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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: Greater Fall River Regional Vocational Technical

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 10/14/2015.

**Mandatory One-Year Compliance Date:** **10/14/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 1 | Assessments are appropriately selected and interpreted for students referred for evaluation | Partially Implemented |
| SE 2 | Required and optional assessments | Partially Implemented |
| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 12 | Frequency of re-evaluation | Partially Implemented |
| SE 14 | Review and revision of IEPs | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |

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| **Criterion & Topic:**  SE 1 Assessments are appropriately selected and interpreted for students referred for evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of student records indicates that assessments administered as part of the special education reevaluation of all freshmen students are not tailored to assess specific areas of educational need and related developmental need. All students are tested with the same comprehensive battery of assessments, regardless of disability. | | |
| **Description of Corrective Action:**  Upon acceptance of the incoming freshmen, record review will be completed and a determination of those students who require a reevaluation will be determined. In addition if the district does not receive any documentation of their last evaluation, student will be identified and evaluation will be completed.  Upon completion of record review, appropriate assessments will be identified and selected based on the child’s disability or suspected area of disability. If student does not require an evaluation but the district requires additional testing, a team meeting will be convened including the parent, student, regular education teacher, and special education teacher and guidance counselor. The team will determine if additional testing is required and identify the assessments.  Upon record review, it has been Diman’s experience that the information provided does not always meet the needs of the students specifically in the transition planning process. The assessments results forwarded have demonstrated a lack the basis of disability determination especially for those students who have specific learning disabilities.  Secretary will maintain a log of student who requires a re-evaluation and those whose teams need to be convened in order to review placement. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education, Deborah Pacheco | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence of Completion: An evaluation log will be developed which will include the child’s name, area of disability, last evaluation. | | |
| **Description of Internal Monitoring Procedures:**  Description of Internal Monitoring Process: The Director of Special Education will review evaluation log at the beginning of each trimester in order to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 1 Assessments are appropriately selected and interpreted for students referred for evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a report of the internal review of records for freshmen students indicating the number of incoming students on IEPs and the number of students requiring reevaluation. For students requiring additional testing not required for a three year eligibility determination, indicate the purpose of the testing. Provide a summary of the assessments administered based on the student's disability indicating how assessments selected are tailored to assess specific areas of educational need and related developmental needs by February 12, 2016. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  See SE 1. | | |
| **Description of Corrective Action:**  See SE 1 | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education, Deborah Pacheco | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  see SE 1 | | |
| **Description of Internal Monitoring Procedures:**  see SE 1 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  See SE 1. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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| **Criterion & Topic:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of student records indicates that, at least one year prior to the student turning 18 years of age, the student and the parent/guardian are not informed of the rights that will transfer from the parent/guardian to the student upon the student's 18th birthday. Upon reaching the age of 18, the school does not implement procedures to obtain consent from the student to continue his or her special education program. | | |
| **Description of Corrective Action:**  The Director of Special Education has implemented a new procedure in order to ensure transfer of rights and age of majority are completed in a timely manner.  Transfer of Rights:  In order to ensure parents and students are notified one year prior to their eighteenth birthday, the following steps will be in place:   1. Birthday list will be printed indicating which students will be turning seventeen 2. List will be printed at the beginning of each trimester by the secretary 3. The Director of Special Education will review list and identify those students who will require notification 4. Once students have been identified, Notice of transfer of Rights will be mailed home to both parent and student   Age of Majority:   1. Liaison responsibilities now include meeting with the student prior to their eighteenth birthday. 2. Secretary provides list of each liaison's case load including their date of birthdays. The liaison will review list and meet with their student during trimester one. During their meeting the requirements will be reviewed and the selection form will be completed. 3. The completed form will be returned to the office 4. The form will be mailed home to both parent and student. 5. Secretary will note return of form in the spreadsheet created for each liaison 6. The Director of Special Education will review liaison lists at the end of each trimester to ensure compliance 7. The Director of Special Education will review requirements with Special Education Teachers during orientation and special education department meetings. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education, Debbie Pacheco | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The Director of Special Education will keep documentation i.e. birthday list, and copies of letters (Notification of Transfer of Rights) which are mailed to parent(s) and student.  The liaison(s) will have a list of birthdays, document necessary meetings (above) held during trimester one, document that they have reviewed requirements with the student(s) at the trimester one meeting, and complete the selection form. All documentation will keep in the student's file and will be reviewed by the Director of Special Education. The Age of Majority form will be mailed to both parent and student.  A spreadsheet will be created and maintained in the Special Education office.  The Special Education Director will review all documentation at the end of each semester. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education will review list and ensure students and parent were notified. A record review will be conducted at the end of each trimester to ensure compliance.  Description of Internal Monitoring Process: The Director of Special Education will review birthday list at the beginning of each trimester in order to ensure compliance | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school has developed procedures and a monitoring mechanism for the requirement to inform students and parents of the rights that will transfer from the parent/guardian to the student upon the student's 18th birthday, and trained special education staff on the procedures. While liaisons have been notified of their responsibility to inform students of the requirement to consent to continuation of special education services and determination of decision-making authority, it is unclear if the liaisons have been trained on the different processes and requirements for establishing decision-making choices, where a shared decision making choice is made in the presence of the Team and is documented in written form, or a delegated decision making choice is made in the presence of at least one representative of the school district and one other witness and is documented in written form and maintained in the student record. | | |
| **Department Order of Corrective Action:**  Submit evidence of training special education liaisons on appropriately documenting decision-making authority. | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training special education liaisons on the distinctions of documenting decision-making authority by February 12, 2016.  Subsequent to training, conduct a review of student records for students who have turned 17 to determine if documentation of transfer of rights notification has been maintained in the record. Also review student records of students who have turned 18 to determine if documentation has been maintained on receiving consent to continue special education services and the student's determination of decision making authority. Submit a report of the results of the internal review of records conducted after the training to determine compliance. Include the number of student records reviewed, the number of records in compliance, and 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 by May 27, 2016.  \*Please note when conducting administrative 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):**  02/12/2016  05/27/2016 | | |

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| **Criterion & Topic:**  SE 12 Frequency of re-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of student records, documentation, and an interview indicate that the district conducts a full re-evaluation for all freshmen special education students, regardless of whether there is a question of continuing eligibility, whether the student's needs warrant it or whether a re-evaluation was conducted less than three years prior. | | |
| **Description of Corrective Action:**  The Director of Special Education reviewed findings and technical assistance provided during the Coordinated Program review.  Upon acceptance of the incoming freshmen, record review will be completed and a determination of those students who require a reevaluation will be determined. In addition if the district does not receive any documentation of their last evaluation, student will be identified and evaluation will be completed.  Upon completion of record review, appropriate assessments will be identified and selected based on the child's disability or suspected area of disability. If student does not require an evaluation but the district requires additional testing, a team meeting will be convened including the parent, student, regular education teacher, and special education teacher and guidance counselor. The team will determine if additional testing is required and identify the assessments. | | |
| **Title/Role(s) of Responsible Persons:**  Director Special Education, Debbie Pacheco | | **Expected Date of Completion:**  06/30/2015 |
| **Evidence of Completion of the Corrective Action:**  Secretary will maintain a log of students who require a re-evaluation and those whose teams need to be convened in order to review placement. The Director will keep documentation of:  a. All students who require an evaluation  b. All sp. ed. meetings, evaluations, and re-evaluations  c. Review of all student records | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education will review evaluation log at the beginning of each trimester in order to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 12 Frequency of re-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  See SE 1. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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| **Criterion & Topic:**  SE 14 Review and revision of IEPs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of student records and an interview indicate that the district does not conduct an annual review Team meeting for freshman students to review and consider the student's progress on the goals of the current IEP and to revise or develop a new IEP. As the district conducts a re-evaluation for all freshman students, regardless of whether a re-evaluation is required, all IEP meetings held in the freshman year are re-evaluation Team meetings. | | |
| **Description of Corrective Action:**  Narrative Description of Corrective Action:  Training was held at the beginning of year to review findings and technical assistance provided during the Coordinated Program Review.   1. The freshmen plans are developed at the middle schools and are dated from September to June. 2. A record review will be conducted to determine which students have been identified for a re-evaluation, 3. Once identification has been made then testing will be planned 4. Team meeting and development of plan will be noted and it will be date of new IEP to one year. 5. If re-evaluation is not warranted during their freshmen year, an annual meeting will be held before the end of the year. 6. The Director of Special Education reviewed the requirements of this criteria with the Special Education Department during the opening day meeting. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education, Debbie Pacheco | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence of Completion: The Director of Special Education will develop and maintain a meeting log, which will include the child's name, area of disability, and anticipated date plan expiration | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education will review meeting log at the beginning of each trimester in order to ensure annual meetings are held. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 14 Review and revision of IEPs | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a log of all freshmen students. Indicate the type of IEP Team activity and the date for that activity that occurred at the middle school prior to entry to Greater Fall River RVTS. Also indicate the type of activity and the date of the activity scheduled at Greater Fall River RVTS for each freshman student. Submit this information by February 12, 2016. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of student records and an interview indicate that following the IEP Team meeting parents receive a summary of the meeting, which includes a completed IEP service delivery grid describing the types and amounts of special education and/or related services proposed by the school and a statement of the major goal areas associated with these services. The school then provides the proposed IEP and placement within two calendar weeks. However, the school is not providing parents with two copies of the proposed IEP and placement; the school currently provides parents with only one copy of the proposed IEP and placement with two signature pages. | | |
| **Description of Corrective Action:**  Review of student records and an interview indicate that following the IEP Team meeting parents receive a summary of the meeting, which includes a completed IEP service delivery grid describing the types and amounts of special education and/or related services proposed by the school and a statement of the major goal areas associated with these services. The school then provides the proposed IEP and placement within two calendar weeks. However, the school is not providing parents with two copies of the proposed IEP and placement; the school currently provides parents with only one copy of the proposed IEP and placement with two signature pages. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education, Debbie Pacheco | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  Narrative Description of Corrective Action:  District has instituted a new procedure requiring two copies of the IEP be mailed to parent  1) Upon completion of a team meeting, parent is provided a draft copy of the IEP developed and discussed at the team meeting  2) Director if Education reviewed the requirements of this criteria with the Special Education Department during the opening day meeting.  3) Director met with secretary and reviewed this requirement during the opening day meeting.  Evidence of Completion:  N1 letter will include a notation that 2 copies are enclosed | | |
| **Description of Internal Monitoring Procedures:**  1) The Director of Special Education will review N 1 letters to ensure two copies are noted and mailed.  2) Record review will be completed at the end of each trimester to ensure it is noted that two copies are mailed to parent. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Conduct a review of student records for meetings held this school year to determine whether two IEPs are provided to parents following the Team meeting. Submit a report of a review of student records including the number of records reviewed, the number in compliance and the root cause for any continuing non-compliance with the corrective action to be taken. Submit this information by February 12, 2016.  \*Please note when conducting administrative 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):**  02/12/2016 | | |

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of documentation and interviews indicate that recruitment and promotional materials being disseminated to residents in the area served by the school, including information pertaining to the school's career/vocational technical education programs, are not translated into the major languages spoken by residents with limited English skills. | | |
| **Description of Corrective Action:**  All recruitment and promotional materials will be translated into the major languages spoken by residents in the four communities served by Diman (Westport, Fall River, Somerset, Swansea). Diman has purchased a new website provider. This new website has the capability to translate school documents into numerous languages. The webmaster at Diman will ensure that all promotional and recruitment materials are posted and translatable on the Diman website. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Guidance | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Documents translated | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent/Principal will oversee the work of the Director of Guidance and the webmaster. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide an update on the implementation of the new website translation. Indicate how residents, students and families are provided with translated documents prior to availability through the website, and how documents will continue to be made available in hard copy format, by February 12, 2016.  Submit samples of all documents referenced in the finding and indicate where on the website these documents can be located. For documents available on the website, indicate how these are disseminated in hard copy format to residents. Submit this information by August 1, 2016. | | |
| **Progress Report Due Date(s):**  02/12/2016  08/01/2016 | | |

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| **Criterion & Topic:**  CR 9 Hiring and employment practices of prospective employers of students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of documentation indicates that the Statement of Assurance, the form signed by prospective cooperative education employers indicating that the employer complies with applicable federal and state laws prohibiting discrimination in hiring and employment practices, does not include gender identity as a protected category. | | |
| **Description of Corrective Action:**  The Diman Cooperative Education Statement of Assurance form has been updated and implemented | | |
| **Title/Role(s) of Responsible Persons:**  Cooperative Education Coordinator | | **Expected Date of Completion:**  11/02/2015 |
| **Evidence of Completion of the Corrective Action:**  Cooperative education forms with the inclusion of gender identity as a protected category will be implemented. | | |
| **Description of Internal Monitoring Procedures:**  Forms are readily available in school and online for review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2015  **Correction Status:** Corrected | |
| **Basis for Decision:**  The school submitted the Diman Cooperative Education Statement of Assurance form; the non-discrimination policy statement has been updated to include gender identity in the list of protected categories. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of documentation indicates that the nondiscrimination policy in the code of conduct, as set forth in the student handbook, does not include gender identity as a protected category. | | |
| **Description of Corrective Action:**  The current Student Handbook (addendum) and the 2016-2017 Student Handbook will have a nondiscrimination statement which includes gender identity as a protected category | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent/Principal | | **Expected Date of Completion:**  11/02/2015 |
| **Evidence of Completion of the Corrective Action:**  Student Handbook (hard copy and online) | | |
| **Description of Internal Monitoring Procedures:**  Statement will be replicated procedurally (by Dean of Students and handbook committee) in future years, unless federal changes occur. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of the addendum for the student handbook and indicate how this additional information was distributed to the student/family population by February 12, 2016. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of documentation indicates that the school has a Bullying Intervention and Prevention Plan that is posted on the school's website, but it is not part of the student handbook. The Plan has not been updated or amended to include extending protections to students who are bullied by a member of the school staff and it does not make clear that a member of the school staff may be named the aggressor or perpetrator in a bullying report. The Plan does not contain information relative to the duties of faculty and staff in addressing the bullying of students by a school staff member. The staff handbook does include the Bullying Intervention and Prevention Plan with an amendment addressing the required updates. | | |
| **Description of Corrective Action:**  Bullying Intervention and Prevention Plan will be updated to include “extending protections to students who are bullied by a member of the school staff" and will make clear that a member of the school staff may be named the aggressor or perpetrator in a bullying report. Furthermore the Plan will contain information relative to the duties of faculty and staff in addressing the bullying of students by a school staff member. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent/Principal  Dean of Students | | **Expected Date of Completion:**  12/31/2015 |
| **Evidence of Completion of the Corrective Action:**  An updated Bullying Intervention and Prevention Plan which contained the required aforementioned information and contained in the 2016-2017 student handbook and online | | |
| **Description of Internal Monitoring Procedures:**  The Dean will annually chair a committee to review changes/updates to the student handbook, including the Bullying Intervention and Prevention Plan. The committee will begin meeting in November 2015 to begin work with the handbook and this issue. The Assistant Superintendent/Principal will be an ex-officio member of this committee and review all items before publication of the student handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** The school did not indicate how updated information will be provided to students in the current school year. | | |
| **Department Order of Corrective Action:** Describe the process to inform current students of the modifications to the Bullying Intervention and Prevention Plan. | | |
| **Required Elements of Progress Report(s):** Submit evidence of the updated Bullying Intervention and Prevention Plan. Indicate how this information was provided to current students for their handbooks, and where this information can be accessed online by February 12, 2016. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of documentation indicates that written materials and other media used to publicize the school, including the admission policy, admission application, recruitment materials, co-op forms, program brochures and the school's website, do not include gender identity as a protected category in the non-discrimination statement. | | |
| **Description of Corrective Action:**  All school documents will include a nondiscrimination statement which includes gender identity as a protected category | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent/principal | | **Expected Date of Completion:**  01/31/2016 |
| **Evidence of Completion of the Corrective Action:**  School documents, website | | |
| **Description of Internal Monitoring Procedures:**  The nondiscrimination statement will be reviewed annually by the Assistant Superintendent/Principal and any changes in federal law(s) will be reflected on all school documents | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit samples of all documents referenced in the finding (written materials and other media used to publicize the school, including the admission policy, admission application, recruitment materials, co-op forms, program brochures) and indicate where on the website they can be located. If documents are available on the website, indicate how they are provided in hard copy format by February 12, 2016. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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| **Criterion & Topic:**  CR 23 Comparability of facilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Observations and interviews indicate that the school is not providing English language learners with facilities comparable to those provided to the overall student population. Specifically, English language development instruction is provided in an office that has been converted into a classroom and is insufficient for the number of students currently assigned in some instructional groupings, which may be up to six students at one time. As a result, the room is often over-crowded. | | |
| **Description of Corrective Action:**  In January of 2016, planning by the Director of Guidance, and Academic Coordinator in consultation with the Principal, will take place in order to schedule ELL classes in a room adequately sized for all students with instructional materials comparable to those provided to the overall student population. This action will be in place for the start of the 2016-2017 school year. | | |
| **Title/Role(s) of Responsible Persons:**  Academic Coordinator  Director of Guidance | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  The ELE teacher will be assigned to a new classroom. There will be a computerized record of the classes' assignment. English language learners will receive instruction in classroom(s) comparable to the overall student population. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent/Principal will ensure that the Director of Guidance and the Academic Coordinator annually follow the procedure described above and that the ELE classroom schedule continues. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 23 Comparability of facilities | **Corrective Action Plan Status:** Disapproved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** The school has indicated that an initial planning session is scheduled for January 2016 with the intention of addressing the concerns of scheduling and classroom & equipment allocation for the 2016-17 school year. At this time, the description lacks specificity and fails to address any inequities for the current school year. | | |
| **Department Order of Corrective Action:** Provide a detailed report of the planning meeting scheduled for January 2016; include timelines for when changes will be made to the location of ESL instructional space and indicate how changes will impact ELL students in the current school year. Provide a school floor plan/map indicating the location of the new ESL instructional space. | | |
| **Required Elements of Progress Report(s):** Provide the report on the planning meeting(s) described in the corrective action, include floor plan/school map indicating relocated space and timeline for correcting the space allocation by February 12, 2016. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Review of documentation and interviews indicate that the 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. | | |
| **Description of Corrective Action:**  The Superintendent-Director and the Assistant Superintendent/Principal will conduct an annual review of sources of school data i.e. applications, admittance, extracurricular activities, end-of-the year reports, sports data, etc. equal access for all students to all school programs and activities. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent-Director and Assistant Superintendent/Principal | | **Expected Date of Completion:**  08/01/2016 |
| **Evidence of Completion of the Corrective Action:**  The Superintendent-Director will present and maintain an "equal access report" as a subsection of the "annual district report". | | |
| **Description of Internal Monitoring Procedures:**  The equal access report will be presented as a subsection of the district end-of -the year report and kept on file in the Superintendent-Director's office. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/14/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school did not provide detail on how data for each area of review will be collected or analyzed. The school did not describe a continuing internal monitoring process. | | |
| **Department Order of Corrective Action:**  Determine how the data from the different sources is being reviewed and analyzed. Develop an internal monitoring process to ensure ongoing compliance with this criterion. | | |
| **Required Elements of Progress Report(s):**  Submit a description of the procedures and any protocols that the school develops to 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 by February 12, 2016.  Submit a copy of the institutional self-evaluation by August 1, 2016. | | |
| **Progress Report Due Date(s):**  02/12/2016  08/01/2016 | | |

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

Charter School or District: Greater Fall River Regional Vocational Technical School

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Lois Miller

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**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 5  Program Placement & Structure | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews and a review of district documentation and ACCESS for ELLs scores indicated that the district does not provide sufficient ESL instruction appropriate to the student’s level of English proficiency to promote and support the rapid acquisition of English language proficiency by these students as is required in G.L. c. 71A. Interviews also indicated that the schedule for the ESL instruction was flexible and students have the choice not to report to the ESL class and compensate for that time during the after school program although all services students are entitled to receive should be provided during the official school time.* | | | |
| **Narrative Description of Corrective Action: ELE 5** Program Placement and Structure  **Description**: Kyle Alves, the Assistant Superintendent/Principal will ensure that Lois Miller, the Director of Guidance and Elvio Ferreira, the Academic Coordinator work together to develop a master schedule in November and December of 2015 to include courses that provide sufficient ESL instruction at appropriate levels of English proficiency for identified ELL students for the 2016-2017 school year. These courses will be graded, required, and scheduled during the school day. A full time ELL instructor position will be posted for the 2016-2017 school year. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Lois Miller, Director of Guidance | | **Expected Date of Completion for Each Corrective Action Activity:** August 1, 2016 | |
| **Evidence of Completion of the Corrective Action:** All ELL students will be placed into and scheduled for an appropriate ESL class- computerized schedule. | | | |
| **Description of Internal Monitoring Procedures:** Assistant Superintendent/Principal will be sent a copy (for review) of each ELL schedule annually | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 5  Program Placement & Structure | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  Please complete district information in the attached spreadsheet labeled ELL List for each ELL student in the district. | | | |
| **Progress Report Due Date(s): March 1, 2016** | | | |

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| 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:** *Review of student records and interviews indicate that the district does not provide progress reports on the student’s progress in English language instruction.* | | | |
| **Narrative Description of Corrective Action: ELE 10**  **Description**:  Classes will be in place for the school year 2016-2017 for ELL students as described in ELE 5. The ELL teacher of these classes will provide regular progress reports to parents and students in the progress of English language instruction starting in September of 2016. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Lois Miller**,** Director of Guidance | | **Expected Date of Completion for Each Corrective Action Activity:** : September 1, 2016 | |
| **Evidence of Completion of the Corrective Action:** : Computerized records will be maintained. | | | |
| **Description of Internal Monitoring Procedures:** Kyle Alves, the Assistant Superintendent /Principal will ensure that progress reports are issued to ALL students. | | | |
| 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:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** The school indicates that corrective actions will be created for the 2016-17 school year. However, the plan also needs to document the language progress of current students and the inclusion of those progress reports in the student records for the current school year. | | | |
| **Department Order of Corrective Action:** Develop procedures that will be implemented in the current school year to ensure that language acquisition progress for ELL students is documented in progress reports provided to parents/guardians and students, that reports are provided with the same frequency as report cards/progress reports, and that those progress reports are maintained in the student record. | | | |
| **Required Elements of Progress Report(s):**  Submit a description of the procedures that have been developed to provide progress reports to parents/guardians of current ELL students in the same manner and frequency as general education reporting, and include dates for current report card schedule by March 1, 2016.  Conduct an internal review of student records to determine that all ELL records contain evidence of progress reports provided to parents with the same frequency as general education reporting and provided in a language understandable to the parent/guardian by June 29, 2016. | | | |
| **Progress Report Due Date(s): March 1, 2016; June 29, 2016** | | | |
| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 16  Equitable Facilities | | | **Rating:** Not Implemented |
| **Department CPR Finding:** *Observations and interviews indicate that the district is not providing ELL students with facilities and materials comparable to those provided to the overall student population. Specifically, the English language development instructional space is an office that has been converted into a classroom and is insufficient for the maximum number of students currently assigned in some instructional groupings, which may be up to six students at one time. In addition, interviews indicate that although three desktop computers are provided for student use, additional computers/laptops are not available for ELL classes during the regular school day, resulting in some students not being able to complete individual work.* | | | |
| **Narrative Description of Corrective Action: ELE 16**  **Description**:  In Januaryof 2016, planning will take place with the Principal, Director of Guidance, and Academic Coordinator involved in order to schedule all ELL classes in a room adequately sized for all students with instructional materials comparable to those provided to the overall student population. This action will be in place for the start of the 2016-2017 school year. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Elvio Ferreira**,** Academic Coordinator | | **Expected Date of Completion for Each Corrective Action Activity:** : August 1, 2016 | |
| **Evidence of Completion of the Corrective Action:** Anew classroom will be assigned to the ELE teacher and computerized records will be maintained. | | | |
| **Description of Internal Monitoring Procedures:** Kyle Alves**,** the Assistant Superintendent/Principal will ensure that the Lois Miller, the Director of Guidance and Elvio Ferreira, the Academic Coordinator annually implement the aforementioned procedures resulting in the continuation of the ELE classroom location and the continuation of the ELE schedule. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 16  Equitable Facilities | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** The school has indicated that an initial planning session is scheduled for January 2016 with the intention of addressing the concerns of scheduling and classroom & equipment allocation for the 2016-17 school year. At this time, the description lacks specificity and fails to address any inequities for the current school year. | | | |
| **Department Order of Corrective Action:** Develop a detailed report of the planning meeting results for the meeting scheduled for January 2016; include timelines for when changes will be made to the location of ESL instructional space and indicate how changes will impact ELL students in the current school year. Provide school floor plan/map indicating the location of the new ESL instructional space. | | | |
| **Required Elements of Progress Report(s):** Provide the report from the January 2016 planning meeting described in the corrective action, include floor plan/school map indicating relocated space, and timeline for correcting the space allocation. Indicate any interim plans to address equitable facilities concerns to be implemented in the current school year by March 1, 2016. | | | |
| **Progress Report Due Date(s): March 1, 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:** *Documentation submitted by the district does not include any evidence showing that the district conducts periodic evaluations of the effectiveness of the district’s ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the educational program.* | | | |
| **Narrative Description of Corrective Action: ELE 17**  **Description**:  A committee will be formed in January of 2016 with the charge of annually reviewing the effectiveness of the district’s ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the educational program. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Lois Miller**,** Director of Guidance- Kyle Alves, Assistant Superintendent/Principal | | **Expected Date of Completion for Each Corrective Action Activity:** March 31, 2016 | |
| **Evidence of Completion of the Corrective Action:**  A written evaluation report will be completed annually and submitted to the Assistant Superintendent/Principal, who will review the report and submit to the Superintendent-Director. | | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent/Principal will review annual ELE Program evaluation report and make any needed adjustments to ELE program i.e. resources, technology, etc. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 17 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**   1. Please provide a copy of the most recent evaluation conducted by the district to identify the strengths and areas of improvement in developing ELLs’ English language skills and increasing their ability to participate meaningfully in the district’s educational program. 2. Please submit the description of program adjustments or changes made in response to the most recent ELE program evaluation. | | | |
| **Progress Report Due Date(s): June 29, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 18   Records of ELLs | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *See ELE 10.* | | | |
| **Narrative Description of Corrective Action:** Classes will be in place for the school year 2016-2017 for ELL students as described in ELE 5. The ELL teacher of these classes will provide regular progress reports to parents and students in the progress of English language instruction starting in September of 2016. All student individual reports and records will follow established procedures. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Lois Miller, Director of Guidance | | **Expected Date of Completion for Each Corrective Action Activity:** September 1, 2016 | |
| **Evidence of Completion of the Corrective Action:** New classroom will be assigned to ELE teacher and computerized records will be maintained. | | | |
| **Description of Internal Monitoring Procedures:** The Assistant Superintendent /Principal will ensure that progress reports are issued to ALL students and that all student individual records follow established procedures. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: :** ELE 18   Records of ELLs | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** See ELE 10. | | | |
| **Department Order of Corrective Action:** See ELE 10. | | | |
| **Required Elements of Progress Report(s):** See ELE 10. | | | |
| **Progress Report Due Date(s): March 1, 2016; June 29, 2016** | | | |

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

Charter School or District: Greater Fall River Regional Vocational Technical School Corrective Action Plan Forms

Program Area: Career/Vocational Technical Education Prepared by: Thomas Aubin, Vocational Coordinator

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

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| *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 6, 2016** |

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| **COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN**  **(To be completed by school district/charter school)** | |
| **Criterion & Topic:** CVTE 6 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Review of documentation and interviews indicate that the school is not using its Department-approved Admission Policy. (Legal Citation: M.G.L. c.76 section 5,2)* | |
| **Narrative Description of Corrective Action:** | |
| **Title/Role of Person(s) Responsible for Implementation**: Responsibility: Assistant Superintendent/Principal (Kyle Alves), Diman School Committee, DESE, Director of Guidance (Lois Miller) | **Expected Date of Completion for Each Corrective Action Activity: January 3, 2016** |
| **Evidence of Completion of the Corrective Action:** New Policy will be sent to DESE for approval and, once DESE approved, will be presented to the Diman School Committee. The new admissions policy will be implemented immediately upon approvals. | |
| **Description of Internal Monitoring Procedures**: Internal monitoring will be done through the admittance process by Director of Guidance (Lois Miller) and overseen by the Assistant Superintendent/Principal (Kyle Alves) | |

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| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | |
| **Criterion:** CVTE 6 | **Status of Corrective Action:**  × Approved ❑ Partial 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 submit its revised Admission’s Policy for review and approval through their liaison, Larry DeSalvatore. Upon completion the district will send a copy to Lisa Weinstein. | |
| **Progress Report Due Date(s): January 21, 2016** | |

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| **COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN**  **(To be completed by school district/charter school)** | |
| **Criterion & Topic:** CVTE 7 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Review of documentation and interviews indicate that although the district encourages students to apply to all programs, there was no evidence the Chapter 74-approved exploratory program provides for students to explore at least one program that would prepare them for a career nontraditional for their gender. (Citation: Vocational Technical Education Regulations 603 CMR 4.03(4))* | |
| **Narrative Description of Corrective Action:** In practice, all students get an opportunity to be involved in at least one nontraditional exploratory program. The Vocational Coordinator and the Director of Guidance have in place a computerized process that results in documentation reflecting student enrollment and participation in at least one nontraditional exploratory program at Diman. A system is in place that will indicate how many students in the Exploratory Program are participating in at least one nontraditional exploratory program. This will allow the Director of Guidance to ensures that all students explore at least one nontraditional shop, based upon their gender.  **N.B.** Chapter 74 Exploratory- Non Traditional Information  “A 2015-2016 school year report indicates that 2 males out of 169 enrolled in the Chapter 74 Exploratory Program were not scheduled for any of the three nontraditional programs offered for males (Health Assisting, Dental Assisting, Business Technology).  All females were enrolled in at least one nontraditional program offered for females. A system is now in place to ensure that all students enrolled in the Exploratory program will participate in at least one nontraditional Exploratory program.“ | |
| **Title/Role of Person(s) Responsible for Expected Date of Completion for Each Implementation:** Vocational Coordinator (Tom Aubin)/Director of Guidance (Lois Miller) | **Corrective Action Activity:** October 22, 2015 |
| **Evidence of Completion of the Corrective Action:** The Director of Guidance will submit a “nontraditional exploratory enrollment report annually (in September) to the Assistant Superintendent/Principal. The “annual nontraditional exploratory enrollment report” will be kept on file in guidance. | |
| **Description of Internal Monitoring Procedures:** The system will be monitored by the Director of Guidance (Lois Miller), the Vocational Coordinator (Tom Aubin) and overseen by the Assistant Superintendent/Principal (Kyle Alves). | |

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| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | |
| **Criterion:** CVTE 7 | **Status of Corrective Action:**  × Approved ❑ Partial Approved ❑ Disapproved |
| **Basis for Partial Approval or Disapproval:** Not Applicable | |
| **Department Order of Corrective Action:** Not Applicable | |
| **Required Elements of Progress Report(s):**   1. Provide a copy of the non- traditional exploratory enrollment report to the Department. 2. Provide a description of the system the district has in place to monitor for the assurance that all students are given the opportunity to explore at least one program that would prepare them for a career that is nontraditional for their gender. | |
| **Progress Report Due Date(s): January 21, 2016** | |

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| **COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN**  **(To be completed by school district/charter school)** | |
| **Criterion & Topic:** CVTE 9B | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Review of documentation indicates that the district did not retain records for review to ensure that the district was accurately reporting student data in the Graduate Follow-up Report.* | |
| **Narrative Description of Corrective Action:** Graduate follow-up forms/records, used to report student data, are retained by Diman and will be secured in the Diman Records Room. | |
| **Title/Role of Person(s) Responsible for Implementation:** Director of Guidance (Lois Miller)/Vocational Coordinator (Tom Aubin) | **Expected Date of Completion for Each Corrective Action Activity:** November 1, 2015 |
| **Evidence of Completion of the Corrective Action:** Graduate follow-up Records are contained in Diman Records Room | |
| **Description of Internal Monitoring Procedures:** Director of Guidance (Lois Miller) will ensure that graduate follow-up records are collected and reported, as required. Subsequently the graduate follow-up records will be filed in the Diman Records Room | |

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| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | |
| **Criterion:** CVTE 9 B | **Status of Corrective Action:**  × Approved ❑ Partial Approved ❑ Disapproved |
| **Basis for Partial Approval or Disapproval:** Not Applicable. | |
| **Department Order of Corrective Action:** Not Applicable. | |
| **Required Elements of Progress Report(s):**   1. Provide a sample of completed graduate follow-up records with names redacted. 2. Provide a description of the internal monitoring system in place to ensure retention of graduate follow-up records. | |
| **Progress Report Due Date(s): January 21, 2016** | |

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| **COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN**  **(To be completed by school district/charter school)** | |
| **Criterion & Topic:** CVTE 18 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Review of documentation and interviews indicate that one teacher in the career/vocational technical education program is not appropriately licensed or working under a Department-issued waiver.* (*Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03(5))* | |
| **Narrative Description of Corrective Action:** The teacher is now appropriately licensed in the area of teaching assignment. Date of completion: August, 2015 | |
| **Title/Role of Person(s) Responsible for Expected Date of Completion for Each Implementation:** Assistant Superintendent/Principal (Kyle Alves) /Human Resource Coordinator(Kriste Garci**a)** | **Corrective Action Activity:** August 31, 2015 |
| **Evidence of Completion of the Corrective Action:** Personnel records stored in the Human Resources area of the Business office | |
| **Description of Internal Monitoring Procedures:** The Superintendent-Director (Marta Montleon) and the Assistant Superintendent/Principal (Kyle Alves) will assure that all personnel who are recommended, approved, hired, and assigned are licensed in their assigned area. If a fully licensed candidate, who meets the needs of the program/position is not available, the most qualified person will be recommended/hired. The waiver process will be initiated. | |

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| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | |
| **Criterion:** CVTE 18 | **Status of Corrective Action:**  × Approved ❑ Partial Approved ❑ Disapproved |
| **Basis for Partial Approval or Disapproval:** Not Applicable. | |
| **Department Order of Corrective Action:** Not Applicable. | |
| **Required Elements of Progress Report(s):**   1. Provide copy of the Department issued Ch.74 license or waiver for the teacher. 2. Provide a description of the internal monitoring system in place to ensure all teachers are appropriately licensed or on a waiver. | |
| **Progress Report Due Date(s): January 21, 2016** | |

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| **COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN**  **(To be completed by school district/charter school)** | |
| **Criterion & Topic:** CVTE 20 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A site visit by the Office of Career/Vocational/Technical Education safety specialist revealed that not all facilities used for career/vocational technical education meet current occupational standards. The Office for Career/Vocational Technical Education will send a Safety Survey Report, which includes details specific to each program, to Superintendent Montleon under separate cover. (Legal Citation: Perkins Section 134; Vocational Technical Education Regulations 603 CMR 4.03(3)(d))* | |
| **Narrative Description of Corrective Action:** The completed “SAFETY SURVEY REPORT RESPONSE TEMPLATE” for the Safety Review Conducted at Diman Regional Vocational Technical School will be forwarded/e-mailed to David Edmonds, as indicated. | |
| **Title/Role of Person(s) Responsible for Expected Date of Completion for Each Implementation:**  Superintendent-Director (Marta Montleon), Assistant Superintendent/Principal (Kyle Alves), Director of Buildings and Grounds (Glen Benevides) and the Vocational Coordinator (Tom Aubin) | **Expected Date of Completion for Each Corrective Action Activity:** Dates will be detailed on the “SAFETY SURVEY REPORT RESPONSE TEMPLATE” |
| **Evidence of Completion of the Corrective Action:** will be detailed on the “SAFETY SURVEY REPORT RESPONSE TEMPLATE” | |
| **Description of Internal Monitoring Procedures:** will be detailed on the “SAFETY SURVEY REPORT RESPONSE TEMPLATE” | |

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| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | |
| **Criterion:** CVTE 20 | **Status of Corrective Action:**  × Approved ❑ Partial Approved ❑ Disapproved |
| **Basis for Partial Approval or Disapproval:** N/A | |
| **Department Order of Corrective Action: N/A** | |
| **Required Elements of Progress Report(s):**  The district will file monthly updates with the OCVTE Safety Specialist until all safety findings are ameliorated. | |
| **Progress Report Due Date(s):** Monthly, to the OCVTE Safety Specialist; PQA-**January 21, 2016** | |
| **COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN**  **(To be completed by school district/charter school)** | |
| **Criterion & Topic:** CVTE 21 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A site visit by the Office of Career/Vocational/Technical Education safety specialist revealed that not all equipment used for career/vocational technical education meets current occupational standards. The Office for Career/Vocational Technical Education will send a Safety Survey Report, which includes details specific to each program, to Superintendent Montleon under separate cover. (Legal Citation: Perkins Section 134; Vocational Technical Education Regulations 603 CMR 4.03(3)(d))* | |
| **Narrative Description of Corrective Action:** The completed “SAFETY SURVEY REPORT RESPONSE TEMPLATE” for the Safety Review Conducted at Diman Regional Vocational Technical School will be forwarded/e-mailed to David Edmonds, as indicated. | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent-Director(Marta Montleon) Assistant Superintendent/Principal (Kyle Alves), Director of Buildings and Grounds (Glen Benevides) and the Vocational Coordinator (Tom Aubin) | **Expected Date of Completion for Each Corrective Action Activity:** Dates will be detailed on the “SAFETY SURVEY REPORT RESPONSE TEMPLATE” |
| **Evidence of Completion of the Corrective Action:** will be detailed on the “SAFETY SURVEY REPORT RESPONSE TEMPLATE” | |
| **Description of Internal Monitoring Procedures:** will be detailed on the “SAFETY SURVEY REPORT RESPONSE TEMPLATE” | |

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| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | |
| **Criterion:** CVTE 21 | **Status of Corrective Action:**  × Approved ❑ Partial Approved ❑ Disapproved |
| **Basis for Partial Approval or Disapproval:** N/A | |
| **Department Order of Corrective Action:** N/A | |
| **Required Elements of Progress Report(s):**  The district will file monthly updates with the OCVTE Safety Specialist until all safety findings are ameliorated. | |
| **Progress Report Due Date(s):**  Monthly, to the OCVTE Safety Specialist; PQA- **January 21, 2016** | |