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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: Waltham

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 05/24/2016.

**Mandatory One-Year Compliance Date:** **05/24/2017**

**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 3 | Special requirements for determination of specific learning disability | 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 8 | IEP Team composition and attendance | Partially Implemented |
| SE 9A | Elements of the eligibility determination; general education accommodations and services for ineligible students | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| CR 3 | Access to a full range of education programs | 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 10C | Student Discipline | Partially Implemented |
| CR 11A | Designation of coordinator(s); grievance procedures | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 13 | Availability of information and academic counseling on general curricular and occupational/vocational opportunities | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Implementation In Progress |
| CR 18 | Responsibilities of the school principal | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |

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

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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:**  A review of student records and interviews indicated that for students who are English language learners (ELLs), evaluations are not provided and administered in the language and form most likely to yield accurate information on what the student knows and can do academically, developmentally, and functionally. Record review and interviews also demonstrated that the district does not have procedures to determine a student's dominant language prior to conducting an evaluation. | | |
| **Description of Corrective Action:**  1. Waltham Public Schools (WPS) will convene district and school leadership teams to identify and evaluate potential screening tools that will identify when the home language is not English in order to choose one.  2. WPS will create a process to use prior to initial evaluation to determine student’s dominant language prior to conducting an evaluation. Information reviewed may include student’s educational history in US and native country using “Culturally and Linguistically Diverse (CLD) Student Profile Form 2”, language screeners, attendance, ACCESS and MCAS/PARCC scores (when available).  3. All WPS special educators and building administrators will be trained on the process described in Action 2. | | |
| **Title/Role(s) of Responsible Persons:**  Administrator of Pupil Personnel, Assistant Directors of Special Education & ETLs. | | **Expected Date of Completion:**  10/07/2016 |
| **Evidence of Completion of the Corrective Action:**  - Description of process  - List of evidence to be used in decision making.  - Attendance Lists w/Agenda and materials for trainings.  - Blank copy of "Culturally and Linguistically Diverse (CLD) Student Profile Form 2" | | |
| **Description of Internal Monitoring Procedures:**  The Administrator of Pupil Personnel Services or designee will conduct an internal monitoring of student files twice a year to ensure that the student's dominate language is being identified and documented prior to a student evaluation of any type. | | |
| 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:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016, for the students whose records were identified by the Department, provide the documentation identified on the Student Records Issues Worksheet.  By November 4, 2016, submit the district's proposed screening tool procedures and process to determine student's dominant language prior to evaluation to ensure that tests and other evaluation materials are provided and administered in the language and form most likely to yield accurate information on what the student knows and can do academically, developmentally and functionally.  By November 4, 2016, submit evidence of relevant staff training on these procedures, including the agenda, signed attendance sheet, name and role of presenter, and training materials.  By March 6, 2017 submit the results of an internal review of approximately 10 records of students identified as ELLs or whose home language is indicated as not English on the Home Language Survey with an initial or re-evaluation conducted subsequent to implementation of all corrective actions. Provide a detailed summary of the internal review including the number of records reviewed, and the number showing that the student's dominant language was determined prior to evaluation. If non-compliance is identified, report the specific actions taken to correct it and report the root cause(s) of the ongoing non-compliance as well as a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/04/2016  03/06/2017 | | |

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

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| **Criterion & Topic:**  SE 3 Special requirements for determination of specific learning disability | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that IEP Teams consistently make a determination of specific learning disability (SLD) when exclusionary factors documentation (SLD Component 3) shows that the student's lack of progress is due primarily to limited English proficiency. | | |
| **Description of Corrective Action:**  1. Waltham Public Schools (WPS) will provide all special education staff access to MA DESE Technical Assistance Documents on Specific Learning Disability as well as information on SLD forms.  2. Waltham Public Schools (WPS) will provide training for all special educators on the process to determine whether a student has a specific learning disability. | | |
| **Title/Role(s) of Responsible Persons:**  APPS, Assistant Directors of Special Education, Elementary principals & ETLs. | | **Expected Date of Completion:**  12/02/2016 |
| **Evidence of Completion of the Corrective Action:**  Attendance Lists w/Agenda and materials for trainings. | | |
| **Description of Internal Monitoring Procedures:**  The Administrator of Pupil Personnel Services or designee will conduct an internal monitoring of student files twice a year to ensure the SLD checklist is being used correctly. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3 Special requirements for determination of specific learning disability | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit procedures based on the requirements to determine a specific learning disability. Review the Department's guidance at http://www.doe.mass.edu/sped/iep/sld/default.html with emphasis on Exclusionary Factors SLD (3).  By November 4, 2016 submit evidence of training to Team chairpersons, special education staff, and school psychologists on the procedures for the required components of educational assessments to determine a specific learning disability, with an emphasis on exclusionary factors. Include the agenda, signed attendance sheet, name and role of presenter and a sample of training materials.  By March 6, 2017 submit the results of an internal review of approximately 5-10 records of ELL students suspected of having a specific learning disability with evaluations conducted subsequent to implementation of all corrective actions. Provide a detailed summary of the review including the number of records reviewed and the number with evidence of appropriate consideration of exclusionary factors for the ELL student (Component 3). If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/04/2016  03/06/2017 | | |

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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:**  A review of student records indicated that for a student who has reached the age of 18 and has sole or shared decision-making authority, the district does not obtain consent from the student to continue his or her special education program. | | |
| **Description of Corrective Action:**  Waltham Public Schools has determined the need for an internal monitoring system in order to communicate to students and parents that educational decision making rights transfer to students upon their 18th birthday. The Action Steps will be:  1. In September, the ETL and Out of District Coordinator will put together a list of all students who are 17.  2. At the IEP meeting that takes place during the student’s 17th year, the agenda will include an item called “Transfer of Parental Rights” so the process can be explained to parent and student.  3. One month prior to the student’s 18th birthday, a letter from the Special Education Department will be sent to the student and his or her parents that reminds them of the upcoming transfer of parental rights.  4. Consent will be obtained from student upon his or her 18th birthday; date of consent will be entered into eSped.  5. Upon turning 18, student will sign his or her IEP.  6. High School Special Educators will be presented with this information in September | | |
| **Title/Role(s) of Responsible Persons:**  Personnel, Assistant Directors of Special Education ~ Secondary, WHS ETLs, OOD ETL, and liaisons. | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  - List of students who are 17 and 18 during the 16-17 school year  - Sample Agenda Item  - Transfer of Parents? Rights letter  - Spreadsheet of data indicating that “dates of consent” have been entered into eSped database. | | |
| **Description of Internal Monitoring Procedures:**  The Administrator of Pupil Personnel Services or designee will use the eSped system to print out a monthly report/spreadsheet to insure process is being implemented. | | |
| 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:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016, for the students whose records were identified by the Department, provide the documentation identified on the Student Records Issues Worksheet.  By November 4, 2016 submit evidence of training to high school Team chairperson and other relevant high school staff on the requirement to obtain consent from the adult student with educational decision-making, including the agenda, signed attendance sheet, name and role of presenter and a sample of training materials.  By November 4, 2016 submit a description of the internal monitoring system, including the date of the system's implementation and the staff responsible for the oversight.  By March 6, 2017 submit the results of an internal review of approximately 10 records of students who are 18+ with sole or shared educational decision-making subsequent to implementation of all corrective actions. Provide a detailed summary of the review including the number of records reviewed and the number of records with the adult student's consent. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/04/2016  03/06/2017 | | |

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

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| **Criterion & Topic:**  SE 8 IEP Team composition and attendance | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that special education teachers who chair annual review IEP Team meetings do not have the authority to commit the resources of the district. | | |
| **Description of Corrective Action:**  Over the past several years there have been “WPS Special Education Procedure Manuals” written. There is no written protocol that clarifies what authority that teachers or ETLs have to commit the resources of the district. Action Steps:  1. The district will adopt a protocol that articulates the authority that teachers/ETLs have to commit resources of the district at IEP team meetings.  2. Special educators will review the protocol at department meetings.  3. This protocol will be included with an updated ?WPS Special Education Procedure Manual? | | |
| **Title/Role(s) of Responsible Persons:**  Administrator of Pupil Personnel, Assistant Directors of Special Education | | **Expected Date of Completion:**  06/30/2017 |
| **Evidence of Completion of the Corrective Action:**  - Written Protocol  - Attendance List w/Agenda of Department Meetings | | |
| **Description of Internal Monitoring Procedures:**  Record Review | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit the district's written protocol that clarifies what authority special education teachers and ETLs have to commit the resources of the district when chairing an IEP meeting.  By November 4, 2016 submit evidence of training to ETLs and special education staff on the Team chairperson's authority to commit district resources during IEP meetings. Include the agenda, signed attendance sheet, name and role of presenter and a sample of training materials. | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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| **Criterion & Topic:**  SE 9A Elements of the eligibility determination; general education accommodations and services for ineligible students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records, documents, and interviews indicated that when a student's documented lack of progress is due to interrupted formal education or limited English proficiency, IEP Teams consistently make findings of eligibility for special education. | | |
| **Description of Corrective Action:**  1. Waltham Public Schools (WPS) will create a process to determine student’s dominant language prior to conducting an evaluation. Information reviewed may include student’s educational history in US and native country using ?Culturally and Linguistically Diverse (CLD) Student Profile Form 2?, attendance, language screeners, ACCESS and MCAS/PARCC scores (when available).  2. During the Annual Review Process, for students who are English Learners, IEP Teams will include an ESL teacher who can report on student progress in gaining English language skills.  3. During the Annual Review Process, for students who are English Learners, IEP Teams will review student growth on ACCESS as well as other classroom measures that would indicate whether a student has gained, regressed or maintained English skills.  4. Special Educators will be trained on these expectations. | | |
| **Title/Role(s) of Responsible Persons:**  APPS, Assistant Directors of Special Education, ETLs, Liaisons, ESL teachers. | | **Expected Date of Completion:**  06/30/2017 |
| **Evidence of Completion of the Corrective Action:**  - List of evidence to be used in decision making.  - Attendance Lists w/Agenda and materials for trainings.  - Blank copy of "Culturally and Linguistically Diverse (CLD) Student Profile Form 2" | | |
| **Description of Internal Monitoring Procedures:**  The Administrator of Pupil Personnel Services or designee will conduct an internal monitoring of student files twice a year to ensure that IEP teams are considering a variety of evidence when determining if an English learner is making progress. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9A Elements of the eligibility determination; general education accommodations and services for ineligible students | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  See SE 1 for the Department's response to the district's proposed procedures to ensure that ELLs are not inappropriately assessed for special education.  By November 4, 2016, submit evidence of ESL and special education staff training on reviewing progress for ELLs on IEPs to ensure that ELLs have not been inappropriately found eligible, including the review of student growth on ACCESS as well as other classroom measures. Submit a training agenda with name/role of the presenter, signed attendance sheets and training materials.  By March 6, 2017 submit the results of an internal review of approximately 10 records of ELL students who have undergone an eligibility determination subsequent to implementation of all corrective actions for evidence that the student's dominant language, prior education, and other relevant factors were considered prior to finding the student eligible. Provide a detailed summary of the review including the number of records reviewed and the number with evidence of appropriate consideration of student's language needs and prior education. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/04/2016  03/06/2017 | | |

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

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| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that IEPs do not address skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students identified with a disability on the autism spectrum or for students whose disability affects social skills development. | | |
| **Description of Corrective Action:**  1. Waltham Public Schools (WPS) will provide all special education staff access to MA DESE Technical Assistance Documents on Bullying Prevention and Intervention.  2. Waltham Public Schools (WPS) will provide training for all special educators on the process of how to bring up bullying at IEP meetings and draft bullying statements in IEPs that are connected to student’s learning/disability profile. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Directors of Special Education, Elementary principals & ETLs. | | **Expected Date of Completion:**  01/13/2017 |
| **Evidence of Completion of the Corrective Action:**  Attendance Lists w/Agenda and materials for trainings. | | |
| **Description of Internal Monitoring Procedures:**  The Administrator of Pupil Personnel Services or designee will conduct an internal monitoring of student files twice a year to ensure that bullying statements are individualized and connected to student’s learning/disability profile. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016, for the students whose records were identified by the Department, provide the documentation identified on the Student Records Issues Worksheet.  Prior to revising procedures, review the Department's Advisory SPED 2011-2: Bullying Prevention and Intervention at http://www.doe.mass.edu/sped/advisories/11\_2ta.html, as well as the additional resource document and Addressing the Needs of Students with Disabilities in the IEP and in School Bullying Prevention and Intervention Efforts at http://www.doe.mass.edu/bullying/considerations-bully.html.  By November 4, 2016 submit revised procedures to document the skills and proficiencies needed to avoid or respond to bullying, harassment or teasing for students on the autism spectrum or for students whose disability affects social skills and makes him or her vulnerable to bullying, harassment or teasing.  By November 4, 2016 submit evidence of special education staff training on these procedures, include a training agenda with name/role of the presenter and signed attendance sheets.  By March 6, 2017 conduct an internal review of 5 student records for students on the autism spectrum and 5 student records whose disability affects social skills to determine whether the IEP Teams addressed the students' skills and proficiencies to avoid or respond to bullying, harassment or teasing. 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 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):**  11/04/2016  03/06/2017 | | |

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

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records sets forth that when IEPs and Placement Consent Forms for students at the high school level indicate full or partial inclusion, the general education classes in which the students are enrolled, including math, social studies/history and English language arts, are comprised of only special education students. | | |
| **Description of Corrective Action:**  1. The district will review Rediker-generated schedules of high school students on IEPs and compare them to class lists to make sure that no full or partial inclusion classes are comprised exclusively of students with special education needs. | | |
| **Title/Role(s) of Responsible Persons:**  APPS, Assistant Director of Sped, High School Principal, High School ETL and Guidance Counselors | | **Expected Date of Completion:**  09/21/2016 |
| **Evidence of Completion of the Corrective Action:**  - Student Schedules | | |
| **Description of Internal Monitoring Procedures:**  - The Administrator of Pupil Personnel Services or designee will meet with high school ETL and Guidance Counselors. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The internal monitoring proposed by the district does not indicate frequency of review or designated person to ensure the internal monitoring. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and tracking system for ensuring that high school students with partial or full inclusion placements are enrolled in classes that reflect their placements. The oversight and tracking system should include periodic reviews by the district's administrator of English Learner Education to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit evidence of high school special education and guidance staff training on the procedures for ensuring that students with full and partial inclusion designations are scheduled in classes that match their placements. Include a training agenda with name/role of the presenter, signed attendance sheets and training materials.  By November 4, 2016 submit a description of the internal oversight and tracking system with periodic reviews, along with the name and role of the designated person.  By March 6, 2017 conduct an internal review of records of students at the high school whose placements designate full or partial inclusion and compared against the academic classes of these students subsequent to the implementation of all corrective actions to ensure that students' course enrollment match the consented-to placement (PL). 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 note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/04/2016  03/06/2017 | | |

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| **Criterion & Topic:**  CR 3 Access to a full range of education programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that although the district has a policy that ensures equal access to a full range of education programs for all students, regardless of race, color, sex, religion, national origin, sexual orientation, or disability, this policy does not address the protected categories of homelessness and gender identity. | | |
| **Description of Corrective Action:**  All school-based handbooks have been updated to reflect the protected categories of homelessness and gender identity.  The Waltham School Committee is currently working with Massachusetts Association of School Committees to update all School Committee policies. We have forwarded this concern to them to ensure formal inclusion within this policy review process. In the short term, we have added the noted protected categories in the current version of SC policies, which now appear on the District webpage. | | |
| **Title/Role(s) of Responsible Persons:**  S District HR Administrator   SC Policy Subcommittee, Chair | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  - Copy of amended student handbooks  - Copy of amended SC policy | | |
| **Description of Internal Monitoring Procedures:**  - Policy Subcommittee Agenda  - Vote of SC on policy changes | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 provide the revised policy for equal access that includes the protected categories of homelessness and gender identity.  By November 4, 2016 provide evidence of dissemination of the revised equal access policy to staff and parents/guardians. The district may attach a link to the posted policy from its website, along with other forms of documented dissemination. | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district does not consistently translate important information and documents into its major languages of Spanish, Haitian Creole and Portuguese. The district report card template is available in Spanish, but teacher comments, performance levels, student responsibilities, and effort ratings are in English only. The district's code of conduct has not been translated into Portuguese, and career/vocational technical education admissions applications are not translated into Spanish or Portuguese. | | |
| **Description of Corrective Action:**  We have reviewed all documents that are routinely translated in order to identify areas/documents that are addressed by the concern. In particular, we will provide report cards templates that have translated in Haitian-Creole and Portuguese. We will also translate report card and progress report comments into Spanish, Haitian-Creole and Portuguese. Similarly, translations will be made to meet other noted needs. | | |
| **Title/Role(s) of Responsible Persons:**  Admin of ELL, Director, Family Welcome Center, Translators, Director of CVTE | | **Expected Date of Completion:**  11/01/2016 |
| **Evidence of Completion of the Corrective Action:**  - Copies of translations will be forwarded by November 1, 2016. | | |
| **Description of Internal Monitoring Procedures:**  Spot check of ELL student report cards and progress reports will be conducted by the Administrator of ELL education. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The internal monitoring proposed by the district is limited to ELL students, while there may be parents who have limited English proficiency but whose children are proficient in English. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and tracking system for ensuring that translated report cards and progress reports are provided for all families whose Home Language Surveys indicate a need for translated documents. The oversight and tracking system should include periodic reviews by the district's administrator of English Learner Education to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit a link to or upload the code of conduct translated into Portuguese and the career vocational technical education admissions applications forms into Spanish and Portuguese.  By November 4, 2016 submit a description of the internal oversight and tracking system with periodic reviews, along with the name and role of the designated person.  By November 4, 2016 submit evidence of dissemination of the procedures to access and request translations for important documents.  By March 6, 2017 conduct an internal review of 15 records for students whose families' Home Language Surveys indicate a need for translated documents for evidence that report cards and progress reports are translated. 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 note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/04/2016  03/06/2017 | | |

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

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| **Criterion & Topic:**  CR 9 Hiring and employment practices of prospective employers of students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the statement signed by employers recruiting at the high school to ensure compliance with applicable federal and state laws prohibiting discrimination in hiring or employment practices does not address the protected categories of gender identity, religion, and sex. | | |
| **Description of Corrective Action:**  The non-discrimination statement signed by recruiting employers has been updated to read as follows:  The Waltham Public Schools, in accordance with its non-discrimination and zero tolerance policy, does not discriminate in its programs, activities, facilities, employment, or educational opportunities on the basis of race, color, age, disability, sex, religion, national origin, gender identity, homelessness, marital status, veteran status, sexual orientation, or any other legally protected group, and does not tolerate any form of discrimination, intimidation, threat, coercion, and/or harassment that insults the dignity of others by interfering with their freedom to learn or work. You can find a link to this document here: https://goo.gl/dLN02O. | | |
| **Title/Role(s) of Responsible Persons:**   Principal, Waltham High School   Career Transition Specialist, Waltham High School | | **Expected Date of Completion:**  06/17/2016 |
| **Evidence of Completion of the Corrective Action:**  - Signed documents from recruiting employers that includes a non-discrimination statement. | | |
| **Description of Internal Monitoring Procedures:**  - Spot checks post visits from recruiting employers to ensure all participating recruiting employers complete. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016, submit the updated non-discrimination statement that includes gender identity, religion and sex to be signed by prospective employers.  By November 4, 2016 submit evidence of training of the non-discrimination statement to relevant staff and include the agenda and signed attendance sheet. | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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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 indicated that all of the district handbooks and codes of conduct omit procedures for accepting, investigating and resolving complaints alleging discrimination or harassment and disciplinary measures that the school may impose if it determines that harassment and discrimination has occurred. Document review also indicated that the middle schools' codes of conduct omit disciplinary procedures for students not yet determined eligible for special education. In addition, document review and interviews indicated that the district does not have a code of conduct for staff. | | |
| **Description of Corrective Action:**  This finding has been shared with our district’s special education attorney who worked with us to revise the Code of Conduct sections of our handbooks when we revised at the turn of Chapter 222. Our attorney will be making revisions to these sections in coming weeks. We will bring forward amendments to our student handbooks at a July SC meeting for action by Waltham SC. We will work with our attorney to schedule code of conduct and bullying, and investigation training for staff. | | |
| **Title/Role(s) of Responsible Persons:**   Administrator of Pupil Personnel Services   Attorney for District | | **Expected Date of Completion:**  11/01/2016 |
| **Evidence of Completion of the Corrective Action:**  - Revised code of conduct statements in approved student handbooks  - Agendas, PowerPoint slides, exit and sign-in sheets from professional development and training opportunities. | | |
| **Description of Internal Monitoring Procedures:**  - Superintendent and APPS will participate in and observe training and meet to discuss feedback forms.  - School Committee will approve amended student handbooks with revised code of conduct statements (see SC agendas and minutes from forthcoming meetings that delineate amendments). | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit the revised codes of conduct or links for codes of conduct for each school and for staff that include procedures for accepting, investigating and resolving complaints alleging discrimination or harassment and disciplinary measures that the school may impose if it determines that harassment and discrimination has occurred. Include in the middle school code of conduct the disciplinary procedures for students not yet determined eligible for special education.  By November 4, 2016 submit evidence of dissemination of the revised codes of conduct. The district may attach a link to the posted document(s) from its website, along with other forms of documented dissemination. | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district's Spanish and Haitian Creole student handbooks do not contain amendments that extend protections to students who are bullied by a member of the school staff. As a result, the district has not given these parents and guardians annual written notice of the student-related sections of the Plan. | | |
| **Description of Corrective Action:**  The district’s Spanish and Haitian Creole student handbooks will be updated to include amendments that extend protections to students who are bullied by a member of the school staff. | | |
| **Title/Role(s) of Responsible Persons:**   Administrator of Pupil Personnel Services   Director, Family Welcome Center | | **Expected Date of Completion:**  06/01/2016 |
| **Evidence of Completion of the Corrective Action:**  - Translated copies of the amendments will be included in the handbook. | | |
| **Description of Internal Monitoring Procedures:**  - School Committee will vote on amended handbooks on July 12. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit the updated Spanish and Haitian Creole handbooks to ensure that the Bullying Intervention and Prevention Plan includes the protections to students who are bullied by a member of the school staff.  By November 4, 2016 submit evidence of dissemination of the translated handbooks to demonstrate that the district has given Spanish and Haitian Creole parents and guardians annual written notice of the student-related sections of the Plan. | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews demonstrated that although the district has the capacity to collect discipline data, principals are not required to assess the extent of suspensions and the impact of such disciplinary action on selected student populations to determine whether to modify the district's disciplinary practices due to an over-reliance on suspensions, expulsions or removals on selected student populations compared with other students. Additionally, document review and interviews demonstrated that the district is in the process of developing procedures for education services and academic progress (School-wide Education Service Plan). | | |
| **Description of Corrective Action:**  The district has earned two grants (Lead Higher and Nellie Mae) to increase capacity in central office to support this analysis and to review our educational programming and to ensure equitable participation. Principals will be provided with quarterly and end of year reports that disaggregate students’ exclusion from instructional time by race/ethnicity, ELL and special education status, among other categories. If pattern of persistent exclusion for student populations are found, the district will take immediate appropriate action to remediate. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Assistant Superintendent, APPS, Data Analyst | | **Expected Date of Completion:**  12/31/2016 |
| **Evidence of Completion of the Corrective Action:**  - Data collected by data analyst  - SC presentation | | |
| **Description of Internal Monitoring Procedures:**  - Assistant Supt of C & I and APPS will meet with Data Analyst to review findings in order to determine next steps. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district did not submit a proposed corrective action on the development of procedures to ensure education services and academic progress for students who are suspended. | | |
| **Department Order of Corrective Action:**  Submit the district's procedures for education services and academic progress (School-wide Education Service Plan).  Submit evidence of training for principals and other relevant staff on the district's procedures for education services and academic progress (School-wide Education Service Plan). | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 provide submit of training for principals and other relevant staff to assess the extent of suspensions and the impact of such disciplinary action on selected student populations to determine whether to modify the district's disciplinary practices due to an over-reliance on suspensions, expulsions or removals on selected student populations compared with other students. Include the agenda, signed attendance, name and role of the presenter and training materials.  By November 4, 2016 submit the district's procedures for education services and academic progress (School-wide Education Service Plan).  By November 4, 2016 submit evidence of training for principals and other relevant staff on the district's procedures for education services and academic progress (School-wide Education Service Plan).  By March 6, 2016 submit an example of the district's review of discipline data by special populations, along with a brief narrative analysis of the data and any actions taken by the district as a result of the data review. | | |
| **Progress Report Due Date(s):**  11/04/2016  03/06/2017 | | |

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

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| **Criterion & Topic:**  CR 11A Designation of coordinator(s); grievance procedures | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district has designated coordinators for Section 504, but has not designated one or more staff persons to serve as coordinator(s) for compliance with its responsibilities under Title IX. Document review indicated that the district has not adopted and disseminated grievance procedures for the reporting, investigation, or resolution of complaints alleging discrimination based on sex or disability. | | |
| **Description of Corrective Action:**  The district will revise documents to include the Administrator of Human Resources as the Title IX coordinator for the district. This information will be included in student handbooks, on the Title IX policy and will also be included on the district website. The district will be working with their attorney to ensure it has adopted and disseminated grievance procedures for the reporting, investigation and/or resolution of complaints alleging discrimination based on sex or disability. These procedures will be included in student handbooks, outlined in Title IX policy, and will also be posted on the district website. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Admin of Human Resources/Title IX Coordinator, APPS | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  - APPS and the Superintendent will meet with the school district’s attorney by June 30 to review this finding and all Civil Rights findings.  - Name and contact information of Title IX Coordinator has already been updated in handbooks.  - Grievance procedures for the reporting, investigation or resolution of complaints alleging discrimination based on sex or disability will be drafted by school district attorney and distributed to all and included in district handbooks. | | |
| **Description of Internal Monitoring Procedures:**  - Administrator of Human Resources/Title IX Coordinator will report monthly to Central Office Leadership Team on status of grievances. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 11A Designation of coordinator(s); grievance procedures | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit evidence of grievance procedures for the reporting, investigation, or resolution of complaints alleging discrimination based on sex or disability and evidence of dissemination of the grievance procedures and designation of the Title IX coordinator.  By November 4, 2016 submit evidence of dissemination of the grievance procedure and the Title IX coordinator. The district may provide a web link to an online posting of the document(s). | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district does not provide the name(s), office address(es), and phone number(s) of its Title IX coordinators. Document review also indicated the following:  The district nondiscrimination policy, as set forth in written materials and other media used to publicize the school, does not address gender identity, religion, sexual orientation, and includes the category of handicapped, rather than disability, on the district website;  The nondiscrimination policy on the district website employment page omits disability, sexual orientation, and gender identity;  Career/vocational technical education admission applications in all languages omit gender identity as a protected category;  The district's career/vocational technical education brochure in Spanish omits the protected category of gender identity. | | |
| **Description of Corrective Action:**  The district has named HR Administrator George Frost as its Title IX Coordinator. Changes to documents noted in the finding will all be corrected. Electronic versions (website?etc.) will be made immediately; other documents will be corrected as they are newly prepared. | | |
| **Title/Role(s) of Responsible Persons:**  HR Administrator  CVTE Director | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Documents will be made available | | |
| **Description of Internal Monitoring Procedures:**  All documents will be reviewed for September 1, 2016; any additional changes new after that date will be implemented. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit evidence of documents that have been revised to include the name and phone number of the individual responsible for coordinating compliance under Title IX.  By November 4, 2016 submit evidence that the district's identified documents, including its nondiscrimination policy in materials used to publicize the schools, career/vocational technical education admission applications, career/vocational technical education brochures, address the protected categories of race, color, national origin, sex, gender identity, disability, religion and sexual orientation.  The district may provide a web link to an online posting of the document(s). | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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| **Criterion & Topic:**  CR 13 Availability of information and academic counseling on general curricular and occupational/vocational opportunities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that the district does not consistently translate information on the full range of general curricular and occupational/vocational opportunities available into the district's major languages of Spanish, Haitian Creole, and Portuguese. | | |
| **Description of Corrective Action:**  All documents regarding curriculum and occupation/vocational opportunities will be translated as a matter of practice. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director of Student Support Services  CVTE Director  High School Principal | | **Expected Date of Completion:**  06/30/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of noted documents will be available in September 2016. Other documents will be shared as completed. | | |
| **Description of Internal Monitoring Procedures:**  High School Principal will review all documents during the school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 13 Availability of information and academic counseling on general curricular and occupational/vocational opportunities | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit evidence that the district consistently translates information on the full range of general curricular and occupational/vocational opportunities into the major languages of Spanish, Haitian Creole, and Portuguese.  The district may provide a web link to an online posting of the document(s). | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district's written notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion, and their parents/guardians, to discuss why the student is leaving school is not sent within five days of the student's tenth consecutive absence. In addition, the notice does not offer two dates and times for an exit interview between the superintendent (or designee) and the student and the parent/guardian to occur prior to the student permanently leaving school or inform parents that they can request an extension no longer than 14 days for the exit interview. | | |
| **Description of Corrective Action:**  Appropriate corrected version of the letter is attached. It will be implemented in September 2016. | | |
| **Title/Role(s) of Responsible Persons:**  High School Principal  Administrator of Pupil Personnel Services | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Letter submitted on June 20,2016 | | |
| **Description of Internal Monitoring Procedures:**  Superintendent will ask the principal to forward letters to him for review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit the revised written notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion, and their parents/guardians.  By November 4, 2016 submit evidence of training on the procedures and the revised written notice for the high school principal, guidance staff, and other relevant staff members, including the agenda, signed attendance sheet, name and role of presenter, and training materials. | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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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 interviews indicated that the district meets all current requirements for the use of physical restraint. Document review and interviews demonstrated that the district has begun the revision of its written restraint prevention and behavior support policies, and is planning the general training for all staff on the revised policies and interventions as well as the in-depth training for staff serving as school-wide resources to assist in ensuring the proper administration of physical restraint. | | |
| **Description of Corrective Action:**  Waltham Public Schools (WPS) School Committee will complete its revision of the restraint prevention and behavior support policy.  Prepare informational session for principals on revised policy and new regulations.  All WPS educators and staff will be trained on the revised policy and new regulations.  In-depth training and recertification will be offered three times a year (fall, spring, summer) to all WPS administrators, educators and staff. | | |
| **Title/Role(s) of Responsible Persons:**   Administrator of Pupil Personnel Services   Principals | | **Expected Date of Completion:**  10/01/2016 |
| **Evidence of Completion of the Corrective Action:**  - Revised School Committee Policy  - PowerPoint used with Principals and educators  - Attendance Lists w/Agenda and materials for trainings  - Copies of materials used for In-depth training and recertification, along with sign-in sheets from said training | | |
| **Description of Internal Monitoring Procedures:**  The Administrator of Pupil Personnel Services will review sign-in list of principals; principals will review sign-in list of educators and staff. | | |
| 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:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit the revised restraint prevention and behavior support policy and procedures consistent with 603 CMR 46.00.  By November 4, 2016 submit evidence of all staff training on the revised restraint prevention and behavior support policy and procedures, including the agenda, signed attendance sheet, name and role of presenter, and training materials.  By November 4, 2016 submit a list for each school building of staff serving as school-wide resources to assist in ensuring the proper administration of physical restraint. | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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| **Criterion & Topic:**  CR 18 Responsibilities of the school principal | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that when a student is referred for an evaluation to determine eligibility for special education at McDevitt Middle School and Waltham High School, principals do not ensure that documentation on the use of instructional supports is provided as part of the evaluation information reviewed by the Team.  Document review demonstrated that the district's Curriculum Accommodation Plan (DCAP) has not been updated since 2008. Student record review, document review, and interviews also indicated that instructional support is not consistently available to meet students' needs in the general education classroom across all grade levels, including remedial instruction, availability of reading instruction at the elementary level in all grades, appropriate services for linguistic minority students, and support services. | | |
| **Description of Corrective Action:**  District will update the District Curriculum Accommodation Plan (DCAP)  2. Principals will review DCAP and provide training to all educators on what is offered at the Tier 1 Level  3. Special Education Office will complete a review of current practices of each Building Based Support Team, make recommendations for consistent practice and provide training to each school.  4. The District will develop stronger, consistent Tier I Interventions to address academic and behavioral issues in general education and specialist classrooms at all levels.  5. The District will provide professional development in academic, social and behavioral Tier 1 interventions. | | |
| **Title/Role(s) of Responsible Persons:**  Asst Supt, APPS, Assistant Directors of Special Education, Principals. | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  - Copy of DCAP  - Sign-in sheets from staff meetings where DCAP is introduced and recommendations for Building Based Support Teams are reviewed.  - Copy Building Based Support Team process  - Agendas and materials designed to train staff in academic, social and behavioral Tier 1 Interventions | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent of Curriculum and Instruction shall oversee the DCAP process. The Administrator of Pupil Personnel Services will monitor school based building based support teams by visiting each school’s meeting and reviewing generated paperwork twice a year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit the updated district accommodation plan and revised procedures for instructional support, including Tier 1 Interventions to address academic and behavioral issues in general education and specialist classrooms at all levels.  By November 4, 2016 submit evidence of the district's training to relevant staff to ensure that documentation on the use of instructional supports is routinely included as part of the evaluation information reviewed by a student's IEP Team.  By November 4, 2016 submit evidence of training to appropriate staff in each school on the revised instructional support procedures, including the agenda, signed attendance sheet, name and role of presenter, and training materials.  By March 6, 2017 submit the results of an internal review of approximately 10 student records who underwent the pre-referral process and then an eligibility determination subsequent to implementation of all corrective actions for evidence of prior instructional supports documentation available to the IEP Team. Provide a detailed narrative summary of the review including the number of records reviewed and the number with evidence of pre-referral documentation in the student record. If non-compliance is identified, report the specific actions taken to correct it and report the root cause(s) of the ongoing non-compliance as well as a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/04/2016  03/06/2017 | | |

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

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| **Criterion & Topic:**  CR 21 Staff training regarding civil rights responsibilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district's in-service training for school personnel regarding civil rights responsibilities omits the required protected category of gender identity. | | |
| **Description of Corrective Action:**  The protected category of gender identity will be included in-service training for school personnel on civil rights responsibilities. | | |
| **Title/Role(s) of Responsible Persons:**   Administrator of Human Resources | | **Expected Date of Completion:**  08/29/2016 |
| **Evidence of Completion of the Corrective Action:**  - PPT that is delivered to staff, as part of training about civil rights responsibilities, will include gender identity as well as all other protected categories.  - Sign-in sheets by school | | |
| **Description of Internal Monitoring Procedures:**  - Administrator of Human Resources will review sign-in sheets | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit the revised in-service materials for civil rights training with the inclusion of the protected category of gender identity, along with evidence of staff training that includes the agenda, signed attendance sheet, name and role of presenter, and training materials. | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that individual teachers do not review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | |
| **Description of Corrective Action:**  On or before August 29, the Assistant Superintendent for Curriculum and Instruction will communicate a protocol for teachers to use to review all educational materials for their courses to ensure they are free from simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. The protocol and template will be used twice a year (once at the beginning of the year and once at the conclusion) to ensure all educational materials are in compliance and the process for reporting examples that are not. | | |
| **Title/Role(s) of Responsible Persons:**   Assistant Superintendent for Curriculum and Instruction   Principals | | **Expected Date of Completion:**  09/01/2016 |
| **Evidence of Completion of the Corrective Action:**  - Teacher signature on template and evidence of following protocol once codified | | |
| **Description of Internal Monitoring Procedures:**  - Assistant Superintendent for Curriculum and Instruction will review completed forms. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016 submit the protocol and template for individual teachers to review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. Submit examples of possible activities such as discussions and /or supplementary materials used to provide balance and context for any stereotypes depicted in educational materials.  By November 4, 2016 submit evidence of staff training on the curriculum review protocol, including the agenda, signed attendance sheet, name and role of presenter, and training materials. | | |
| **Progress Report Due Date(s):**  11/04/2016 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that the district does not evaluate all aspects of its K-12 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 has earned two grants (Lead Higher and Nellie Mae) to increase capacity in central office to support rigorous analysis and to review data about access to educational programming and to ensure equitable participation. Principals will be provided with quarterly and end of year reports that disaggregate students’ exclusion from instructional time and inclusion in all programs by race/ethnicity, ELL and special education status, among other categories. If pattern of persistent exclusion for student populations are found, the district will take immediate appropriate action to remediate. | | |
| **Title/Role(s) of Responsible Persons:**  Supt, Assistant Supt, APPS, Data Analyst | | **Expected Date of Completion:**  12/31/2016 |
| **Evidence of Completion of the Corrective Action:**  - Data collected by data analyst  - SC presentation | | |
| **Description of Internal Monitoring Procedures:**  - Assistant Supt of C & I and APPS will meet with Data Analyst to review findings in order to determine next steps. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 07/08/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 4, 2016, submit the plan to review the district's policies and practices 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. The plan will include 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 March 6, 2017 submit evidence of the institutional self-evaluation's implementation, including data gathering, analysis, and plans for dissemination. | | |
| **Progress Report Due Date(s):**  11/04/2016  03/06/2017 | | |