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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: Christa McAuliffe Regional Charter Public (District)

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** |
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| SE 2 | Required and optional assessments | Partially Implemented |
| SE 3A | Special requirements for students on the autism spectrum | Partially Implemented |
| SE 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 25A | Sending of copy of notice to Special Education Appeals | Partially Implemented |
| SE 29 | Communications are in English and primary language of home | Partially Implemented |
| SE 55 | Special education facilities and classrooms | 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 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 15 | Non-discriminatory administration of scholarships, prizes and awards | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Implementation In Progress |
| CR 21 | Staff training regarding civil rights responsibilities | 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 and staff interviews indicated that when the charter school is conducting a re-evaluation, it does not always complete an educational assessment by a representative of the school district, including a history of the student's educational progress in the general curriculum. In addition, the charter school does not always complete an assessment by a teacher(s) with current knowledge regarding the student's specific abilities in relation to learning standards of the Massachusetts Curriculum Frameworks and the district's general education curriculum, as well as an assessment of the student's attention skills, participation behaviors, communication skills, memory, and social relations with groups, peers, and adults. | | |
| **Description of Corrective Action:**  The district will conduct a professional development session with the Special Education Team as well as General Educators regarding Educational Assessments both Part A & B. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Elizabeth Kumpulanian), Director of Student Services (Timothy Scott) | | **Expected Date of Completion:**  10/03/2016 |
| **Evidence of Completion of the Corrective Action:**  The district will provide a copy of the training agenda and attendance sheets. | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Coordinator and the Director of Student Services will monitor what teachers were given Educational Assessments and a record of who has completed them by using a Google Spreadsheet. The Special Education Coordinator and Director of Student Services will also conduct a record review for Educational Assessments. The district will indicate the number of records reviewed, the number found compliant, and explanation of the root cause(s) for any continued noncompliance and a description of additional corrective actions taken by the district to remedy any identified noncompliance. The district will maintain the following documentation and make it available to the DESE upon request:  List of student names and grade levels for the records reviewed  Date of the review  Name of person(s) who conducted the review, with their role(s) and signature(s) | | |
| 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):**  By May 11, 2016, submit evidence of training to special and general education staff related to the proper completion of educational assessments by a representative of the school district, and include a history of the student's educational progress in the general curriculum. Evidence of training will include training agenda, attendance sheet with name(s)/role(s), copies of the materials presented and name/role of presenter.  By October 7, 2016, submit the results of an administrative review of student records for required educational assessments. This sample must be drawn from a cross-section of records across charter school/grades with Team meetings that occurred after all corrective actions have been implemented. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) 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):**  05/11/2016  10/07/2016 | | |

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| **Criterion & Topic:**  SE 3A Special requirements for students on the autism spectrum | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and staff interviews demonstrated that whenever an evaluation indicates that a child has a disability on the autism spectrum, IEP Teams do not always consider and specifically address the student's verbal and nonverbal communication needs; the need to develop social interaction skills and proficiencies; the needs resulting from the student's unusual responses to sensory experiences; the needs resulting from resistance to environmental change or change in daily routines; the needs resulting from engagement in repetitive activities and stereotyped movements; the need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from the autism spectrum disorder; and other needs resulting from the student's disability that impact progress in the general curriculum, including social and emotional development. | | |
| **Description of Corrective Action:**  The district will create a checklist for the IEP Team to consider and address at Team meetings whenever an evaluation indicates that a child has a disability on the Autism Spectrum, which includes Autistic Disorder (autism), Asperger’s Disorder, Pervasive Developmental Disorder not otherwise specified, Childhood Disintegrative Disorder, and Rhett’s Syndrome as defined in the Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM-5, 2013). The checklist will guide the IEP Team to consider and address the following:  the verbal and nonverbal communication needs of the child;  the need to develop social interaction skills and proficiencies;  the needs resulting from the child’s unusual responses to sensory experiences;  the needs resulting from resistance to environmental change or change in daily routines;  the needs resulting from engagement in repetitive activities and stereotyped movements;  the need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from Autism Spectrum Disorder;  and other needs resulting from the child’s disability that impact progress in the general curriculum, including social and emotional development.  At the corrective action training, the district will train the Special Education Case Managers in the use and role of this checklist at Team meetings when the child has a disability on the Autism Spectrum. In addition, the checklist will be added in ESPED to each IEP for students on the Autism Spectrum Disorder, this will allow Special Education Case Managers to check the components on the proposed IEP document. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Elizabeth Kumpulanian), Director of Student Services (Timothy Scott) | | **Expected Date of Completion:**  10/03/2016 |
| **Evidence of Completion of the Corrective Action:**  The evidence will be a copy of the checklist, the agenda, and attendance sheet from the corrective action training on the purpose and completion of the checklist with the Special Education Team. | | |
| **Description of Internal Monitoring Procedures:**  By October 3, 2016 the Special Education Coordinator and Director of Student Services will conduct a file review of any student on the Autism Spectrum who has had an IEP meeting to check for evidence of the use of the checklist at Team meetings. The district will maintain the following documentation and make it available to DESE upon request:  list of student names and grade level for the records reviewed  the records that were in compliance  the root cause for any non-compliance and a description of the corrective actions to be taken by the district to address any identified non-compliance  date of the review, name of the person who conducted the review, their role, and signature. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3A Special requirements for students on the autism spectrum | **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):**  Prior to developing the district's corrective actions, review the Department's guidance on IEP development for students identified with Autism Spectrum Disorder (ASD) at http://www.doe.mass.edu/sped/advisories/07\_1ta.html.  By May 11, 2016, submit evidence of Special Education Case Manager training on how the IEP Team must consider and specifically address all seven components related to students identified on the autism spectrum. This documentation will include the revised procedures and checklist, signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials.  By May 11, 2016, submit a narrative description of the corrective actions taken for each student identified in the Student Record Issues Worksheet. Please include documentation identified in the worksheet.  By October 7, 2016, submit the results of an administrative review of student records for evidence that the IEP teams consider and specifically address the seven components related to students identified on the autism spectrum. This sample must be drawn from a cross-section of records across charter school with Team meetings that occurred after all corrective actions have been implemented. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) 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):**  05/11/2016  10/07/2016 | | |

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| **Criterion & Topic:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that the charter school does not always meet the forty-five (45) day timeline for conducting Team meetings to determine eligibility following a parent's consent to evaluate. | | |
| **Description of Corrective Action:**  The district will conduct a professional development session with the Special Education Team regarding IEP timelines and the requirement to hold a meeting within 45 school days. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Elizabeth Kumpulanian), Director of Student Services (Timothy Scott) | | **Expected Date of Completion:**  10/03/2016 |
| **Evidence of Completion of the Corrective Action:**  The district will provide a copy of the training agenda and attendance sheets. | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Coordinator and the Director of Student Services will monitor timelines by using a Google Spreadsheet in which the document will outline the date of received consent form, evaluation date completed, the evaluation meeting date, and the number of days between the received consent form and the meeting date. The Special Education Coordinator and Director of Student Services will also conduct a record review to determine whether the 45 day timelines have been met. The district will indicate the number of records reviewed, the number found compliant, and explanation of the root cause(s) for any continued noncompliance and a description of additional corrective actions taken by the district to remedy any identified noncompliance. The district will maintain the following documentation and make it available to the DESE upon request:  List of student names and grade levels for the records reviewed  Date of the review  Name of person(s) who conducted the review, with their role(s) and signature(s) | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | **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):**  By May 11, 2016, the charter will provide evidence of training on eligibility timelines, ensuring that Teams meet the forty-five (45) day timeline for conducting Team-meetings to determine eligibility following a parent's consent to evaluate. Evidence of training will include training agenda, attendance sheet with name(s)/role(s), copies of the materials presented and name/role of presenter.  By October 7, 2016, subsequent to corrective actions, submit the results of an administrative review of student records for meeting required timelines for recurring IEP meetings. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause(s) for any continued noncompliance and a description of additional corrective actions taken by the charter to address any identified noncompliance.  \*Please note when conducting administrative monitoring the charter 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):**  05/11/2016  10/07/2016 | | |

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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, in some instances, the IEP Team does not specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development, when the student's disability makes him or her vulnerable to bullying, harassment or teasing, or for students identified with a disability on the autism spectrum. | | |
| **Description of Corrective Action:**  The district has developed a form that special education teams will use at all meetings (initial, 3-years, annuals) in order to document that the team has reviewed bullying, harassment, or teasing vulnerabilities and it will indicate where on IEP have the skills are being addressed. Special Education teachers will be trained on the use of this form. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Elizabeth Kumpulanian), Director of Student Services (Timothy Scott) | | **Expected Date of Completion:**  10/03/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will include:  - agenda and attendance sheet from the Special Education training  - a copy of the checklist form | | |
| **Description of Internal Monitoring Procedures:**  The district will submit the results of an administrative review of student records for consideration of vulnerability to bullying and the documentation and provision of skills and proficiencies to address or avoid bullying, harassment and teasing. The district will include students on the autism spectrum and students with social and communication needs in its record sample.  The district will maintain the following documentation and make it available to DESE upon request:  list of student names and grade level for the records reviewed  the records that were in compliance  the root cause for any non-compliance and a description of the corrective actions to be taken by the district to address any identified non-compliance  date of the review, name of the person who conducted the review, their role, and signature. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **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):**  Prior to developing the district's staff training, review the Department's guidance at http://www.doe.mass.edu/bullying/considerations-bully.html.  By May 11, 2016, submit evidence of training conducted for special education staff to ensure IEP Teams address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing in student IEPs for students whose disability affects social skills development, when the student's disability makes him or her vulnerable to bullying, harassment or teasing, and students with ASD. Evidence of training will include an agenda, signed attendance sheets with name(s)/role(s) of attendees, and examples of training materials including the newly developed form.  By May 11, 2016, submit a narrative description of the corrective actions taken for each student identified in the Student Record Issues Worksheet. Please include documentation identified in the worksheet.  By October 7, 2016 and subsequent to the implementation of corrective actions, submit the results of an administrative review of student records for consideration of vulnerability to bullying and the documentation and provision of skills and proficiencies to address or avoid bullying, harassment and teasing. The charter school must include students on the autism spectrum and students with social and communication needs in its record sample across grade levels. 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 identify which records meet the criteria for each group of students covered by this requirement.  \*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):**  05/11/2016  10/07/2016 | | |

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the Nonparticipation Justification statement in the IEP does not always indicate why the removal of the student from the general education classroom is considered critical to the student's program and the basis for the IEP Team's conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  Training will be provided to the special education department on consistently indicating why the removal of the student from the general education classroom is considered critical to the student's program and the basis for the IEP Team's conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Exemplars will be used as models. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Elizabeth Kumpulanian), Director of Student Services (Timothy Scott) | | **Expected Date of Completion:**  10/03/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will include: - A copy of the agendas and attendance sheets documenting the training on the nonparticipation justification section on IEP 6. | | |
| **Description of Internal Monitoring Procedures:**  By October 3, 2016 the Special Education Coordinator and Director of Student Services will conduct a file review of 5-10 random students to check for evidence of the Nonparticipation Justification statement indicating why the removal of the student from the general education classroom is considered critical to the student’s program and the basis for the IEP Team’s conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. The district will maintain the following documentation and make it available to DESE upon request:  list of student names and grade level for the records reviewed  the records that were in compliance  the root cause for any non-compliance and a description of the corrective actions to be taken by the district to address any identified non-compliance  date of the review, name of the person who conducted the review, their role, and signature. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **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):**  By May 11, 2016, provide evidence of training related to the completion of the Nonparticipation Justification statement to appropriate special education staff. This documentation will include signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials including examples of non-participation justification statements.  By October 7, 2016, submit the results of an administrative review of student records for completion of the Nonparticipation Justification statement. This sample must be drawn from a cross-section of records across charter school grade levels with Team meetings that occurred after all corrective actions have been implemented. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) 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):**  05/11/2016  10/07/2016 | | |

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records demonstrated that the charter school's Notice of Proposed School District Action (N1) form does not consistently include a description of any other options that the school considered and the reasons why those options were rejected, or other factors the school used as a basis for the proposed or refused action. | | |
| **Description of Corrective Action:**  Training will be provided to the special education department on consistently indicating on the N1 the description of any other options that the school considered and why those options were rejected, or other factors the school used as a basis for the proposed or refused action. Exemplars will be used as models as how to document this on an N1. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Elizabeth Kumpulanian), Director of Student Services (Timothy Scott) | | **Expected Date of Completion:**  10/03/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completion will include: - A copy of the agendas and attendance sheets documenting the training on the N1 description of other options, rejected options, and other factors. | | |
| **Description of Internal Monitoring Procedures:**  By October 3, 2016 the Special Education Coordinator and Director of Student Services will conduct a file review of 5-10 random students to check for evidence that the N1 describes any other options that the school considered and why those options were rejected, or any other factors the school used as a basis for the proposed or refused action. The district will maintain the following documentation and make it available to DESE upon request:  list of student names and grade level for the records reviewed  the records that were in compliance  the root cause for any non-compliance and a description of the corrective actions to be taken by the district to address any identified non-compliance  date of the review, name of the person who conducted the review, their role, and signature. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | **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):**  Please review the Department's example of an appropriately developed notice available at http://www.doe.mass.edu/sped/advisories/01\_4sample.pdf prior to developing the charter school's corrective actions.  By May 11, 2016, submit evidence of training to special education staff related to the proper completion of the Notice of Proposed School District Action (N1) form, specifically including a description of any other options considered and the reasons why those options were rejected, and other factors the charter school used as a basis for the proposed or refused action. Evidence of training will include training agenda, attendance sheet with name(s)/role(s), copies of the materials presented and name/role of presenter.  By October 7, 2016, submit the results of an administrative review of student records for proper completion of the N1 form- Notice of the Proposal to Act or Refusal to Act. This sample must be drawn from a cross-section of records across charter school grade levels with Team meetings that occurred after all corrective actions have been implemented. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued noncompliance and a description of additional corrective actions taken by the charter school 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):**  05/11/2016  10/07/2016 | | |

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| **Criterion & Topic:**  SE 25A Sending of copy of notice to Special Education Appeals | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and staff interviews indicated that when the charter school receives notice that a parent has rejected an IEP, proposed placement, or a finding of no eligibility for special education, they do not consistently send a copy of the notice to the Bureau of Special Education Appeals (BSEA) within five calendar days. | | |
| **Description of Corrective Action:**  The district will create a process for sending the BSEA a copy of a rejected IEP, proposed placement, or a finding of no eligibility that will be housed within our Special Education Policies and Procedures. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Elizabeth Kumpulanian), Director of Student Services (Timothy Scott) | | **Expected Date of Completion:**  10/03/2016 |
| **Evidence of Completion of the Corrective Action:**  The district will provide a copy of the new process for sending the BSEA a copy of the rejected, IEP, proposed placement, or a finding of no eligibility. | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Coordinator and Director of Student Services will monitor when IEPs are returned to ensure that any IEP that is rejected follows the process written in our Special Education Policies and Procedures. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 25A Sending of copy of notice to Special Education Appeals | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 02/22/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The charter school proposed the creation of a process for sending the BSEA a copy of a rejected IEP, proposed placement, or a finding of no eligibility that will be housed within our Special Education Policies and Procedures; however, the charter school did not indicate how applicable staff will be trained on the new process on sending notice to the BSEA. | | |
| **Department Order of Corrective Action:**  Develop procedures for notification to the BSEA when the charter school receives a rejected IEP, proposed placement, or a finding of no eligibility. Provide training on the procedures. Conduct an administrative review for notification to the BSEA. | | |
| **Required Elements of Progress Report(s):**  By May 11, 2015 the charter will submit a narrative description of its newly developed process for sending the Bureau of Special Education Appeals (BSEA) a copy of the notice received when parents have rejected the IEP, proposed placement, or finding of no eligibility. Submit evidence of training to the Special Education Coordinator and appropriate staff responsible for monitoring and submitting notice to the BSEA when the charter school receives a parental notice of rejection.  By October 7, 2016, subsequent to all corrective actions, submit the results of an administrative review of student records for evidence that when the charter school receives notice that a parent has rejected an IEP, proposed placement, or a finding of no eligibility for special education, a copy of the notice is sent to the BSEA within five calendar days.  \*Please note when conducting administrative monitoring the charter 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). | | |
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| **Criterion & Topic:**  SE 29 Communications are in English and primary language of home | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of student records and staff and parent interviews indicated that when the family's primary language is other than English, the charter school does not consistently translate special education documents such as IEPs, notices, and assessment summaries into the primary language of the home. | | |
| **Description of Corrective Action:**  The school will clarify and document processes and procedures for translation of important information and documents including special education/504 documentation (notices, evaluations, meeting invitations, Individualized Education Programs, and 504 plans).  The school will clarify and document processes and procedures for interpretation to assist with parent communication including special education and 504 meetings.  The school will train all relevant parties, student services, teachers, school administrators in the processes and procedures for translating documents and scheduling interpretation services.  Using its student information database, the school will maintain up to date information about LEP families, their primary language, contact information, and communication preferences.  The district will use the student information database to keep our online IEP database-ESPED up-to-date. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Elizabeth Kumpulanian), Director of Student Services (Timothy Scott) | | **Expected Date of Completion:**  10/03/2016 |
| **Evidence of Completion of the Corrective Action:**  The school will be able to export an accurate list of LEP families including their contact information and communication preferences.  The school will have documented processes and procedures for translation and interpretation. The procedures will include identification of LEP families and their communication preferences.  The school will provide the sign in sheet from the translation and interpretation training as well as copies of materials from the training. | | |
| **Description of Internal Monitoring Procedures:**  The school will annually review the translation and interpretation processes and procedures. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 29 Communications are in English and primary language of home | **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):**  By May 11, 2016, submit the updated procedures, related to the translation of special education documents such as IEPs, progress reports, notices, and assessment summaries into the primary language of the home as indicated by the Home Language Survey. Additionally, provide evidence of staff training on these procedures, which will include a training agenda, signed attendance sheets and copies of the materials presented.  By May 11, 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.  By May 11, 2016, submit a narrative description of the corrective actions taken for each student identified in the Student Record Issues Worksheet. Please include documentation identified in the worksheet.  By October 7, 2016, submit the results of an administrative review of a sample of student records across charter school grade levels and subsequent to all corrective actions for evidence of the translation of special education documents. 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):**  05/11/2016  10/07/2016 | | |

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

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Onsite observations revealed signage identifying spaces where special educational services are provided, which may stigmatize students receiving such services. In particular, the outside wall of room 161 is identified as "Learning Center" and "Speech and Language." | | |
| **Description of Corrective Action:**  The district will change the signage outside room 161 and the Speech & Language Pathologist’s office to reflect the teacher’s names only. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinator (Elizabeth Kumpulanian), Director of Student Services (Timothy Scott) | | **Expected Date of Completion:**  03/01/2016 |
| **Evidence of Completion of the Corrective Action:**  The district will provide photos of the new signage. The DESE may also return to complete another tour of the building to assure that the signage has been changed. | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Coordinator and Director of Student Services will conduct a tour of the building to assure that the signage in both locations have been changed to reflect only the teacher’s names. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **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):**  By May 11, 2016, the charter school will submit a written statement of assurance from the Executive Director ensuring compliance on the charter school's proposed corrective actions.  By October 7, 2016 the Department will conduct an on-site verification visit to ensure that all stigmatizing signage at the charter school will be replaced with inclusive type appropriate signage. | | |
| **Progress Report Due Date(s):**  05/11/2016  10/07/2016 | | |

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

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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 the charter school's nondiscrimination statement within the Family Handbook omits the protected categories of "religion" and "homelessness." | | |
| **Description of Corrective Action:**  The school will update the nondiscrimination statement within all parts of the Family Handbook and related documents to include protected categories of religion and homelessness. | | |
| **Title/Role(s) of Responsible Persons:**  Executive Director (Kristin Harrison) | | **Expected Date of Completion:**  08/31/2016 |
| **Evidence of Completion of the Corrective Action:**  The school’s Family Handbook for 2016-17 will include all protected categories including religion and homelessness. | | |
| **Description of Internal Monitoring Procedures:**  The Office Manager will use a checklist of all protected classes to ensure that each protected class, including religion and homelessness are included in each nondiscrimination statement.  The Executive Director will sign off on an annual review of the handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **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):**  By October 7, 2016 submit a sample of the charter school's updated nondiscrimination statement within the Family Handbook that includes the protected categories of "religion" and "homelessness." | | |
| **Progress Report Due Date(s):**  10/07/2016 | | |

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

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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 student records, documents, and staff interviews indicated that translation of important information and documents, e.g. handbooks and codes of conduct, and the bullying intervention and prevention plan being distributed to parents were not consistently translated into the major languages spoken by parents or guardians with limited English skills, currently Spanish and Portuguese. The charter school has also not established a formal system of oral interpretation to assist parents/guardians with limited English skills. | | |
| **Description of Corrective Action:**  1) The school will clarify and document processes and procedures for translation of important information and documents including the Family Handbook, report cards, disciplinary letters, and special education/504 documentation (notices, evaluations, meeting invitations, Individualized Education Programs, and 504 plans).  2) The school will clarify and document processes and procedures for interpretation to assist with parent communication including parent-teacher meetings, special education and 504 meetings, and disciplinary meetings.  3) The school will train all relevant parties, student services, teachers, school administrators in the processes and procedures for translating documents and scheduling interpretation services.  4) Using its student information database, the school will maintain up to date information about LEP families, their primary language, contact information, and communication preferences. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Community Development | | **Expected Date of Completion:**  10/03/2016 |
| **Evidence of Completion of the Corrective Action:**  The following documents will be translated in Spanish and Portuguese: 2016-17 Family Handbook (including code of character, discipline policy, and bullying policy), sample report card, sample disciplinary letter, sample special education documentation.  The school will be able to export an accurate list of LEP families including their contact information and communication preferences.  The school will have documented processes and procedures for translation and interpretation. The procedures will include identification of LEP families and their communication preferences.  The school will provide the sign in sheet from the translation and interpretation training as well as copies of materials from the training. | | |
| **Description of Internal Monitoring Procedures:**  The school will annually review the translation and interpretation processes and procedures. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **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):**  By May 11, 2016, the district will provide a narrative description of its new process and procedures for translating important school information and documents, (e.g. handbooks and codes of conduct, and the bullying intervention and prevention plan) being distributed to parents, and a system of oral interpretation to assist parents/guardians. Additionally, provide a description of the district's internal oversight and tracking system identifying the person(s) responsible for the oversight on the need for translations.  By May 11, 2016, provide evidence of staff training on the process and procedures ensuring the translation of important school information and documents, and on the system of oral interpretation to assist parents/guardians. Evidence will include but not be limited to memorandums, email correspondence, training agenda, attendance sheets and copies of the materials presented.  By October 7, 2016, subsequent to staff training, submit the results of an administrative record review of provision of required translated documents and/or oral interpretation. This review can include special education, ELE, and/or documents and report cards from student cumulative files to ensure translations/interpretation. 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):**  05/11/2016  10/07/2016 | | |

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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:**  Review of documents indicated that written materials including the nondiscrimination statement within the Family Handbook, job postings, "Enrollment Policy and Procedures", and the "Who to Contact" pages do not include "religion" as a protected category. | | |
| **Description of Corrective Action:**  The school will update the nondiscrimination statement within all parts of the Family Handbook and related documents including job postings, Enrollment Policy and Procedures, and the Who to Contact pages include religion as a protected category. | | |
| **Title/Role(s) of Responsible Persons:**  Executive Director | | **Expected Date of Completion:**  08/31/2016 |
| **Evidence of Completion of the Corrective Action:**  The school’s 2016-17 Family Handbook, job postings, Enrollment Policy and Procedures, and Who to Contact pages will include religion as a protected category. | | |
| **Description of Internal Monitoring Procedures:**  The Office Manager will use a checklist of all protected classes to ensure that each protected class, including religion is included in each nondiscrimination statement.  The Executive Director will sign off on a review of the handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **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):**  By October 7, 2016, submit evidence to ESE of the charter school's updated nondiscrimination statement, that includes "religion" as a protected category, within the Family Handbook; job postings; Enrollment Policy and Procedures; and the "Who to Contact" pages. | | |
| **Progress Report Due Date(s):**  10/07/2016 | | |

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

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| **Criterion & Topic:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of documents indicated that the nondiscrimination statement for the administration of scholarships, prizes, and awards within the Family Handbook omits "religion" as a protected category. | | |
| **Description of Corrective Action:**  The school will update the nondiscrimination statement within the Family Handbook section about the administration of scholarships, prizes, and awards to include religion as a protected category. | | |
| **Title/Role(s) of Responsible Persons:**  Executive Director | | **Expected Date of Completion:**  08/31/2016 |
| **Evidence of Completion of the Corrective Action:**  The school’s 2016-17 Family Handbook section about the administration of scholarships, prizes, and awards will include religion as a protected category. | | |
| **Description of Internal Monitoring Procedures:**  The Office Manager will use a checklist of all protected classes to ensure that each protected class, including ?religion? is included in each nondiscrimination statement.  The Executive Director will sign off on a review of the handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | **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):**  By October 7, 2016, submit evidence to ESE of the charter school's updated nondiscrimination statement for the administration of scholarships, prizes, and awards within the Family Handbook that includes "religion" as a protected category along with evidence of dissemination to the school community. | | |
| **Progress Report Due Date(s):**  10/07/2016 | | |

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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:**  The charter school meets all current requirements with regard to physical restraint. Staff interviews and review of documents indicated that the charter school revised its physical restraint policy to reflect changes taking effect January 1, 2016, with Board of Trustees approval. Additionally, the charter school has identified program staff to serve as school-wide resources for the administration of restraint who received in-depth training on de-escalation and the administration of restraints. General training for all staff was conducted on October 22, 2015 on the revised restraint prevention and behavior support policy and procedures. | | |
| **Description of Corrective Action:**  The school’s policy was updated and published in the school’s 2015-16 handbook. The policy was voted on by the school’s Board of Trustees in July 2015. | | |
| **Title/Role(s) of Responsible Persons:**  Executive Director | | **Expected Date of Completion:**  03/01/2016 |
| **Evidence of Completion of the Corrective Action:**  2015-16 Family Handbook includes the updated policy. | | |
| **Description of Internal Monitoring Procedures:**  The school will annually review the policy pertaining to physical restraints and update as needed to ensure compliance with state law, regulations, and best practices. | | |
| 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:** Corrected | |
| **Basis for Decision:**  The charter school meets all current requirements with regard to physical restraint. No further progress reports required for this criterion. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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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:**  Review of documents indicated that the staff training regarding civil rights responsibilities does not include "gender identity" as a protected category. | | |
| **Description of Corrective Action:**  The school will update the 2016-17 civil rights powerpoint presentation to include ?gender identity? as a protected category. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Business and Operations | | **Expected Date of Completion:**  08/31/2016 |
| **Evidence of Completion of the Corrective Action:**  The school’s 2016-17 civil rights powerpoint presentation for the faculty training will include ?gender identity? as a protected category. The school will use this presentation at the annual civil rights training. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Business & Operations will use a checklist to review the civil rights presentation slides prior to the training to make sure that gender identity and all other protected categories are included in the appropriate slides. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **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):**  By October 7, 2016, submit district training documents that include the updated protected categories of "gender identity" in its nondiscrimination statements. Provide evidence of dissemination to all appropriate staff members. | | |
| **Progress Report Due Date(s):**  10/07/2016 | | |

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

Charter School: Christa McAuliffe Charter Public School

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Cosimo Bisazza

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

*All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report to the school or district.*

**Mandatory One-Year Compliance Date: February 11, 2017**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 4 Waiver Procedures** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:**  *A review of student records and staff interviews indicated that parents are not informed of their right to apply for a waiver when students are identified by the charter school as ELL’s. See also ELE 10.* | | | |
| **Narrative Description of Corrective Action:**  Christa McAuliffe Charter School will use the Massachusetts Department of Elementary and Secondary Education’s Parent Notification Forms. Moreover, every file will include:   * A copy, in all required languages, of the sample notice sent to parents regarding identification of their child as an ELL, outlining programs available, describing the district’s waiver process, and providing the child’s educational placement and progress * A description of the district’s waiver process and guidelines, as well as a copy of the district’s waiver form(s) * Copies of all approved and unapproved waiver requests with appropriate signatures (from state requirements) * A roster of waived students (if applicable) | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ELL Coordinator Cosimo Bisazza | | **Expected Date of Completion for Each Corrective Action Activity:**  The missing ELE 4 Waiver Procedures information will be corrected by the summer of 2016. | |
| **Evidence of Completion of the Corrective Action:**  All ELL student files will be opened and assessed to ensure that each section of ELE 4 is implemented in accordance with the Massachusetts Department of Education. | | | |
| **Description of Internal Monitoring Procedures:**  The ELL Coordinator will review all ELL files to ensure Waiver Procedures are implemented. | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 4** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  Before beginning any corrective action, please review guidance on waivers found within the document titled “Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners” at <http://www.doe.mass.edu/ell/guidance_laws.html> with sample parent form(s) on pp. 27-34.  **Required Elements of Progress Report(s):** By **June 30, 2016** provide evidence of the Charter school’s waiver process and guidelines, along with the revised initial and annual parent notification forms ensuring the Charter is consistently providing parents/guardians of ELL students with information on their right to apply for a waiver. *See also ELE 10.*  By **November 4, 2016,** submit the results of an administrative review of a representative sample of ELL student records for evidence that parents were informed of their right to apply for a waiver. Include the number of records reviewed, the number found to be in compliance, the root cause(s) for any identified noncompliance and the charter’s remedy to address any continuing noncompliance. | | | |
| **Progress Report Due Date(s):   June 30, 2016 November 4, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 5 Program Placement and Structure** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:**  *The documentation submitted by the district did not include “OELAAA Form 2: Castañeda’s Three-Pronged Test” that should provide an analytical framework to analyze a district's program for ELLs. According to the teacher’s schedule, ELLs in the district receive one hour of ESL instruction four days a week; however, there is no information provided on how the time dedicated to ESL is utilized to ensure that ELLs acquire English language proficiency and are provided meaningful access to the district’s educational program. The English language Development Curriculum is described in the documentation as accommodations such as modified texts, audio books, vocabulary dictionaries and tutoring on topics ELLs have difficulty with in their regular education classes. The Department concludes that the district does not have an ELE program with a sound educational approach to meet the academic and language needs of its ELL population by providing them with English language development that will promote and support the rapid acquisition of English language by these students as is required in G.L. c. 71A.* | | | |
| **Narrative Description of Corrective Action:**  Christa McAuliffe Charter School will begin to implement OELAAA Form 2: Integration of Castaneda’s Three-Pronged Test.   * Documentation (e.g., ESL curriculum, lesson plans) showing explicit, direct ESL instruction that integrates the WIDA standards to promote growth and academic achievement in English * ESL instruction time will be increased for ELLs during a scheduled Lab block, four days a week for one hour | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ELL Coordinator Cosimo Bisazza | | **Expected Date of Completion for Each Corrective Action Activity:**  The missing ELE 5 Program Placement and Structure will be corrected by the summer of 2016. | |
| **Evidence of Completion of the Corrective Action:**  Christa McAuliffe Charter School will begin to use OELAAA Form 2: to ensure that each section of ELE 5 is implemented and in accordance with the Massachusetts Department of Elementary and Secondary Education. | | | |
| **Description of Internal Monitoring Procedures:**  The ELL Coordinator will review the documentation process to ensure Placement and Structures Procedures are implemented. | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 5** | **Status of Corrective Action:**  ☐ Approved ☐ Partially Approved Disapproved | | |
| **Basis for Partial Approval or Disapproval:**  When determining whether a school district’s ELE program is in compliance with federal and state laws and regulations, the Department has started to apply the three-prong Castañeda test under Massachusetts State Law, G.L. c. 71A*. OELAAA Form 2: Castañeda’s Three-Pronged Test* helps the Department understand the district’s ELE program and whether it is designed to meet the academic and linguistic needs of ELLs. It also assists the Department in understanding the district’s plan to implement the ELE program by providing the necessary district resources as well as evaluating its program in an ongoing manner to identify areas of growth and make program adjustments in order to improve the program. The ELE program described in the *three-prong Castañeda test* must be implemented to remedy the concern mentioned in the Department’s finding for ELE 5. | | | |
| **Department Order of Corrective Action:**  The district must identify the academic and linguistic needs of ELLs in the district and plan accordingly to meet their needs. The program design and decisions on the level of support that will be provided to ELLs must be based on a study of the data and analysis of the resources that will be needed to implement the program. Please use the *Castañeda’s Three-Pronged Test* to ensure that your ELE program is in compliance with federal and state laws and regulations. | | | |
| **Required Elements of Progress Report(s):**   1. Please complete the attached *Castañeda* test by the due date of this progress report. Please ensure that your answers to the questions on the test reflect the changes that the district will implement in order to comply with federal and state laws and regulations. 2. Please explain how the district will monitor the progress and completion of the program goals identified in the *Castañeda* test. Please include the names of the responsible staff who will be involved in the process. 3. Please provide a reasonable timeline on how the district will come into compliance by providing all ELLs appropriate services they are entitled to by law and addressing the areas of improvement the district will identify as a result of the program evaluation prong 3 of the *Castañeda* test requires. Please note that all corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report to the school or district. 4. Provide a copy of the 2016-17 ESL teacher schedule(s)for all grade levels district wide. All schedules should include the following for each block of time: 1. Names of the ELL students; 2. Grade level for each student; 3. English proficiency level for each student. 5. Please complete district information in the attached spreadsheet labeled ELL List by school for each ELL student in the district. | | | |
| **Progress Report Due Date(s):    November 4, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 6 Program Exit and Readiness** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:**  *The documentation submitted by the district indicates that no student has transitioned out of the ELL program into general education during the last school year when the district has many students who are at the WIDA proficiency level 6 and demonstrated that they have acquired English proficiency. Please see* [*http://www.justice.gov/crt/about/edu/types.php*](http://www.justice.gov/crt/about/edu/types.php). | | | |
| **Narrative Description of Corrective Action:**  Christa McAuliffe will begin to implement and follow the Massachusetts Department of Elementary and Secondary Education OELAAA Form 3   * OELAAA Form 3: Description of the district’s redesignation/reclassification process, including exit criteria. * McAuliffe will evaluate its reclassification process by exiting all ELLs who score Level 6 (Reaching) on the ACCESS for ELLs test * McAuliffe will follow the necessary steps to transition ELLs out of the ESL Program and reclassify them accordingly | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ELL Coordinator Cosimo Bisazza | | **Expected Date of Completion for Each Corrective Action Activity:**  Summer 2016 | |
| **Evidence of Completion of the Corrective Action:**  Review ELL the ACCESS for ELLs test scores in June 2016. Remove the student’s coding as LEP in the SIMS, notify their parents, and update school/district reports. Additionally, monitor the student’s progress for 2 years. Meetings with content teachers analysis of the student’s work using WIDA. Can Do descriptors observations and meetings with parents about the student’s academic progress. | | | |
| **Description of Internal Monitoring Procedures:**  The ELL Coordinator will use state and school data to ensure that ELLs are properly exited from the ESL Program and ready for success. | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 6** | **Status of Corrective Action:**  Approved ☐ Partially Approved ☐ Disapproved | | |
| **Basis for Partial Approval or Disapproval:**   N/A | | | |
| **Department Order of Corrective Action:**   N/A | | | |
| **Required Elements of Progress Report(s):**  1- Please submit a description of the criteria the district considers to reclassify ELLs as FLEP and other supporting documents such as annual review forms.  2- Please submit a roster of the reclassified students with their most recent ACCESS scores and other relevant data the district considered for reclassification using the attached form. | | | |
| **Progress Report Due Date(s):     November 4, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 10 Parent Notification** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:**  *A review of student records and staff interviews indicated that while the charter school sends an initial notice (although missing waiver information), they do not send an annual written notice to parents that inform them of the student’s current level of English proficiency; program placement and method of instruction used in the program; how the program will meet educational strengths and needs of the student; how the program will specifically help the student learn English; exit requirements; parents’ right to apply for a waiver, or to decline to enroll their child in the program; and if the student has additional education needs that require Special Education services. Additionally, although parents/guardians of ELL students are provided with the same report cards as other enrolled students, they do not receive report cards and progress reports on becoming proficient in using English language, and are not always written in a language understandable to the parent/guardian.* | | | |
| **Narrative Description of Corrective Action:**  Christa McAuliffe will begin to implement and follow the Massachusetts Department of Elementary and Secondary Education.   * A copy of parent notification form sent home upon identification of the student as ELL * A copy of the parent notification form sent home annually informing the parents of the student’s status (progress report of level of English proficiency) in the ELL Program * A copy of the program placement and method of instruction used in the program (exit requirements) * How the program will meet the educational strengths and needs of the student (specifically helping the ELL develop English proficiency) | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ELL Coordinator Cosimo Bisazza | | **Expected Date of Completion for Each Corrective Action Activity:**  Summer 2016 | |
| **Evidence of Completion of the Corrective Action:**  All ELL student files will be reviewed and assessed to ensure that each section of ELE 10 is implemented. All missing information regarding ELE 10 Parent Notifications from ELL student files, will be systematically updated with the proper information. | | | |
| **Description of Internal Monitoring Procedures:**  The ELL Coordinator will review the documentation process established by the Massachusetts Department of Elementary and Secondary Education to ensure Parent Notification are implemented. | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 10 Parent Notification** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Although the charter school indicated that they would send an initial and annual Notification Form to inform parents of all the required elements, they did not indicate a revised procedure to ensure this Notification Form goes out both initially and annually. Additionally, the charter school did not indicate a procedure for ensuring that parents/guardians of ELL students will receive both report cards and progress reports on becoming proficient in using English language, and written in a language understandable to the parent/guardian. | | | |
| **Department Order of Corrective Action:** Revise procedures, including a tracking system, to ensure the charter school sends parents or guardians of ELL students annual notification of their ELL placement. Additionally, revise procedures ensuring the charter school sends parents or guardians progress reports and report cards in the same manner and frequency as general education reporting, and written in a language understandable to the parent/guardian. See also ELE 18. | | | |
| **Required Elements of Progress Report(s):** Before beginning any corrective action, please review the ESE approved Parent Notification form at <http://www.doe.mass.edu/ell/resources.html>.  By **June 30, 2016** submit revised procedures ensuring the charter school sends parents or guardians of ELL students annual notification of their ELL placement, and is consistently providing parents/guardians of ELL students with report cards and progress reports in the same manner and with the same frequency as general education reporting*.* Include name(s)/role(s) of person(s) responsible for oversight and tracking to ensure the annual notification form is sent along with timely progress report and report card distribution with translations as indicated by the HLS. Additionally, submit a copy of the revised Parent Notification form that includes waiver information.  By **November 4, 2016**, subsequent to all corrective actions, submit the results of an administrative record review of student records across grade levels, for evidence that parental notifications include all required elements. Additionally, the review must include evidence that parents/guardians of ELL students are provided with notices, report cards, and progress in a language parents understand. Indicate the number of records reviewed, the number found compliant, and an explanation of the root cause for any continued non-compliance, and a description of additional corrective actions taken by the charter to address any identified non-compliance.  \* **Please note that when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade level for the record review; b) Date of the review; c) Name of the person(s) who conducted the review, their role(s), and their signature(s).** | | | |
| **Progress Report Due Date(s):   June 30, 2016 November 4, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 14 Licensure Requirements** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:**  *District documentation and a review of ELAR indicated that the ESL teacher who provides students with ESL instruction does not hold an ESL license or a current waiver issued by the Massachusetts Department of Elementary and Secondary Education.* | | | |
| **Narrative Description of Corrective Action:**   The ESL teacher is scheduled to take the ESL MTEL. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ELL Coordinator Cosimo Bisazza | | **Expected Date of Completion for Each Corrective Action Activity:**  Spring 2016 | |
| **Evidence of Completion of the Corrective Action:**     Test registration confirmation email. | | | |
| **Description of Internal Monitoring Procedures:** | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 14** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval: N/A** | | | |
| **Department Order of Corrective Action:**  N/A | | | |
| **Required Elements of Progress Report(s):**   * Provide a copy of any job posting and application information that may remain on file in the event the currently uncertified educator(s) fails to acquire proper certification by fall 2016. The due date for this submission is **June 30, 2016**. * Provide evidence of the licensure of all current ESL teacher(s) by the progress report due date **November 4, 2016**. | | | |
| **Progress Report Due Date(s):   June 30, 2016 November 4, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 17 Program Evaluation** | | | **Rating: Not Implemented** |
| **Department CPR Finding:**  *The documentation submitted indicates that the district’s evaluation of its ELE program is limited with reviewing ELL’s report cards to see whether ELLs make the same progress as their English speaking peers. The district does not have a comprehensive process to evaluate the effectiveness of its ELE programming in developing students’ English language skills and increasing their ability to participate meaningfully in the educational program. Please see* [*http://www.doe.mass.edu/ell/ProgramEvaluation.pdf*](http://www.doe.mass.edu/ell/ProgramEvaluation.pdf)*.* | | | |
| **Narrative Description of Corrective Action:**  Christa McAuliffe Charter School will work to improve the effectiveness of its current ESL Program, to ensure that ELLs develop English language proficiency. Moreover, McAuliffe will focus on developing an ESL curriculum that promotes growth and develops skills in speaking, listening, reading, and writing. Using the District Program Evaluation, will act as a guideline that will help implement and follow the Massachusetts Department of Elementary and Secondary Education Curriculum Instruction for ELLs. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ELL Coordinator Cosimo Bisazza | | **Expected Date of Completion for Each Corrective Action Activity:**  Summer 2016 | |
| **Evidence of Completion of the Corrective Action:**  A systematic ESL Curriculum with written examples of lesson plans in accordance with WIDA and the Massachusetts Curriculum Frameworks. | | | |
| **Description of Internal Monitoring Procedures:**  The ELL Coordinator will revise the current ESL program to ensure that ELLs are acquiring English language proficiency. Additionally, the ELL Coordinator will use state and school data to ensure that ELLs are properly placed in the ESL Program. Additionally, by creating a District Program Evaluation Binder that will serve as a living document to guide the ESL Program. | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 17** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:**  Every district is expected to conduct periodic evaluations of its ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the district’s general education program. Where the district documents that the program is not effective, it must take steps to make appropriate adjustments. The district cannot determine what changes are needed to improve the program before a program evaluation is conducted. | | | |
| **Department Order of Corrective Action:**  Please complete the form located at <http://www.doe.mass.edu/ell/ProgramEvaluation.pdf> to evaluate the effectiveness of the district’s ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the district’s educational program. | | | |
| **Required Elements of Progress Report(s):**   1. Please provide a copy of the program evaluation conducted by the district to identify the strengths and areas of improvement in developing ELLs’ English language skills and increasing their ability to participate meaningfully in the district’s educational program. 2. Please submit the description of program adjustments or changes made in response to the most recent ELE program evaluation. | | | |
| **Progress Report Due Date(s): November 4, 2016** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 18 Records of LEP Students** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:**  *A review of records demonstrated that the following documents are not consistently found in ELL student records: home language survey; annual parent notification letters; progress reports, in the native language, if necessary; and waiver documentation, if applicable.* | | | |
| **Narrative Description of Corrective Action:**   Christa McAuliffe will begin to implement and follow the Massachusetts Department of Elementary and Secondary Education guidelines on organization of ELL student files. Moreover, every file will be up to date and include:   * A copy, in all required languages, of the sample notice sent to parents regarding identification of their child as an ELL, outlining programs available, describing the district’s waiver process, and providing the child’s educational placement and school progress reports * A description of the district’s waiver process and guidelines, as well as a copy of the district’s waiver form(s), home language surveys, and annual parent notification letters | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ELL Coordinator Cosimo Bisazza | | **Expected Date of Completion for Each Corrective Action Activity:**  Summer 2016 | |
| **Evidence of Completion of the Corrective Action:**  All ELL student files will be reviewed and assessed to ensure that each section of ELE 18 is implemented in accordance with the Massachusetts Department of Education. | | | |
| **Description of Internal Monitoring Procedures:**  The ELL Coordinator will review all ELL records to ensure that all documents are consistently found in ELL files. | | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION**  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 18 Records of ELL Students** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Although the charter school indicated that ELL student records will have required documentation, they did not indicate a procedure for ensuring required documents are contained within the record or training with appropriate staff working with ELL students that may access their files. | | | |
| **Department Order of Corrective Action:** Revise procedures, to ensure required documents are consistently placed within the ELE records along with training of appropriate staff working with ELL students who may access their files. | | | |
| **Required Elements of Progress Report(s):** Before beginning any corrective action, please review guidance on the Program Folder Checklist at <http://www.doe.mass.edu/ell/resources.html>.  By **June 30, 2016**, provide evidence of updated procedures, which may include a file folder checklist of required documentation, ensuring that required documents are consistently placed within ELE records. Additionally, submit evidence of training to all appropriate staff on the updated procedure*.* Evidence will include a training agenda, signed attendance sheets with name(s)/role(s) and copies of the materials presented along with person(s) responsible or oversight and tracking to ensure ELE record content completeness.  By **November 4, 2016**, subsequent to all corrective actions, submit the results of an administrative record review of a representative sample of student records from each school level, for evidence that the following documents are consistently found in files:home language survey; annual parent notification letters; progress reports, in the native language, if necessary; and waiver documentation, if applicable. Indicate the number of records reviewed, the number found compliant, and an explanation of the root cause for any continued non-compliance, and a description of additional corrective actions taken by the charter to address any identified non-compliance.  \* **Please note that when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade level for the record review; b) Date of the review; c) Name of the person(s) who conducted the review, their role(s), and their signature(s).** | | | |
| **Progress Report Due Date(s):    June 30, 2016 November 4, 2016** | | | |