Monitoring Procedures:** Constant communication with DESE and the CVTE Department. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 6  | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Not applicable |
| **Department Order of Corrective Action:** Not applicable |
| **Required Elements of Progress Report(s):** The Admissions Policy is still under review at OCVTE. When the district receives the reviewed admission policy with comments or approval, the district will respond with revisions to the admission policy or verification that the school committee has approved the admission policy.  |
| **Progress Report Due Date(s): January 8, 2016** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** CVTE 10  | **Rating:** Partially Implemented  |
| **Department CPR Finding:** *Document review and interviews revealed that the Program Advisory Committee does not meet with the School Committee once a year. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (1))* |
| **Narrative Description of Corrective Action:** The Wareham High School Marketing Program Advisory Committee consists of representatives of local business in the marketing industry, Cape Cod Community College and Massasoit Community college, parents, students, and representatives from the Marketing industry and the marketing coordinator. The WHS Marketing Advisory Committee will meet at least once per year with the School Committee in open meeting. The Wareham High School Marketing Advisory Committee advises, recommends and supports school staff to improve planning, operation, and evaluation of the Wareham High School Marketing Program and its curriculum.   |
| **Title/Role of Person(s) Responsible for Implementation:** Cynthia Sylvia/Department Chair | **Expected Date of Completion for Each Corrective Action Activity:** November 2015 |
| **Evidence of Completion of the Corrective Action:** Minutes from the aforementioned School Committee in December.  |
| **Description of Internal Monitoring Procedures:** Annual School Committee Meetings. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 10 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Not applicable. |
| **Department Order of Corrective Action:** Not applicable. |
| **Required Elements of Progress Report(s):** The district will provide minutes of its meeting with the School Committee as final verification that it has addressed all areas required under this criterion. |
| **Progress Report Due Date(s): January 8, 2016** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** CVTE 21  | **Rating:** Partially Implemented  |
| **Department CPR Finding:** *Document review and observations indicated that the Chapter 74 Marketing Program is using outdated supplies, such as obsolete cash registers. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03)* |
| **Narrative Description of Corrective Action:** in FY 2015, the Wareham school district purchased a new Casio Register of the School Store. The FY 2015 budget also funded the purchase updated curriculum simulations, Competition University and Virtual Business Simulations as well as National Marketing Testing exemplars.  |
| **Title/Role of Person(s) Responsible for Implementation:**  | **Expected Date of Completion for Each Corrective Action Activity: October 1, 2015** |
| **Evidence of Completion of the Corrective Action:** Purchase Orders  |
| **Description of Internal Monitoring Procedures:** Yearly Purchase Orders |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 21  | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Not applicable |
| **Department Order of Corrective Action:** Not applicable |
| **Required Elements of Progress Report(s):** None. The actions specified above address the finding. |
| **Progress Report Due Date(s):** None required. |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** CVTE 25 | **Rating:** Not Implemented  |
| **Department CPR Finding:** *Document review, observations and interviews indicated that the program is not adequately funded to meet current industry standards of equipment and supplies.(Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03)* |
| **Narrative Description of Corrective Action:** As part of the FY17 Budget Process for the High School a budget proposal will be prepared for the program to reach adequate funding to meet industry standards. This will be subject to School Committee Approval.  The final overall School District budget will be subject to Town Meeting approval. |
| **Title/Role of Person(s) Responsible for Implementation:** Michael MacMillan Business Manager | **Expected Date of Completion for Each Corrective Action Activity:** May 2016 |
| **Evidence of Completion of the Corrective Action:** Line item designated for CVTE will be documented.  |
| **Description of Internal Monitoring Procedures:** There will be meeting notes and discussion related to the allocation of funds to the CVTE program to keep the program current in its practice. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 25  | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** Not applicable |
| **Department Order of Corrective Action:** Not applicable |
| **Required Elements of Progress Report(s):** The district will report on funding provided by the School District for OCVTE activities and provide an assessment of its adequacy. |
| **Progress Report Due Date(s): January 8, 2016** |