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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: Sturbridge

CPR Onsite Year: 2015-2016

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 01/08/2016.

**Mandatory One-Year Compliance Date:** **01/08/2017**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 2 | Required and optional assessments | Partially Implemented |
| SE 4 | Reports of assessment results | Partially Implemented |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| CR 6 | Availability of in-school programs for pregnant students | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10C | Student Discipline | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Implementation In Progress |
| CR 25 | Institutional self-evaluation | Partially Implemented |

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the district does not consistently complete educational assessments, specifically a history of the student's educational progress in the general curriculum. | | |
| **Description of Corrective Action:**  The Special Education Director will review with Team Chairs/School Psychologists, during the March 2016 monthly meeting, the need to complete the Educational Assessment A & B, specifically related to the history of a student’s educational progress in the general curriculum  Through June 2016, the Team Chairs will hold mini workshops, with groups of special education and general education teachers on the completion the Educational Assessment A & B, specifically related to the history of a student’s educational progress in the general curriculum | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director  Team Chairs/Psychologists | | **Expected Date of Completion:**  06/18/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of agendas, attendance sheets & handouts regarding training on Educational Assessments A & B, focus on the history of student’s educational progress in the general curriculum. | | |
| **Description of Internal Monitoring Procedures:**  Special Education Director and/or Team Chairs will conduct random sampling of Educational Assessments for review.  Random file checks by Special Education Director (annually) | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved  **Status Date:** 02/22/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of completion of educational assessments for students identified on the Student Issues Worksheet by April 26, 2016.  Submit evidence of staff training on the procedures to complete students' history of educational progress in the general curriculum, including a training agenda with name/role of presenter, signed attendance sheets and examples of training materials by April 26, 2016.  Submit a description of the internal tracking system, including the date of the system's implementation and the staff responsible for the oversight by April 26, 2016.  Submit the results of an administrative review of a sample of student records for completion of students' history of educational progress in the general curriculum (Educational Assessment A). Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance on or before by October 14, 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):**  04/26/2016  10/14/2016 | | |

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| **Criterion & Topic:**  SE 4 Reports of assessment results | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that related services assessment summaries do not consistently include the results, a description of the student's needs in educationally relevant and common terms, or offer explicit means of meeting these needs. | | |
| **Description of Corrective Action:**  The Special Education Director will review with Team Chairs/School Psychologists, during the February 2016 monthly meeting, the report writing process, including comprehensive summaries which include results, diagnostic impressions, a description of student's needs in educationally relevant and common terms, and recommendations which offer explicit means of meeting those needs.  Through June 2016, the Special Education Director will hold mini workshops, with groups of related service providers ( OT/PT/SLP/Vision), regarding the report writing process, including comprehensive summaries which include results, diagnostic impressions, a description of student's needs in educationally relevant and common terms and recommendations which offer explicit means of meeting those needs. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director  Team Chairs/Psychologists | | **Expected Date of Completion:**  06/18/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of agendas, attendance sheets & handouts regarding training on report writing and summaries. | | |
| **Description of Internal Monitoring Procedures:**  Special education Director and/or Team Chairs will conduct random sampling of evaluation reports for review.  Random file checks by Special Education Director annually | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 4 Reports of assessment results | **Corrective Action Plan Status:** Approved  **Status Date:** 02/22/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit revised procedures related to content for related service providers' assessment summaries, including results, a description of the student's needs in educationally relevant and common terms, and/or explicit means of meeting these needs by April 26, 2016.  Submit evidence of related service staff training on the revised procedures, including a training agenda with name/role of the presenter, signed attendance sheets and examples of training materials by April 26, 2016.  Submit the description of the internal oversight and tracking system and identify the person(s) responsible for the oversight, including the date of the system's implementation. Submit this information by April 26, 2016.  Conduct an administrative review of two student records for each related services provider for evidence that assessment summaries consistently include the assessment results, a description of the student's needs in educationally relevant and common terms, and/or explicit means of meeting these needs. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by October 14, 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):**  04/26/2016  10/14/2016 | | |

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Based on interviews, the district currently operates a regional parent advisory council that addresses the requirements of this criterion with representation from each school district. However, the district's DESE approved waiver has expired and needs to be renewed. | | |
| **Description of Corrective Action:**  The Special Education Director will complete the Request for Waiver as provided in Special Education Regulations: Alternative Compliance 603 CMR 28.03(5). The Waiver will be submitted every three years for renewal.  Waiver submitted December 2015 | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director | | **Expected Date of Completion:**  06/18/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of Approved Waiver | | |
| **Description of Internal Monitoring Procedures:**  Special Education Director will annually monitor dates for renewal | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 02/22/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the approved Alternative Compliance waiver for a regional PAC, or a copy of the application if the waiver is pending, by April 26, 2016.  Please see the Administrative Advisory SPED 2015-1: Special Education Parent Advisory councils, Acceptable Alternatives, and Use of Social Media: www.doe.mass.edu/sped/advisories/2015-1.html | | |
| **Progress Report Due Date(s):**  04/26/2016 | | |

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| **Criterion & Topic:**  CR 6 Availability of in-school programs for pregnant students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  While a specific policy on the availability of in-school programs for pregnant students is not required, a review of the district's documents indicated that students who are pregnant and wish to remain in school must first obtain the certification of a physician, which is not required for other physical or emotional conditions requiring the attention of a physician. Additionally, interviews demonstrated that staff members do not have a consistent understanding of the application of Title IX to these students. | | |
| **Description of Corrective Action:**  The Assistant Superintendent for Learning and Teaching will provide training for the Leadership Team on the following: Title IX: 20 U.S.C. 1681; 34 CFR 106.40(b)  Availability of in-school programs for pregnant students  1. Pregnant students are permitted to remain in regular classes and participate in extracurricular activities with non-pregnant students throughout their pregnancy, and after giving birth are permitted to return to the same academic and extracurricular program as before the leave.  2. The district does not require a pregnant student to obtain the certification of a physician that the student is physically and emotionally able to continue in school unless it requires such certification for all students for other physical or emotional conditions requiring the attention of a physician.  Principals will provide training to staff regarding the availability of in-school programs for pregnant students and the understanding of the application of Title IX to these students.  Policy JIE, Pregnant Students will be rescinded by June 2016 | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent for Learning and Teaching  Principals | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of agendas, attendance sheets & handouts regarding training on Availability of in-school programs for pregnant students and Title IX application | | |
| **Description of Internal Monitoring Procedures:**  Yearly review of training | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 6 Availability of in-school programs for pregnant students | **Corrective Action Plan Status:** Approved  **Status Date:** 02/22/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training for relevant staff on the applicability of Title IX to pregnant students and the discontinuation of requiring a physician's certification for pregnant students, along with an agenda with name/role of the presenter, signed attendance sheets, and examples of training materials, by April 26, 2016.  Submit the school committee's approved meeting minutes or a link to the approved minutes, demonstrating the rescinding of policy JIE on pregnant students, by October 14, 2016. | | |
| **Progress Report Due Date(s):**  04/26/2016  10/14/2016 | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that disciplinary procedures for students with disabilities do not include students with Section 504 Accommodation Plans. | | |
| **Description of Corrective Action:**  Review and update documents, including student handbook, to include appropriate procedures for the discipline of students with disabilities with Section 504 Accommodations Plans.  Review updated handbook, regarding disciplinary procedures for all students with disabilities, including IEP and 504, with staff during beginning of the year monthly staff meeting (August 2016) | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director  Principal | | **Expected Date of Completion:**  09/23/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of updated Handbook, page 35  Copies of agendas, attendance sheets & handouts regarding training | | |
| **Description of Internal Monitoring Procedures:**  Comprehensive yearly review of handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 02/22/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of the updated student handbook for inclusion of students with 504 Plans in the disciplinary procedures for students with disabilities. The district can submit an updated handbook or a web link to the revised posted student handbook. | | |
| **Progress Report Due Date(s):**  04/26/2016 | | |

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the district implements the regional policy and discipline procedures consistent with 37H3/4, which have been adopted by the district's school committee. However, document review demonstrated that the district's written notice of suspension does not include the following: 1) evidence the notice is provided to the student; 2) an opportunity for the student to dispute the charges and present an explanation; or 3) the date, time and location of the hearing. In addition, the written notice requires that parents attend a re-entry meeting prior to the student's return to school, which is not required by regulation and may extend the student's exclusion from school. | | |
| **Description of Corrective Action:**  Review and update document: Written Notice of Suspension, to include the following:  1. Evidence the notice is provided to the student  2. An opportunity for the student to dispute the charges and present and explanation  3. The date, time, and location of the hearing  4. Rescind the requirement that the parent attend a re-entry meeting prior to the students return to school , which is not required by regulation and may extend the student’s exclusion from school  Review Written Notice with Leadership Team | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent for Learning and Teaching  Special Education Director  Principal | | **Expected Date of Completion:**  12/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of updated Letter  Training Agenda for Leadership Team | | |
| **Description of Internal Monitoring Procedures:**  Random review of Discipline records and written documentation- Written Notice of Suspension  Yearly review of discipline procedures | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 02/22/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit the updated Written Notice of Suspension, which will include (1) evidence notice is provided to the student; (2) an opportunity for the student to dispute the charges and present an explanation; (3) date, time and location of the hearing; and (4) removal of the requirement for a re-entry meeting prior to the student's return to school.  Submit evidence of training to the Leadership Team, including the training agenda with name/role of presenter, examples of training materials, and signed attendance sheets. | | |
| **Progress Report Due Date(s):**  04/26/2016 | | |

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| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **CPR Rating:**  Implementation In Progress |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the district meets all current requirements for use of physical restraint. Document review and interviews also demonstrated that the district has begun the revision of its written restraint prevention and behavior support policy and procedures, including the development of a behavior support policy and alternatives to physical restraint and the prohibition of medication restraint, mechanical restraint, prone restraint, and seclusion. | | |
| **Description of Corrective Action:**  1. The district will revise and update the JKAA (District Restraint Policy), policy to include the development of a behavior support policy and alternatives to physical restraint and the prohibition of medication restraint, mechanical restraint, prone restraint, and seclusion.  2. The Special Education Director will review with the Leadership Team:  ? methods for preventing student violence, self-injurious behavior and suicide; methods for engaging parents and youth in discussions about restraint prevention and use; a description and explanation of the program’s alternatives to physical restraint and method of physical restraint in emergency situations; a statement prohibiting: medication restraint, mechanical restraint, prone restraint unless permitted pursuant to 603 CMR 46.03(1)(b), seclusion, and the use of restraint inconsistent with 603 CMR 46.03; a description of the program’s training requirements, reporting requirements, and follow-up procedures; a procedure for receiving and investigating complaints; a procedure for conducting periodic review of data and documentation on the program’s use of restraint; a procedure for implementing the reporting requirements; a procedure for making both oral and written notification to the parent; and a procedure for the use of time-out | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Assistant Superintendent, Special Education Director  Principal | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of revised Policy JKAA  Copies of agendas, attendance sheets & handouts regarding training | | |
| **Description of Internal Monitoring Procedures:**  Yearly review of policy and training. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved  **Status Date:** 02/22/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit the updated restraint prevention and behavior support policy and procedures, which include 1) methods to prevent student violence, self-injurious behavior and suicide; 2) methods to engage parents and youth in discussion about restraint prevention and use; 3) an explanation of the alternatives to physical restraint and method of physical restraint in emergency situations; 4) the prohibition of certain restraints; reporting requirements; follow-up procedures; 5) a procedure for receiving and investigating complaints; 6) a procedure for conducting periodic review of data and documentation on the use of restraint; 7) a procedure to implement the reporting requirements; 8) a procedure to make both oral and written notification to the parent; and 9) a procedure to use time-out by April 26, 2016.  Submit evidence of training to staff, including training materials, agenda and signed attendance by April 26, 2016. | | |
| **Progress Report Due Date(s):**  04/26/2016 | | |

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district does not formally evaluate all aspects of its K-6 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 district will review and develop a formal evaluation process which will include:  1. the evaluation all aspects of its K-6 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.  2. Develop a survey  3. Analyze data  4. Leadership training of any recommended changes  5. Staff training of any recommended changes | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent for Learning and Teaching  Special Education Director  Principal | | **Expected Date of Completion:**  11/30/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of survey, documentation of analysis and process, training agenda’s used by district to ensure equal access for all students | | |
| **Description of Internal Monitoring Procedures:**  Assistant Superintendent for Learning and Teaching  Yearly evaluation, results and training | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 02/22/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit the district's plan to review the district's policies and practices to ensure that students from any protected category are not excluded from participating in any program or extracurricular activity, including participants in the process, timelines for data gathering, examples of tools to gather data, and a narrative description of how the district will ensure the evaluation's annual use by April 26, 2016.  Submit evidence of the institutional self-evaluation's implementation, including the report itself, analyzed data, and dissemination of the report by October 14, 2016. | | |
| **Progress Report Due Date(s):**  04/26/2016  10/14/2016 | | |