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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: Pioneer Valley Chinese Immersion Charter (District)

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 08/22/2015.

**Mandatory One-Year Compliance Date:** **08/22/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 3 | Special requirements for determination of specific learning disability | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 52 | Appropriate certifications/licenses or other credentials -- related service providers | Partially Implemented |
| CR 10 | Anti-Hazing Reports | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |

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

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| **Criterion & Topic:**  SE 3 Special requirements for determination of specific learning disability | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that the charter school does not complete the four required specific learning disability (SLD) forms: Historical Review and Educational Assessment (SLD1); Area of Concern and Evaluation Method (SLD2); Exclusionary Factors (SLD3); and Observation (SLD4) when a Team determines that a student has a specific learning disability. | | |
| **Description of Corrective Action:**  Although all required forms (SLD 1,2,3, and 4) that are used for finding a student eligible for a Specific Learning Disability are reviewed at the Team meeting, only the summary /agreement form, and the eligibility flow chart were included in the student files.  On September 2, 2015, a special education staff meeting was held to train staff on this criterion. The training, facilitated by the Special Education Co-coordinator, consisted of a review and discussion of the DESE?s Disability-Eligibility Process/Memorandum on Specific Learning Disabilities: Eligibility Determination under IDEA 2004, and the DESE?s power point presentation module for determination of a specific learning disability, along with corresponding forms. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education coordinator (Licensed Special Education Administrator) | | **Expected Date of Completion:**  09/02/2015 |
| **Evidence of Completion of the Corrective Action:**  Staff Meeting/Training September 2, 2015 agenda and participants signatures. Materials used are available on the DESE website. | | |
| **Description of Internal Monitoring Procedures:**  Director of Student Services will monitor process. In January and June all files for students identified as having specific learning disabilities will be reviewed by the special education co-coordinator and/or director of student services for compliance of this criterion. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:** SE 3 Special requirements for determination of specific learning disability | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The charter school indicated training specific to this criterion was conducted with materials found on the Department website on September 2, 2015. The district needs to develop procedures for charter school staff for ensuring that the four required specific learning disability forms: Historical Review and Educational Assessment (SLD1); Area of Concern and Evaluation Method (SLD2); Exclusionary Factors (SLD3); and Observation (SLD4) are reviewed but completed when a Team determines that a student has a specific learning disability. | | |
| **Department Order of Corrective Action:**  Submit detailed procedures for ensuring that the four required specific learning disability forms: Historical Review and Educational Assessment (SLD1); Area of Concern and Evaluation Method (SLD2); Exclusionary Factors (SLD3); and Observation (SLD4) are completed when a Team determines that a student has a specific learning disability. | | |
| **Required Elements of Progress Report(s):**  The charter school will submit a copy of a set of procedures developed to ensure that the four required specific learning disability forms: Historical Review and Educational Assessment (SLD1); Area of Concern and Evaluation Method (SLD2); Exclusionary Factors (SLD3); and Observation (SLD4) are completed when a Team determines that a student has a specific learning disability by October 22, 2015.  The charter school will submit copies of the agenda, dated attendance sheets with staff role and signature as evidence that all staff have been trained on the new procedures by October 22, 2015.  The charter school must conduct a review of records for students with SLD that have initial eligibility or re-evaluation meetings after all corrective actions are implemented, for evidence that the four required specific disability forms: Historical Review and Educational Assessment (SLD1); Area of Concern and Evaluation Method (SLD2); Exclusionary Factors (SLD3); and Observation (SLD4) are completed and located in the student record by February 11, 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review , with their roles(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/22/2015  02/11/2016 | | |

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| **Criterion & Topic:**  SE 13 Progress Reports and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that progress report information sent to parents does not consistently include written information on the student's progress toward each annual goal in the IEP. | | |
| **Description of Corrective Action:**  The Coordinated Program Review audit indicated that all progress reports were written and sent to parents by regulatory timelines. The progress reports addressing the students? IEP goals were often written in narrative form. The narrative form of writing the reports gave the impression that progress on some benchmarks was not clearly defined.  On September 2 and 16 special education staff meetings/trainings were held to review writing of progress reports. The training on September 2, 2015 consisted of a review and discussion of DESE- IEP Process Guide Progress Reporting, pp.20-22, and a review and discussion of the districts procedure for writing progress reports. The progress reporting procedure includes numbering and reporting the student's progress on each benchmark. On September 16, 2015 staff training was conducted to provide a more in depth review of progress report writing. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Licensed Special Education Administrator) | | **Expected Date of Completion:**  09/16/2015 |
| **Evidence of Completion of the Corrective Action:**  Staff Meeting/Training September 2 and 16, 2015 agendas and participants signatures of attendance. Handouts. | | |
| **Description of Internal Monitoring Procedures:**  Director of Student Services will monitor process. The district provides two report cards per year in January and June. IEP progress reports will be reviewed before the reports are sent home in January and June by the Director of Student Services for compliance of this criterion. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 13 Progress Reports and content | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The charter school will submit a copy of a set of procedures developed to ensure that progress report information sent to parents consistently includes written information on the student's progress toward each annual goal in the IEP by October 22, 2015.  The charter school will submit copies of the agenda, dated attendance sheets with staff role and signature as evidence that all staff have been trained on the new procedures by October 22, 2015.  The charter school must conduct a review of records for students with IEPs after all corrective actions are implemented, for evidence that progress report information sent to parents consistently includes written information on the student's progress toward each annual goal in the IEP by February 11, 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review , with their roles(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/22/2015  02/11/2016 | | |

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| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that all IEP sections are not consistently completed by the charter school during the IEP development process, particularly  The administrative data sheet does not always indicate the primary language of the parent and student;  The response section is not always signed by a representative of the school attesting to the fact that the IEP represents the determinations of the IEP Team and an assurance that it will be implemented. | | |
| **Description of Corrective Action:**  All IEPs have been signed by an authorized district representative. At times, when an IEP is not sign by a parent, the special education staff may have quickly provided the parent with a new signature page to sign and then placed the signed response form in the student's file. In these cases the original form with the representative's signature was not attached to the IEP. New procedures were developed and reviewed with staff on September 2, 2015 at a special education staff meeting/training. The procedure indicates that either the Director of Student Services or the Principal signs the IEP. An IEP cannot be sent out to the parent without either the director of student services or the principal's signature. The staff must plan accordingly to obtain signatures to meet the regulatory timelines for IEPs.  All IEP administrative data sheet were completed.  A review of the IEP Administrative Data Sheet was conducted at the special education staff held on September 2, 2015 to specifically address the student’s primary language section of the form and to emphasis that all sections of the form must be completed.  All IEPs have been reviewed by the Director of Student Services to ensure that the student’s primary language is now noted on the form and meeting compliance for this criterion. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Licensed Special Education Administrator) | | **Expected Date of Completion:**  09/02/2015 |
| **Evidence of Completion of the Corrective Action:**  Staff meeting/training agendas and participants signature of attendance. | | |
| **Description of Internal Monitoring Procedures:**  Director of Student Services will monitor the process.  In January and June, the Director of Student Services will review all IEPs for district representative signatures on the IEP and for completed Administrative Data sheets for compliance of this criterion. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The charter school will submit a copy of the procedures developed to ensure all IEPs have been signed by an authorized district representative, and that the administrative data sheet always indicates the primary language of the parent and student by October 22, 2015.  The charter school will submit copies of the agenda, dated attendance sheets with staff role and signature as evidence that all staff have been trained on the new procedures by October 22, 2015.  The charter school must conduct a review of records for students whose IEP Team meetings are conducted after all corrective actions are implemented, for evidence that all IEP sections are consistently completed during the IEP development process, particularly the administrative data sheet to indicate the primary language of the parent and student; and the response section is signed by a representative of the school by February 11, 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review , with their roles(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/22/2015  02/11/2016 | | |

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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 interviews indicate that the license of the School Adjustment Counselor has expired and has not been renewed nor has a waiver been granted. | | |
| **Description of Corrective Action:**  The adjustment counselor in question applied for an extension to his initial license however did not return for the 2015-2016 school year. The adjustment counselor position has since been filled with a licensed adjustment counselor. | | |
| **Title/Role(s) of Responsible Persons:**  Principal | | **Expected Date of Completion:**  09/02/2015 |
| **Evidence of Completion of the Corrective Action:**  ELAR license data. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Services will monitor. Prior to the start of the school year and as needed during the school year, related service providers' licenses will be verified in ELAR. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 52 Appropriate certifications/licenses or other credentials -- related service providers | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The charter school will submit the name and license number for the current adjustment counselor by October 22, 2015.  The charter school will submit a copy of its internal tracking and monitoring system to ensure that all related service providers are appropriately certified, licensed, board registered or otherwise approved to provide such services by the relevant professional standards board or agency for the profession by October 22, 2015. | | |
| **Progress Report Due Date(s):**  10/22/2015 | | |

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| **Criterion & Topic:**  CR 10 Anti-Hazing Reports | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the district includes the anti-hazing policy in the student handbook, however the district does not obtain signed acknowledgements from student groups, teams or organizations indicating receipt of the policy. | | |
| **Description of Corrective Action:**  Annually at the start of the school year, all high school students will be given M.G.L. c. 269 § 17 through 19 and the Anti-Hazing policy. Students will return a signed acknowledgement indicating receipt of the policy. | | |
| **Title/Role(s) of Responsible Persons:**  Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Roster of students who have returned signed acknowledgement forms. Note: due to volume of actual forms, they will be kept in school and available for inspection if needed. | | |
| **Description of Internal Monitoring Procedures:**  Athletic Director will monitor. At the start of the school year and as needed during the school year (if there are new students), the Anti-Hazing policy and M.G.L. c 269 § 17 through 19 will be given to high school students and a signed acknowledgement indicating receipt will be collected. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10 Anti-Hazing Reports | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  M.G.L. c 269 § 17 through 19 requires a copy of the law be issued to ever student, however, in addition to individual students, the law requires the charter school to obtain signed acknowledgments from student groups, teams or organizations indicating receipt of the policy. | | |
| **Department Order of Corrective Action:**  The charter school must obtain signed acknowledgments from student groups, teams or organizations indicating receipt of the anti-hazing policy. A copy of the form can be found at http://www.doe.mass.edu/news/news.aspx?id=5591 | | |
| **Required Elements of Progress Report(s):**  The charter school will submit signed acknowledgments from student groups, teams or organizations indicating receipt of the anti-hazing policy by October 22, 2015.  The charter school will submit a copy of the internal tracking and oversight system with periodic review by the designated person(s) responsible to ensure compliance exists by October 22, 2015. | | |
| **Progress Report Due Date(s):**  10/22/2015 | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the procedures for the discipline of students with disabilities found in the student handbook do not address:  Convening the Team within 10 days of the decision to suspend to review all relevant information in the student's file, including the IEP;  Special circumstances to place students in an Interim Alternative Educational Setting (IAES) if the behavior involves weapons, illegal drugs, a controlled substance or the infliction of serious bodily injury on another person while at school or a school function; and the use of the authority of a hearing officer when the charter school provides evidence that the student is "substantially likely" to injure him/herself or others. | | |
| **Description of Corrective Action:**  The student handbook which includes the code of conduct will be revised to include the necessary information. Revisions involving legal compliance will be reviewed by school's legal counsel prior to finalizing them. | | |
| **Title/Role(s) of Responsible Persons:**  Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Revised student handbook (includes code of conduct). | | |
| **Description of Internal Monitoring Procedures:**  The Principal will monitor the process. Annual internal and legal review of the student handbook and code of conduct will occur each summer and as needed during the school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The charter school will submit a copy of the section of the student handbook that includes the procedures for the discipline of students with disabilities that includes all required elements by October 22, 2015.  The charter school will submit to the Department evidence that the updated procedures have been disseminated to staff, students and parents for the 2015-2016 school year by October 22, 2015. | | |
| **Progress Report Due Date(s):**  10/22/2015 | | |

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

Charter School: Pioneer Valley Chinese Immersion Charter School

Corrective Action Plan Review

Program Area: English Learner Education

Prepared by: Pioneer Valley Chinese Immersion Charter School

Chandra Linnell and Marina Jones

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 22, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 8 Declining Entry to a Program** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:** *Student record review, document review and interviews indicate that parents have opted out of ESL services, but the district provides direct ESL instruction instead of continuing to monitor and provide support to the students as required when a parent chooses to opt out of ESL services.* | | | |
| **Narrative Description of Corrective Action:**      If a parent declines ESL services, the school will no longer provide ESL pull out services. The school will continue to monitor the student’s academic progress while providing the necessary support in SEI classes taught by SEI endorsed teachers. The school will report such students to Student Management Information System (SIMS). as an English Language Learner (ELL) and will test the student annually with ACCESS until the student attains English proficiency. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**      PVCICS ESL team, Principal | | **Expected Date of Completion for Each Corrective Action Activity:**      Immediately | |
| **Evidence of Completion of the Corrective Action:**     Student records, SIMS data | | | |
| **Description of Internal Monitoring Procedures:**  Review of SIMS data | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 8** | **Status of Corrective Action:**  ☐ Approved X Partially Approved ☐ Disapproved | | |
| **Basis for Partial Approval or Disapproval:**    The district states they will no longer provide ESL services for students whose parents have chosen to have their child opt out of the English language development program. | | | |
| **Department Order of Corrective Action:** Provide a copy of the procedures the district will follow when parents choose to have their child opt out of ESL services. | | | |
| **Required Elements of Progress Report(s):**  Submit a copy the charter school’s opt out procedures and evidence that appropriate staff have been trained on these procedures by **January 25, 2016.**  Provide a list of opt out students, their schedules and evidence of monitoring of those students’ progress by **January 25, 2016.** | | | |
| **Progress Report Due Date(s):   January 25, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 11 Equal Access to Academic Programs and Services** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:** *Document review indicates that a student identified as an ELL (English language learner) cannot participate in Chinese Immersion until the student is English proficient. Parents choose to opt-out of ESL services for this reason and as a result the charter school is not providing ELL students’ equal access to the full range of academic programs and services available.* | | | |
| **Narrative Description of Corrective Action:**     Revise DCAP with new procedures and distribute to all staff electronically. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**   ESL team, Principal | | **Expected Date of Completion for Each Corrective Action Activity:**   Immediately | |
| **Evidence of Completion of the Corrective Action:**  Revised DCAP, description of service provided to ELL students | | | |
| **Description of Internal Monitoring Procedures:**   Annual review of DCAP. | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 11** | **Status of Corrective Action:**  ☐ Approved X Partially Approved ☐ Disapproved | | |
| **Basis for Partial Approval or Disapproval:**   Even though the charter school’s DCAP provides a description of assistance for English language learners to participate in the mainstream classroom with an SEI endorsed teacher, the charter school did address how it includes students who are not proficient in English, particularly students who are opted out of ESL, in Chinese immersion. | | | |
| **Department Order of Corrective Action:**  The charter school must develop procedures that ensure students who are not proficient in English, including students who have opted out, are included in Chinese immersion. | | | |
| **Required Elements of Progress Report(s):**  Submit the charter school’s procedures that clearly address the eligibility of a student to participate in Chinese immersion by **January 25, 2016.**  Provide a list of students identified as ELL whose parents have selected to opt the student out of ESL services and who participates in Chinese immersion by **January 25, 2016.** | | | |
| **Progress Report Due Date(s):   January 25, 2016** | | | |