|  |
| --- |
| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION****Program Quality Assurance Services** |

##### COORDINATED PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Veritas Preparatory Charter School (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 05/21/2015.

**Mandatory One-Year Compliance Date:** **05/21/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 18B Determination of placement; provision of IEP to parent | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Student record review and interviews indicated that the charter school does not consistently meet the timelines for providing the parent with two copies of the proposed IEP and proposed placement along with the required notice within 10 days of providing a summary of the IEP at the conclusion of the Team meeting. |
| **Description of Corrective Action:** The District has put in place a timeline Tracking Sheet to collect timeline data. The type of activity, the date parents are sent a consent to test, the date the consent is returned, and the date the IEP meeting notice is sent, the date the meeting was held, and when appropriate (Initial and Re-Evaluations) the required date for completion of testing, the actual number of days between consent and the meeting, and the number of days between the meeting and the IEP or Notice of Decision is sent to the parent are all recorded on the Tracking Sheet. Each activity (Initials, re-evaluations, review and other IEP team meetings) has a tracking sheet which is completed. These timeline tracking sheets will be monitored every three months. Copies of the tracking sheets will not only be placed in each special education student folder but also second copy will be placed in a separate folder so that there is quick access to the collective data. The data on the tracking sheets is entered by the director of student services. The verification for the data will be the dated correspondence in the student file and the data entered into Semstracker. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services and Executive Director | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**All timelines will be met beginning September 1, 2015. The timeline data will be collected and analyzed for the time period September 1, 2015 through November 30, 2015. This information will be collected for all IEPs that are reviewed and all initial and re-evaluations held during the above listed three month period. All timeline data will be recorded on a summary sheet. An executive summary including the specific data and findings will be submitted to the DESE by December 15, 2015. |
| **Description of Internal Monitoring Procedures:** Beginning September 1, 2015 the Director of Student Services will review, every three months, the tracking sheets for all IEP review meetings and initial and re-evaluation meetings and analyze the data for compliance. If any timeline is not met, detailed information as to why the timeline was not met will be examined to determine if there is a justification for the delay or if there is a problem within the process. The Executive Director of Veritas Prep will be notified of any unjustified time delays and action will be taken to ensure compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Partially Approved **Status Date:** 07/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district developed a comprehensive tracking sheet to collect timeline data, but did not include staff training on how to use it and the importance of meeting timelines. |
| **Department Order of Corrective Action:**The district must provide staff training on using the tracking sheet and the importance of meeting timelines. |
| **Required Elements of Progress Report(s):** Submit a copy of the timeline tracking sheet the district has developed to collect timeline data and evidence of staff training by October 16, 2015.Submit the results of an internal review of IEP Team meetings held between September 1 to November 30, 2015, to determine if timelines for providing the parent with two copies of the proposed IEP and proposed placement along with the required notice within 10 days of providing a summary of the IEP at the conclusion of the Team meeting have been met. Include the number of records reviewed, the number in compliance, the root cause of any timelines that have not been met, and how the district will address the noncompliance, by December 15, 2015.\*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):** 10/16/201512/15/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 20 Least restrictive program selected | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Student record review and interviews indicated that when a student is removed from the general education classroom, the Team does not consistently state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. |
| **Description of Corrective Action:** When a student is being considered for special education services outside of the general education classroom, the IEP team will discuss and state in the IEP Meeting Notes the specific reasons why the special education student would need to receive services in a placement other than that student's general education classroom. If it is necessary for the student to be pulled out of the classroom for services the "Nonparticipation Justification" statement will be written specifically to address the reasons pertinent to the individual student based on the IEP Meeting Notes. The Director of Student Services will review the official IEP Meeting Notes and all "Nonparticipation Justification" statements entered into IEPs for compliance. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services | **Expected Date of Completion:**12/15/2015 |
| **Evidence of Completion of the Corrective Action:**The Director of Student Services will review the official IEP Meeting Notes and all "Nonparticipation Justification" statements entered into IEPs for unique to the needs of each individual student clarifying that the students is unable to be in the general education classroom with accommodations, assistive technology, etc. and the statement reflects the discussion of the team as documented in the IEP Meeting Notes between September 1, 2015 and November 30, 2015. The data and an executive summary of the findings will be sent to DESE by December 15, 2015. |
| **Description of Internal Monitoring Procedures:** Beginning December 1, 2015 the Director of Student Services will preview a random number of "Nonparticipation Justification" statements for compliance every three months. This can be done online through Semstracker or by pulling IEPs from the files. The Director of Student Services will also review a random number of IEP Meeting Notes for the same IEPs being examined for the "Nonparticipation Justification" statements every three months to ensure that the discussion around pull out needs is being recorded and then accurately stated in the IEP. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Partially Approved **Status Date:** 07/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district did not include providing appropriate IEP Team members with training on how to write nonparticipation justification statements. |
| **Department Order of Corrective Action:**The district must provide appropriate IEP Team members with training on how to write nonparticipation justification statements. |
| **Required Elements of Progress Report(s):** Provide evidence (agenda, sign-in sheet, materials) that staff have been trained on how to write nonparticipation justification statements by October 16, 2015.Submit the results of an internal review of IEPs, completed after corrective action is completed, to determine if nonparticipation statements state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily, and include the number of records reviewed, the number in compliance, the root cause of any continued noncompliance and how the district plans to address the noncompliance by December 15, 2015.\*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):** 10/16/201512/15/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 32 Parent advisory council for special education | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Documents and interviews indicated that the charter school has not established a district-wide parent advisory council on special education. The charter school has attempted to start a PAC and has conducted a workshop on the rights of students and their parents and guardians under state and federal special education laws. |
| **Description of Corrective Action:** The District will continue to send letters to the parents of special education students requesting their participation in a Parent Advisory Council for Special Education. In addition the District will set up a PAC meeting and invite parents to attend. The District will also combine its effort with another Charter School (To be named by September 30, 2015). A combined effort will then be made to invite parents from both schools to a combined PAC Meeting. If the District is not able to establish a PAC by April 15, 2016, the District will apply for a waiver from DESE to allow for a series of parent workshops. As part of the waiver process the District will outline all efforts made to develop a PAC. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services | **Expected Date of Completion:**04/15/2016 |
| **Evidence of Completion of the Corrective Action:**All parents of special education students will be sent an invitation to attend a PAC meeting. The letter will include the invitation (date, time and location), an explanation of the purpose and importance of PAC, and an agenda. The correspondence will be sent in the parent's home language. Parents will be asked to sign in to the meeting to document the attendance. By April 15, 2016 the District will have documented that at least one PAC meeting was held, a PAC chairperson is in place, and additional meeting are scheduled. This documentation will be sent to DESE by April 15, 2016. |
| **Description of Internal Monitoring Procedures:** The Director of Student Services will maintain copies of all correspondence sent to special education parents regarding the PAC. Agendas and attendance sheets will be kept on file for documentation. Correspondence for parents who speak another language will be sent to them in their home language and kept on file. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Partially Approved **Status Date:** 07/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district is following appropriate steps in attempting to establish a PAC; however the effort should be moved up in order to have a PAC in place, or to apply for a waiver earlier in the school year. |
| **Department Order of Corrective Action:**Move up the efforts to start a PAC in order to have one in place earlier in the school year, or if unsuccessful, to apply for a waiver to DESE. |
| **Required Elements of Progress Report(s):** Send sample copy of letters sent to parents requesting their participation in a PAC and a copy of the agenda and sign-in sheet from the PAC meeting, along with a copy of by-laws, and PAC officers, if the district is successful in establishing a PAC, by October 16, 2015.If the district has been unable to start its own PAC, or a joint PAC has been developed with the other charter school, provide a copy of the waiver application to ESE by February 12, 2016. |
| **Progress Report Due Date(s):** 10/16/201502/12/2016 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 10A Student handbooks and codes of conduct | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Review of documents and interviews indicated that the student codes of conduct does not contain procedures for the discipline of students on Section 504 Accommodation Plans, and the nondiscrimination policy does not include gender identity as a protected category. |
| **Description of Corrective Action:** The Student and Family Handbook will be updated to include procedures for discipline of students on Section 504 Accommodation Plans, and the nondiscrimination policy to include gender identity as a protected category. |
| **Title/Role(s) of Responsible Persons:**Executive Director | **Expected Date of Completion:**09/30/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence will include updated pages from the Student and Family handbook. |
| **Description of Internal Monitoring Procedures:** The Student and Family handbook will be approved by the Board of Trustees by September 30, 2015 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved **Status Date:** 07/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit a copy of the pages from the updated handbook that include procedures for discipline of students on Section 504 Accommodation Plans, and the nondiscrimination policy that includes gender identity as a protected category, by October 16, 2015. |
| **Progress Report Due Date(s):** 10/16/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 10B Bullying Intervention and Prevention | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Document review and interviews indicated that the charter school did not implement professional development for all staff that includes developmentally appropriate strategies to prevent bullying incidents; developmentally appropriate strategies for effective interventions to stop bullying incidents; information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim and witnesses to the bullying; research findings on bullying, including information about specific categories of students who have been shown to be particularly at risk for bullying in the school environment; information on the incidence and nature of cyber-bullying; and internet safety issues as they relate to cyber-bullying. The Bullying Intervention and Prevention Plan in the school handbook does not make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. |
| **Description of Corrective Action:** The Bullying Prevention and Intervention Plan will be updated to include school staff members may be named the "aggressor" or "perpetrator" in a bullying report. During FY16 professional development, a specific and detailed agenda will be created that includes developmentally appropriate strategies to prevent bullying incidents; developmentally appropriate strategies for effective interventions to stop bullying incidents; information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim and witnesses to the bullying; research findings on bullying, including information about specific categories of students who have been shown to be particularly at risk for bullying in the school environment; information on the incidence and nature of cyber-bullying; and internet safety issues as they relate to cyber-bullying. Materials will be provided and attendance will be taken. School counselors will attend training provided by Boston University in June 2015 on research based practices and interventions for schools on bullying prevention. School Counselors will plan professional development for all teachers and staff. The Director of Student Services will review the professional development plan, create an agenda and sign in sheet. The professional development will be delivered by August 30, 2015. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services, School Counselors | **Expected Date of Completion:**08/30/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence will include a revised Bullying Prevention and Intervention Plan, professional development agenda, materials and attendance sheet for Veritas Prep teachers and staff. |
| **Description of Internal Monitoring Procedures:** The Director of Student Services will review annual the professional development plans and agendas. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved **Status Date:** 07/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit an updated Bullying Prevention and Intervention Plan that includes school staff members as potential "aggressors'' or "perpetrators" in a bullying report by October 16, 2015.Submit a copy of the agenda, sign-in sheet and materials from the staff training on bullying intervention and prevention, by October 16, 2015. |
| **Progress Report Due Date(s):** 10/16/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 21 Staff training regarding civil rights responsibilities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Review of documents and interviews indicated that the charter school does not provide in-service training for all school personnel at least annually regarding civil rights responsibilities, including the prevention of discrimination and harassment on the basis of students' race, color, sex, gender identity, religion, national origin and sexual orientation and the appropriate methods for responding to it in the school setting. |
| **Description of Corrective Action:** During the FY16 professional development, a specific and detailed agenda will be created that educates staff on civil rights responsibilities, including the prevention of discrimination and harassment on the basis of students' race, color, sex, gender identity, religion, national origin and sexual orientation and the appropriate methods for responding to it in the school setting. Materials will be provided and attendance taken. The Director of Student Services who is designated as the Civil Rights Coordinator will conduct the professional development for all staff by September 30, 2015. |
| **Title/Role(s) of Responsible Persons:**Executive Director, Director of Student Services who is the designated Civil Rights Coordinator | **Expected Date of Completion:**09/30/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence will include the professional development agenda, materials, and attendance sheet. |
| **Description of Internal Monitoring Procedures:** Executive Director will approve agenda and professional development materials. The Director of Student Services who is designated as the Civil Rights Coordinator will conduct the professional development annually. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved **Status Date:** 07/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit a copy of the agenda, sign-in sheet and materials from the staff training on civil rights responsibilities, including the prevention of discrimination and harassment on the basis of students' race, color, sex, gender identity, religion, national origin and sexual orientation and the appropriate methods for responding to it in the school setting by October 16, 2015. |
| **Progress Report Due Date(s):** 10/16/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 24 Curriculum review | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews and review of documents indicated that the charter school does not have a process for individual teachers to review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. |
| **Description of Corrective Action:** The school will update the curriculum review process to include a tool for all teachers to use to review curriculum and materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation on a bi-annual basis. All teachers will complete the curriculum review for their grade and content area by August 30, 2015. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services, Principal | **Expected Date of Completion:**09/30/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence will include the revised curriculum review process and curriculum review tool completed by individual teachers. An executive summary including the specific date and findings will be submitted to DESE by September 30, 2015. |
| **Description of Internal Monitoring Procedures:** Principal will evaluate the curriculum review process annually and revise as needed. The Principal will educate teachers on its use and track completion of each grade and content area review. The Director Student Services will approve the curriculum review process, the tool, any revisions annual to either and professional development agendas. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Approved **Status Date:** 07/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit a copy the revised curriculum review process and the evaluation tool that teachers will use to review curriculum and materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation by October 16, 2015. Submit a copy of the executive summary of the findings of the curriculum review, by October 16, 2015. |
| **Progress Report Due Date(s):** 10/16/2015 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** Review of documents and staff interviews indicated that the charter school does not evaluate all aspects of its program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities, and make such changes as are indicated by the evaluation. |
| **Description of Corrective Action:** A survey will be created for teachers to assess personal views on and perceptions of other staff and students on barriers for students regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status to access to programs, athletics and other extracurricular activities. A survey will be created for students to assess personal views and perceptions of staff and other students on barriers for students regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status to access to programs, athletics and other extracurricular activities |
| **Title/Role(s) of Responsible Persons:**Director of Student Services, Executive Director | **Expected Date of Completion:**05/21/2016 |
| **Evidence of Completion of the Corrective Action:**Evidence will include the surveys, an executive summary with survey results and findings for the staff and student surveys. |
| **Description of Internal Monitoring Procedures:** The Director of Student Services will conduct teacher and students surveys annually, summarize results, and create an executive summary of finding as with proposed actions as needed. The Executive Director will review results and findings and approve any necessary action plans. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 07/01/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit a copy of the survey instruments developed for teachers and students to conduct an institutional self-evaluation of the district's program to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities, by October 16, 2015.Submit a copy of the executive summary with survey results and findings, by February 12, 2016. |
| **Progress Report Due Date(s):** 10/16/201502/12/2016 |

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

Charter School: Veritas Preparatory Charter School

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Veritas Preparatory Charter School/Akesa Mafi

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 15, 2016**

|  |
| --- |
| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** ELE 10 Parental Notification  | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Student record review and interviews indicated that the charter school did not consistently provide parents and guardians of ELL students with report cards and progress reports written in a language understandable to the parent/guardian.* |
| **Narrative Description of Corrective Action:** The District will put in place a tracking policy to monitor the translation of all report cards and progress reports for parents/guardians of ELLs into requested language of communication, as indicated on the Home Language Survey. The Director of Student Support will use the tracking policy to create a tracking sheet to monitor progress reports and report cards every trimester. If it is found that a report card or progress report is not properly translated, the Director of Student Services will follow up with the content teacher to remedy the situation. A copy of all report cards and progress reports will be kept in ELE files.  |
| **Title/Role of Person(s) Responsible for Implementation:** 1. Director of Student Support and English Language Education Director will create tracking sheet to be used to monitor translation of all progress and report cards.
2. English Language Education Director will write and add to ELE manual the new translation monitoring system and staff responsible for tracking.
3. Director of Student Support is responsible for recording translations of progress and report cards on tracking sheet.
 | **Expected Date of Completion for Each Corrective Action Activity:** 1. Creation of tracking sheet and recording of 1st trimester translations-1/8/16
2. New policy into ELE manual-1/8/16
3. Completed year of tracking recorded on tracking sheet-6/24/16
 |
| **Evidence of Completion of the Corrective Action:** Translated progress reports and report cards filed in ELE files, ELE manual to include new tracking and monitoring policy, Tracking sheet |
| **Description of Internal Monitoring Procedures:** Tracking sheet, file review |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** ELE 10 Parental Notification | **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):** Submit evidence (agenda, sign-in sheet, copy of the new translation monitoring system added to ELE manual) that appropriate staff were informed of the requirement that the charter school must provide parents or guardians of ELL students with report cards and progress reports written in a language understandable to the parent/guardian and submit, **by February 12, 2016.**Submit the results of an internal review of records of ELL students completed since corrective action to determine if report cards and progress reports sent to the parents or guardians were written in a language understandable to the parents/guardians**, by June 10, 2016.** Please include the number of records reviewed, the number in compliance, number not in compliance, if any, and the school’s plan to correct it. |
| **Progress Report Due Date(s): February 12, 2016; June 10, 2016** |