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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: Rockport

CPR Onsite Year: 2016-2017

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 05/26/2017.

**Mandatory One-Year Compliance Date:** **05/26/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 3A | Special requirements for students on the autism spectrum | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | 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 29 | Communications are in English and primary language of home | Partially Implemented |
| SE 37 | Procedures for approved and unapproved out-of-district placements | Partially Implemented |
| SE 54 | Professional development | 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 7B | Structured learning time | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 10C | Student Discipline | 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 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| ELE 3 | Initial Identification | Partially Implemented |
| ELE 5 | Program Placement and Structure | Partially Implemented |
| ELE 6 | Program Exit and Readiness | Partially Implemented |
| ELE 7 | Parent Involvement | Partially Implemented |
| ELE 10 | Parental Notification | Partially Implemented |
| ELE 12 | Equal Access to Nonacademic and Extracurricular Programs | Partially Implemented |
| ELE 13 | Follow-up Support | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |
| ELE 18 | Records of ELL students | Partially Implemented |

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

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| **Criterion & Topic:**  SE 3A Special requirements for students on the autism spectrum | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records set forth that whenever an evaluation indicates that a student has a disability on the autism spectrum, the IEP Team does not specifically address the following in IEPs, the district's Notice of Proposed School District Action (N1), or Team meeting summaries: 1) the needs resulting from the student's unusual responses to sensory experiences; and 2) the needs resulting from engagement in repetitive activities and stereotyped movements. | | |
| **Description of Corrective Action:**  The Department of Student Services issued a new Student Services Manual in the beginning of the 2016-17 school year that describes the requirement that for students identified as having ASD, IEP Teams address the seven areas of need articulated in DESE?s Technical Assistance Advisory 2007-1. Subsequently, the Team Chairpersons provided additional assistance to teachers by developing sample N1s that addressed these areas of need. These N1s are now being used regularly but were not used as consistently in the beginning of the year or for students in out of district placements. In addition, the ASD checklist has now been embedded into the team meeting summary sheet used at the MHS.    The corrective action that will be taken to ensure compliance with all aspects of SE 3A is as follows:  By 9/15/17, Team Chairpersons, the out-of-district coordinator, and school psychologists from all levels will review Technical Assistance Advisory SPED 2007-1: Autism Spectrum Disorder with the Director of Student Services at the beginning of the 2017-18 school year along with the requirement to discuss these needs at Team meetings for students identified as having ASD. At this meeting, these staff members will review how to use the checklist in eSped to document these requirements. This checklist automatically appears on IEP 1 and IEP 8 in eSped when Autism has been entered as primary or secondary disability. At this meeting, these staff members will also review the sample N1s developed by the Team Chairpersons for students with ASD and to make changes  By 9/15/17, the team meeting summary sheets in use at the elementary school and by the OOD coordinator will be revised to embed the ASD checklist  By 10/1/17, the Director of SS, Team Chairpersons and/or the school psychologists will providing training to staff at each building level on the following:  A review of the requirements outlined in SPED 2007-1, with particular emphasis on the areas that DESE found were in noncompliance (i.e. needs resulting from the student’s unusual responses to sensory experiences and from repetitive activities and stereotyped movements). Training materials will include specific examples of \*how\* to consider these particular area of need. After this training, the Team Chairpersons and OOD Coordinator will monitor compliance for students at their buildings/grade levels  By 1/1/18, the Director of Student Services will conduct a first review of districtwide files (see below)  By 5/25/18, the Director of Student Services will conduct a second review of districtwide files (see below) | | |
| **Title/Role(s) of Responsible Persons:**  Director Student Services, ETLs, OOD Coordinator, SE Prof. Staff | | **Expected Date of Completion:**  05/26/2018 |
| **Evidence of Completion of the Corrective Action:**  Attendance sheet from meeting between Director of SS, Team Chairpersons, and OOD Coordinator  Copy of N1 sample  Attendance sheet and training materials from department/staff meetings  Copies of N1s, Team meeting summaries, and IEPs for students with ASD from all school levels and in OOD placements | | |
| **Description of Internal Monitoring Procedures:**  Following the staff training on 10/1/17, Team Chairpersons will monitor compliance for students at their buildings/grade levels; the Director of SS will monitor compliance for students in OOD placements with ASD  Given the small size of the district, for the 2017-18 SY, Team Chairpersons and the Director of SS will monitor \*all\* files of students with ASD for compliance; these reviews will occur by 1/1/18 and by 5/25/18. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3A Special requirements for students on the autism spectrum | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 submit relevant pages from Student Services Manual describing IEP development requirements for students identified on the autism spectrum. Include samples of N1s addressing student needs and the district's checklist for IEP development.  By November 13, 2017 submit evidence of special education staff training on IEP development for students with ASD, including the agenda, signed attendance sheet, name and role of presenter, and training materials.  By March 5, 2018 submit the results of an internal review of approximately 4-6 records of students identified on the autism spectrum with IEP meetings held subsequent to implementation of all corrective actions for evidence the district addressed all 7 areas of need in the student's IEP, N1, or Team summary. Provide a detailed summary of the internal review including the number of records reviewed, and the number showing that the district addressed all 7 areas. 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):**  11/13/2017  03/05/2018 | | |

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

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that for students placed out-of-district, parents leave with summary notes at the conclusion of the IEP Team meeting, which include a completed IEP service delivery grid describing the types and amounts of special education and related services proposed by the district and a statement of the major goal areas associated with these services. However, the district provides the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice beyond two calendar weeks of the Team meeting. | | | |
| **Description of Corrective Action:**  By 9/15/17, The Director of Student Services and Out of District Coordinator will review files for all students in OOD placements and conduct a root cause analysis to determine why there is noncompliance in the provision of the IEP to parents of students in OOD placements within the timelines required by law. Some causes to explore are a delay in provision of components of the IEP to RPS from the OOD school due to “human error” or human delay; technological issues related to eSped transfer requests or transfer of files via PDF; a delay by the RPS OOD Coordinator in writing N1s and processing the IEPs due to her part time, offsite work; additional delays caused by administrative functions (copying, mailing, etc.)    By 9/30/17, once the root cause(s) has(have) been determined, the Director of SS and OOD coordinator will develop an action plan and tracking system to correct the noncompliance. For example, if one or two OOD schools are consistently late in providing the completed goals or other components of the IEP to RPS, the Director of SS and OOD Coordinator will issue a “friendly reminder” letter to these schools and follow up with a phone call to their public school liaisons. If delays result from miscommunication between the OOD Coordinator and our administrative assistant(s), these staff members will develop a work system to ensure the timely provision of information.    The appropriate tracking systems, based on the results of the root cause analysis, will be in place by 10/15/17.  Finally, the Director of SS will track timelines on ALL IEPs for students in OOD placements for the 2017-18 SY on a bimonthly basis using the report function in eSped. | | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services  Out of District Coordinator  Administrative Assistant | | **Expected Date of Completion:**  05/26/2018 | |
| **Evidence of Completion of the Corrective Action:**  Notes from meeting between OOD Coordinator and Director regarding root causes of noncompliance  Copies of action plans or systems developed in response to the root cause analysis  Copies of bimonthly tracking by the Director | | | |
| **Description of Internal Monitoring Procedures:**  The Director of SS will track timelines related to the provision of the IEP to parents in all OOD placements for the 2017-18 SY. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:**  The district has proposed an internal monitoring process for the immediate provision of out-of-district IEPs for SY 17-18 only. Monitoring must be ongoing to ensure continued compliance. | | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and tracking system for ensuring that two copies of the proposed IEP and placement are provided to parents of students placed out-of-district immediately following development at the IEP Team meeting. The oversight and tracking system should include periodic reviews by the Special Education director to ensure ongoing compliance. | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 submit the district's root cause analysis, including the results of the internal record review of all out-of-district students and the district's proposed plan of action, timelines for implementation and proposed/implemented trainings.  By November 13, 2017 submit a description of the internal oversight and tracking system.  By March 5, 2018 submit the results of an internal review of approximately 5-10 records of students placed out of district with IEP development subsequent to implementation of all corrective actions for evidence that two copies of the proposed IEP and placement are provided to parents immediately. Provide a detailed summary of the internal review including the number of records reviewed and the number showing parents received the IEP in two calendar weeks or less. 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):**  11/13/2017  03/05/2018 | | | |

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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 district does not consistently state why removal from the general education classroom is considered critical to the student's program and the basis for the Team's conclusion that education in the least restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | | |
| **Description of Corrective Action:**  In the beginning of the 2015-16 school year, the previous Interim Director of Student Services and the Director of Student Services conducted two trainings on IEP development that included training on how to write non-participation justifications that describe specifically why the student’s removal from the general education environment is critical for the student to make effective progress. It appears that prior to this time, liaisons wrote the same statement in all of the IEPs. The requirement to write specific, individualized nonparticipation justifications is also included in the Student Services Manual, along with links to the trainings. Given the finding of noncompliance, it is obvious that more training and monitoring of this criterion is required.    By 9/8/17, the Team Chairpersons and Director of Student Services will review this section of 2 IEPs written by each liaison during the 16-17 SY to determine whether there is more noncompliance at a school level or by particular liaisons. This information will be used to target coaching and training.    By 9/15/17, the Director of Student Services and Team Chairpersons will re-train all special education liaisons on how to write specific, individualized nonparticipation justifications.    By 10/30/17, the Team Chairpersons will meet with any liaisons found to need additional help in another 1-1 session to review the components of the nonparticipation statement.  The Team Chairpersons and Out of District Coordinator will continue to review the non-participation justifications prior to signing IEPs.    Three times per year (November 2017, April 2018 and June 2018) the Director of Student Services will review the nonparticipation statement from a sample of IEPs across grade levels and types of placements to monitor the department’s overall progress. | | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services  Team Chairpersons  OOD Coordinator  SE Professional Staff | | **Expected Date of Completion:**  05/26/2018 | |
| **Evidence of Completion of the Corrective Action:**  Training attendance sheets  Training materials (from previous trainings on IEP writings, which will be reviewed again with the liaisons and supplemented as needed)  Notes from Team Chair and Director meeting regarding the results of a review of 2 IEPs written by each liaison (liaison names will not be identified; initials will be used)  Dates of meetings with liaisons who need additional coaching  Results of Director’s review of files in November and April (the June review will be past the corrective action completion date) | | | |
| **Description of Internal Monitoring Procedures:**  There are two layers of internal monitoring 1) a review of IEPs by the OOD Coordinator and Team Chairperson, prior to mailing to them to the parent; and 2) a review of IEPs across grade levels and placement types by the Director | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 submit evidence of training for special education staff on writing nonparticipation justification statements that explain why removal from the general education classroom is considered critical to the student's program and the basis for its conclusion that education in the least restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Include the agenda, training materials, attendance lists with signature and role of participants, and name and role of presenter.  By March 5, 2018 submit the results of an internal review of approximately 10 records across all grade levels with IEP development conducted subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed and the number for which the nonparticipation justification statements specifies why removal from the general education classroom is considered critical to the student's program. 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). | | | |
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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 indicated that information included in the narrative description of the Notice of Proposed School District Action (N1) does not contain sufficient detail of the district's proposed actions, specifically an explanation of why the agency proposed or refused to take action; a description of each evaluation procedure, test, record, or report the agency used as a basis for the proposed or refused action; and a description of any other factors that were relevant to the agency's proposal or refusal. | | | |
| **Description of Corrective Action:**  The Director of Student Services and Team Chairpersons will review with all special education liaisons the requirement to complete N1s that thoroughly address the areas required by regulation. This year, the Team Chairpersons wrote and compiled a collection of high quality, sample N1s in order to model the level of detail required. This collection has been shared with the liaisons electronically but has not yet been formally presented to the staff.    By 10/15/17, the Team Chairpersons will provide training to the special education departments at both buildings.    On an ongoing basis, the Team Chairpersons will review the content and quality of the N1s when they review IEPs prior to providing them to the parent.    Throughout the 2017-18 school year, concurrent with progress report periods, the Director of Student Services will review a sample of N1s from each school level and will share the results of this review with Team Chairs. | | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services  Team Chairpersons  OOD Coordinator  SE Prof. Staff | | **Expected Date of Completion:**  05/26/2018 | |
| **Evidence of Completion of the Corrective Action:**  Sample training materials, including training agendas and attendance sheets  Sample N1s written after the training, showing the inclusion of all of the required elements | | | |
| **Description of Internal Monitoring Procedures:**  Team Chairpersons will review N1s during their reviews of the IEPs, prior to mailing, and will provide additional training to liaisons who require additional assistance  Concurrent with progress report periods, the Director of Student Services will review a sample of N1s from each school level and will share the results of this review with Team Chairs | | | |
| 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:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 submit evidence of training for Team Chairpersons and special education liaisons on including sufficient detail in the description of each evaluation procedure, test, record, or report the agency used as a basis for the proposed or refused action on page 2 of the Notice of Proposed School District Action (N1) or Refusal to Act (N2). Include the agenda, training materials, attendance lists with signature and role of participants, and name and role of presenter.  By March 5, 2018 submit the results of an internal review of approximately 15 records across all grade levels with IEP development conducted subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed and the number for which the N1 or N2 provides sufficient detail in the description of each evaluation procedure, test, record, or report the agency used as a basis for the proposed or refused action. 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):**  11/13/2017  03/05/2018 | | | |

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

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| **Criterion & Topic:**  SE 29 Communications are in English and primary language of home | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews with administrative staff indicated that the district does not ensure that interpreters at IEP Team meetings are fluent in the primary language of the home and familiar with special education procedures, programs, and services. | | | |
| **Description of Corrective Action:**  By 9/8/17, the Director of Student Services and Team Chairpersons will compile a complete table of students in grades PK-12 whose parents require translators at IEP Team meetings by cross-referencing and cross-checking the results of home language surveys and ELL status recorded in MIDAs and eSped. This table will be shared with liaisons, the building principals and the administrative assistant and will include the dates of upcoming special education meetings for all of the students, and confirmation that an interpreter has been arranged . Whenever possible, liaisons and Team Chairpersons will schedule Team meetings for students who require interpreter services at least 4 weeks in advance to ensure availability of a professional interpreter. The district will continue to contract with Catholic Charities for interpreter services. The Team Chairpersons will provide the paperwork to Cheryl Keating, the Administrative Assistant for the Student Services Department. Ms. Keating will be the primary contact person between RPS and Catholic Charities. | | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services  Team Chairpersons  Administrative Assistant | | **Expected Date of Completion:**  05/26/2018 | |
| **Evidence of Completion of the Corrective Action:**  List of students requiring interpreter services at Team meetings  Team Meeting attendance sheets showing attendance of professional (i.e. trained) interpreter at meeting | | | |
| **Description of Internal Monitoring Procedures:**  In November, 2017, April 2018 and June 2018, the Director of Student Services will review the list of students and meeting dates to ensure that interpreters attended all required meetings. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  SE 29 Communications are in English and primary language of home | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 submit evidence of training for special education liaisons, building principals and the administrative assistant on parents requiring appropriately qualified interpreters/translators and the process to ensure an interpreter is in attendance at the Team meeting. Include the agenda, training materials, attendance lists with signature and role of participants, and name and role of presenter.  By March 5, 2018 submit the results of an internal review of approximately 5 records of students whose parents are identified as requiring interpreters across all grade levels with IEP development conducted subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed and the number for which a qualified interpreter was present. 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):**  11/13/2017  03/05/2018 | | | |

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| **Criterion & Topic:**  SE 37 Procedures for approved and unapproved out-of-district placements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that the district does not consistently monitor the provision of services to and the programs of individual students placed in public and private out-of-district programs. | | |
| **Description of Corrective Action:**  This year, the district’s number of out of district placements grew, becoming unmanageable for the out of district coordinator, a retired special education administrator who was only able to work a limited number of hours this year due to MTRS restrictions. As a result, monitoring plans were not completed consistently.    By 6/30/17, the Director of Student Services will review the district’s monitoring plan with the OOD Coordinator.    By 8/30/17, the Director of Student Services, current OOD Coordinator and Superintendent will discuss the FTE required to manage the current OOD caseload and its attendant responsibilities and will determine how the caseload can be distributed in order to ensure compliance and appropriate monitoring. This issue is currently under discussion.    By 9/15/17, the Director of Student Services, OOD Coordinator (and other special education personnel such as Team Chairpersons or School Psychologists, as appropriate and if consistent with the collective bargaining agreement) will proactively develop a monitoring schedule for each student in an OOD placement. The monitoring schedule will include interim deadlines and dates by which the OOD Coordinator, Director of Student Services or designee will:  Will make at least one site visit each year  Make phone contact with the program liaison at least two times per year  Make phone contact with the parents at least two times per year  Review and follow-up (if necessary) upon receipt of written progress reports  Interview the student once a year, if appropriate    These activities will be recorded for all students by 5/28/17 | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services and Out of District Coordinator | | **Expected Date of Completion:**  05/26/2018 |
| **Evidence of Completion of the Corrective Action:**  Sample of revised monitoring plan  List of students and name of LEA contact responsible for each student  Copies of monitoring plans with prospective monitoring dates for each student  Copies of completed monitoring plans (plans include notes from monitoring activities) | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Services, OOD Coordinator (and designees) will meet quarterly to review adherence to self imposed deadlines | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 37 Procedures for approved and unapproved out-of-district placements | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 submit a sample of revised monitoring plans; the list of students and name of RPS contact responsible for each student; and prospective monitoring date for each student.  By March 5, 2018 submit the results of an internal review of approximately 6-10 records of students placed out of district subsequent to implementation of all corrective actions. Provide a detailed narrative summary of the review including the number of records reviewed and the number for which a monitoring plan was documented in the record & demonstrated actual or proposed monitoring. 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):**  11/13/2017  03/05/2018 | | |

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

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| **Criterion & Topic:**  SE 54 Professional development | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews with administrative staff indicated that the district does not provide in-service training for all locally hired and contracted transportation providers, before they begin transporting any special education student receiving special transportation, on the student's needs and appropriate methods of meeting those needs. | | |
| **Description of Corrective Action:**  Prior to the beginning of the 2017-18 SY, the Director of Student Services and Administrative Assistant for Student Services will identify all students who receive specialized transportation in accordance with their IEPs and will make a list of the vendors who transport these students.    Prior to the beginning of the 2017-18 SY, the district will provide inservice training for all locally hired and contracted transportation providers before they begin transporting any special education student receiving special transportation. The training will focus on students’ specific needs and how the transportation provider can meet these needs.    The students, vendors and dates of training will be recorded in an electronic spreadsheet and shared with the Team Chairpersons. The electronic spreadsheet will be updated as necessary by the Team Chairpersons, with new students added when necessary. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services  Administrative Assistant for Student Services | | **Expected Date of Completion:**  05/26/2018 |
| **Evidence of Completion of the Corrective Action:**  List of students who receive specialized transportation  Training schedule for transportation providers  Attendance sheets and training materials | | |
| **Description of Internal Monitoring Procedures:**  Quarterly review of electronic spreadsheet described above to ensure that all transportation providers have been trained appropriately and that any new providers have also received training. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 submit evidence of in-service training for all locally hired and contracted transportation providers on students' specific needs and how the transportation provider can meet these needs, including agenda, training materials, signed attendance sheet, and name and role of presenter. | | |
| **Progress Report Due Date(s):**  11/13/2017 | | |

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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 district's policy regarding access to a full range of education programs does not address the protected categories of disability and homelessness. | | |
| **Description of Corrective Action:**  The corrective action that will be taken to ensure compliance with all aspects of CR 3 is as follows:  The policy File JB: Equal Educational Opportunities will be reviewed, updated with the additional language of “disability and homelessness” and approved, at the school committee meeting on June 14, 2017. | | |
| **Title/Role(s) of Responsible Persons:**  Building Principals and Superintendent of Schools | | **Expected Date of Completion:**  06/30/2017 |
| **Evidence of Completion of the Corrective Action:**  Policy File JB: Equal Educational Opportunities will be distributed to the office of each school, school and local libraries, and updated on the website. The administration will ensure that if further modifications are needed it will continue to contain “disability and homeless” in its policy. | | |
| **Description of Internal Monitoring Procedures:**  Comprehensive yearly review of policy will be established in the spring of every year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017, submit a direct link to the revised nondiscrimination policy on the district's website, demonstrating the inclusion of disability and homelessness as protected categories.  The district must ensure that its revised nondiscrimination policy is consistently used in the district handbooks, code of conduct, and anywhere else the district posts the policy. | | |
| **Progress Report Due Date(s):**  11/13/2017 | | |

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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 documents and staff interviews indicated that the district does not consistently translate important information and documents, such as handbooks and codes of conduct, into the major languages spoken by parents or guardians with limited English skills, specifically Mandarin, Portuguese, and Spanish. The district website has an online translation option, but the translator is not functional for linked documents such as the student handbook, code of conduct, or Bullying Prevention and Intervention Plan. | | | |
| **Description of Corrective Action:**  During the month of June, 2017, important documents were identified by district staff. These include, but are not limited to:  Enrollment and registration materials  Student Handbooks (Elementary, Middle and High Schools)  Field trip forms  Free/reduced lunch information  Health/wellness information and forms  Policies  Bullying and Harassment  Civil Rights  School Choice    A translation provider has been identified and a purchase order for services will be active on July 1, 2017 to cover translations.    All documents identified above will be translated into Spanish, Portuguese, and Mandarin prior to August 15, 2017.    Translated documents will be posted on the District website prior to the opening of the 2017/18 school year.    Hard copies of translated documents will be made available in each school office and library.    Timeline:  Identification of essential documents for translation - June 30, 2017  Translation of essential documents - July 1 - August 15, 2017  Translated documents posted to District website - Prior to September 1, 2017 | | | |
| **Title/Role(s) of Responsible Persons:**  Building Principals | | **Expected Date of Completion:**  08/30/2017 | |
| **Evidence of Completion of the Corrective Action:**  Electronic copies of the following documents will be uploaded as evidence of completion of Corrective Action:  Enrollment and registration materials  Student Handbooks (Elementary, Middle and High Schools)  Field trip forms  Free/reduced lunch information  Health/wellness information and forms  Policies  Bullying and Harassment  Civil Rights  School Choice | | | |
| **Description of Internal Monitoring Procedures:**  Each school principal will be responsible for reviewing websites and hardcopy locations for compliance. Additionally, the Superintendent’s office will conduct periodic reviews of each school to ensure compliance with the above-stated translation plan. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By September 29, 2017, submit evidence of translated documents, including enrollment, registration, field trip, and free/reduced lunch forms; handbooks & codes of conduct; the Bullying Intervention & Prevention Plan; and other forms as determined by the district.  In lieu of uploading the documents, submit a direct web link to these documents on the district's website. | | | |
| **Progress Report Due Date(s):**  09/29/2017 | | | |

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

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| **Criterion & Topic:**  CR 7B Structured learning time | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that at the high school level, the district does not ensure that structured learning time is time during which students are engaged in regularly scheduled instruction, learning, or assessments within the curriculum of core subjects and other subjects as defined in 603 CMR 27.02. According to student schedules and staff interviews, high school students are scheduled for multiple periods identified as directed study, which are actually non-directed learning periods (study halls) that do not include activities directly related to a program of studies. | | | |
| **Description of Corrective Action:**  Rockport High School’s current schedule was created before the current administrative team was in place. In the fall of 2015, Rockport High School welcomed two new administrators, a new Rockport Middle/High School Principal and a new High School Assistant Principal. At that time, the schedule was already in place and planning for the next school year began shortly after. The need for a new schedule was immediately clear and the Principal and Assistant Principal began researching and developing plans for a new schedule. The research included site visits to other schools, research on best practice and data gathering of other schools’ schedules. In the fall of 2016, a committee was formed to formally begin the process of creating a new master schedule.    A new 2017-18 schedule has been created and approved by the high school staff and school committee. The principal will finalize the new schedule over the summer of 2017 with a planned implementation for the Fall of 2017. The new schedule will be supported by teacher and student trainings in order to proactively address any concerns or issues that may arise over the course of the year. In addition, a committee will convene in November to evaluate the effectiveness of the new schedule and make recommendations or modifications for the 2018-19 school year (if necessary).    The corrective action that will be taken to ensure compliance with all aspects of CR 7C is as follows:  9/1/2017 - the new high school schedule will be effective for students and staff on the first day of school.  9/1/2017 - all students and staff will receive trainings around the new schedule.  9/1/2017 - the guidance department will ensure that all students are enrolled in courses in order to fulfill their time on learning requirements as outlined in CR 7C. | | | |
| **Title/Role(s) of Responsible Persons:**  High School Principal | | **Expected Date of Completion:**  08/30/2017 | |
| **Evidence of Completion of the Corrective Action:**  A copy of the new master schedule  Sample student schedules  Attendance sheets for training of teachers around new schedule  A copy of the PowerPoint presented to staff  A copy of the PowerPoint presented to students  Attendance sheet and committee materials around the November committee review | | | |
| **Description of Internal Monitoring Procedures:**  - The principal and scheduling committee (which will be comprised of a representative group of teachers) will monitor the effectiveness of the new schedule and recommend adjustments/modifications as necessary.  - The committee will convene in November of 2017 to recommend any adjustments for the 2018-19 course selection process.  - In January 2018, data will be collected from staff and students to understand the effectiveness of the changes in increasing the student time on learning.  - The committee will convene in February of 2018 to review student and staff feedback and course request data to recommend any adjustments for the 2018-19 school year.  - The guidance department will monitor student time on learning by requiring all students to enroll in seven classes as outlined in the Rockport High School Program of Studies. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 7B Structured learning time | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By September 29, 2017, submit the new master schedule and sample student schedules.  By September 29, 2017 submit evidence of staff & student training on the new schedule, including the agenda, signed attendance sheet, name and role of presenter, and the PowerPoint presentations for teachers and students.  By September 29, 2017 submit a Structured Learning Time Worksheet, signed by the high school's principal, providing written assurance that secondary school students are scheduled for at least 990 hours of structured learning time a year within the required school year schedule. This document is available in the WBMS Document Library under Public School Templates.  By November 13, 2017, submit the attendance sheet and committee materials from the November committee review, along with the committee's feedback on the effectiveness of the new schedule and any recommended adjustments/modifications.  By March 5, 2018, submit the committee's February 2018 review of student and staff feedback and recommendations for adjustments for the 2018-19 school year.  By March 5, 2018, submit the results of the guidance department's review of student schedules, ensuring that all high school students are enrolled in seven classes of regularly scheduled instruction as outlined in the Rockport High School Program of Studies. Include the number of records reviewed, along with the reported number of records that did not meet the required number of classes and the district's plan to remedy the issue. | | | |
| **Progress Report Due Date(s):**  09/29/2017  11/13/2017  03/05/2018 | | | |

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

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| **Criterion & Topic:**  CR 8 Accessibility of extracurricular activities | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district's policy regarding accessibility of extracurricular activities does not address the protected categories of disability and homelessness. | | | |
| **Description of Corrective Action:**  A review of documents indicated that the district’s policy regarding accessibility of extracurricular activities does not address the protected categories of disability and homelessness.  The corrective action that will be taken to ensure compliance with all aspects of CR 3 is as follows:  The policy File JJ: Co-curricular and Extracurricular Activities will be reviewed, updated with the additional language of “disability and homelessness” and approved, at the school committee meeting on June 14, 2017. | | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent of Schools and Building Principals | | **Expected Date of Completion:**  06/30/2017 | |
| **Evidence of Completion of the Corrective Action:**  Policy File JJ: Co-curricular and Extracurricular Activities will be distributed to the office of each school, school and local libraries, and updated on the website. The administration will ensure that if further modifications are needed it will continue to contain “disability and homeless” in its policy. | | | |
| **Description of Internal Monitoring Procedures:**  Comprehensive yearly review of policy will be established in the spring of every year. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017, submit a direct link to the revised policy regarding accessibility of extracurricular activities on the district's website, demonstrating the inclusion of disability and homelessness as protected categories.  The district must ensure that its revised policy regarding accessibility of extracurricular activities is consistently used in the district handbooks, code of conduct, and anywhere else the district posts the policy. | | | |
| **Progress Report Due Date(s):**  11/13/2017 | | | |

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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 although the district has updated school handbooks consistent with the amendments to the Massachusetts anti-bullying law by extending protections to students who are bullied by a member of the school staff, the Bullying Prevention and Intervention Plan posted on the district's website has not been updated. | | | |
| **Description of Corrective Action:**  By June 14, 2017, a plan will be accessible on the website. | | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent and IT Department | | **Expected Date of Completion:**  06/30/2017 | |
| **Evidence of Completion of the Corrective Action:**  The district Bullying Prevention and Intervention Plan has been updated to reflect the Massachusetts anti-bullying law and updated on the school website. | | | |
| **Description of Internal Monitoring Procedures:**  Annual review of accessibility to the Bullying Prevention and Intervention Plan on website. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017, submit a direct web link to the updated Bullying Intervention and Prevention Plan on the district's website, demonstrating that the Plan extends protections to students who are bullied by a member of the school staff. | | | |
| **Progress Report Due Date(s):**  11/13/2017 | | | |

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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 staff interviews indicated that the district's policies and procedures regarding student discipline do not provide a system for the periodic review of discipline data by special populations. | | | |
| **Description of Corrective Action:**  The district will develop policy and procedures for regularly reviewing student discipline data specific to special populations collaboratively, the frequency of such meetings, the data to be included in the analysis, analyzing data trends, and development of action plans if necessary. This process will require a review, and possibly a retooling of the student information system discipline module to ensure that data input into the discipline system is connected with the student classifications for data analysis purposes.  Timelines:  1. Development of discipline data review calendar. August 30th, 2017  2. Creation of discipline review guidelines and procedures. August 30th, 2017  2. Publish district data review plan in applicable publications including student handbooks, website, and district policies and procedures manuals. August 30th, 2017  3. Establish process for reporting data and developing action plans. August 30th, 2017 | | | |
| **Title/Role(s) of Responsible Persons:**  Building Principals | | **Expected Date of Completion:**  08/30/2017 | |
| **Evidence of Completion of the Corrective Action:**  1) Meeting calendar for 2017-2018  2) Discipline review policy and procedures documentation  3) Inclusion of policy in online student handbooks (online only for 2017-2018 because of printing deadline) and on the website.  4) Meeting minutes from data review meetings  5) Samples of reports used for data collection | | | |
| **Description of Internal Monitoring Procedures:**  1. Regular review of student data  2. Progress monitoring of actionable items | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 Submit a narrative description of the district's system for periodic review of discipline & suspension data for special populations, including its tracking system, methods of data analysis, and possible actions based on the reports' findings.  By March 5, 2018, submit evidence of analysis of suspension data, either from multiple examples of weekly data review or a trimester report. | | | |
| **Progress Report Due Date(s):**  11/13/2017  03/05/2018 | | | |

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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's annual and continuous notification to applicants, students, parents, and employees does not include the office address(es) and phone number(s) of the coordinator(s) for compliance with its responsibilities under Title IX and Section 504. | | | |
| **Description of Corrective Action:**  The office address and phone number of the coordinator for compliance under Title IX and Section 504 will be added to annual and continuous notifications to applicants, students, parents, and employees through documents such as: handbooks, postings, contracts, website. | | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent | | **Expected Date of Completion:**  08/30/2017 | |
| **Evidence of Completion of the Corrective Action:**  Documents will be updated and submitted with the required information along with a link to the website notice. | | | |
| **Description of Internal Monitoring Procedures:**  Comprehensive yearly review of documents will happen each summer. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017, in lieu of uploading the documents, submit direct web links to these documents on the district's website, demonstrating the office addresses and phone numbers for coordinators of compliance under Title IX and Section 504. | | | |
| **Progress Report Due Date(s):**  11/13/2017 | | | |

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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:**  A review of documents indicated that although the district ensures that scholarships, prizes and awards sponsored or administered by the district are free of restrictions based upon race, color, sex, gender identity, religion, national origin, and sexual orientation, this policy does not address the protected category of disability. | | | |
| **Description of Corrective Action:**  By 9/15/17, the guidance department will add the protected category of disability to the policy around scholarships, awards & prizes. | | | |
| **Title/Role(s) of Responsible Persons:**  High School Guidance Department | | **Expected Date of Completion:**  09/15/2017 | |
| **Evidence of Completion of the Corrective Action:**  Copies of the following documents with updated policy information:  Scholarship booklet  Scholarship application  Rockport High School Scholarship process document | | | |
| **Description of Internal Monitoring Procedures:**  The principal & guidance department will review the policy yearly (in February before applications and booklets go out) to ensure the scholarship procedures are free of restrictions based upon race, color, sex, disability, gender identity, religion, national origin, and sexual orientation. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  CR 15 Non-discriminatory administration of scholarships, prizes and awards | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017, in lieu of uploading the documents, submit a direct web link to documents with the revised policy around scholarships, awards & prizes on the district's website, demonstrating that the district's process to administer scholarships, prizes and awards includes disability as a protected category. | | | |
| **Progress Report Due Date(s):**  11/13/2017 | | | |

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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 although the district has developed a process to provide annual written notice to former students who have left school, not enrolled elsewhere and not earned their diploma, this notice does not inform them of the availability of publicly funded post-high school academic support programs. Additionally, interviews with administrative staff indicated that annual written notice is not consistently sent to each such student who attended high school in the district within the past two years. | | | |
| **Description of Corrective Action:**  The corrective action that will be taken to ensure compliance with all aspects of CR 17A is as follows:  By 8/1/2017, the Guidance department will have compiled a list of students who have withdrawn from Rockport High School over the past year without a plan or without enrolling in another public/private school and/or equivalency.  By 9/1/2017, the Guidance department will send out a certified letter outlining the publicly funded programs to support students in continuing their education after their withdrawal.  1/1/2018 - The Principal will conduct a first review to ensure the standard practice of informing students upon withdrawal from RHS of their rights to continue their education through publicly funded education or alternative education sources.  5/26/18- The Principal and the guidance department will conduct a final review for the year in order to prepare a list and certified letters to be mailed to each student/family in August of 2018. | | | |
| **Title/Role(s) of Responsible Persons:**  High School Guidance Department | | **Expected Date of Completion:**  05/26/2018 | |
| **Evidence of Completion of the Corrective Action:**  Evidence of compiled list from the guidance department  Sample of certified letter outlining student rights and resources  Copies of letters sent certified mail to withdrawn students from the 2016-17 school year  Meeting notes from the first database review along with copies of certified letters sent to date.  Meeting notes from the final database review along with copies of certified letters sent to date. In addition, a copy of one-year follow up letters will be provided. | | | |
| **Description of Internal Monitoring Procedures:**  The Principal and the Guidance team will meet in August of each year to review students who have withdrawn from the district without a formal plan or evidence in continued enrollment in a public or private institute of learning.  The Principal will ensure that the guidance department sends certified letter to all families for two years after withdrawal outlining the local resources available to ensure continued educational opportunities.  The database will be reviewed by the Principal two times per year (in January and June) to ensure accurate records. | | | |
| 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:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 submit the annual written notice to former students who have left the district, not enrolled elsewhere and not earned their diploma, to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs.  By March 5, 2018 submit the results of an internal review of all students 16 or older who left the district within the past two years indicating their status in obtaining a diploma or competency determination. The report should note the date the student left the district and whether they have transferred to another district. If the student has not transferred to another district, include the date the district sent the student a notice with information on the availability of publicly funded post-high school academic support programs and encouraging them to participate in available programs. | | | |
| **Progress Report Due Date(s):**  11/13/2017  03/05/2018 | | | |

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

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| **Criterion & Topic:**  ELE 3 Initial Identification | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the district has not established a final, written initial identification policy with procedures in accordance with the Department guidelines in order to maintain consistency in regards to English learner (EL) identification practices so that the district may identify students who may be ELs in a timely, valid and reliable manner. Please see the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" as found at http://www.doe.mass.edu/ell/guidance/default.html. | | |
| **Description of Corrective Action:**  The district revised its identification procedures in October 2016 but has not yet finalized them or provided additional training to relevant staff.    By 9/15/17, the district will have created an ELD task force that consists of the Director of Student Services, Elementary Curriculum Coordinator, ESL Teacher, and one principal from the secondary level and will have determined meeting dates, necessary action steps, responsible person(s) and interim due dates for the task force to accomplish a comprehensive review and revision of its ELD program.    By 6/30/17, the Director of Student Services will have finalized the district’s draft identification procedures so that they can be reviewed with the ELD task force in September 2017.    By 9/30/17, the task force members will have reviewed the Home Language Surveys and Registration forms at each building level to ensure that they are up to date and aligned with the district’s identification policies, and will have trained building secretaries on their role in the identification procedures.    RPS is a low incidence district. Ongoing monitoring of the appropriate use of these procedures will be conducted by the Elementary Curriculum Coordinator, who supervises and coaches the ESL teacher. | | |
| **Title/Role(s) of Responsible Persons:**  Dir. of Student Services, ESL teacher, Elementary Curr. Coord., Principals, Building Secretaries | | **Expected Date of Completion:**  10/15/2017 |
| **Evidence of Completion of the Corrective Action:**  Final version of district’s identification procedure  Date of task force review meeting  Sign in sheet/materials from review of procedures with building secretaries  Documentation from identified students (if applicable) | | |
| **Description of Internal Monitoring Procedures:**  If an EL enrolls in the district, the Elementary Curriculum Coordinator will monitor all steps of the initial identification process for quality, compliance and coaching purposes and will share the results of this monitoring with the ELD task force. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 3 Initial Identification | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1-Submit the district's revised initial identifications policies and procedures.  2- Provide training to all staff members involved in the initial identification process to ensure that they are all knowledgeable about the changes and submit the training materials, sign-in sheets and agendas.  3-Complete and submit the "Initial Identification Testing Data", "Initial Identification Personnel Data" and ""Initial Identification Procedures for ELs and FELs" forms that are available in the Document Library for SY 2017-18. | | |
| **Progress Report Due Date(s):**  09/29/2017 | | |

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

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| **Criterion & Topic:**  ELE 5 Program Placement and Structure | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district did not include student data that shows how much English as a Second Language (ESL) instruction ELs receive or the "OELAAA Form 2: Castañeda's Three-Pronged Test" that should provide an analytical framework to analyze the district's program for ELs. Although the district submitted a teacher schedule with students' initials, there is no information provided on the time dedicated to ESL to ensure that ELs acquire English language proficiency and are provided meaningful access to the district's educational program. After an evaluation of the documentation that was submitted and a review of 2016 ACCESS for ELLs scores, the Department concludes that ELs in the district are not appropriately served; the district's ELE program is not effective in developing students' English language skills and requires appropriate program adjustments to improve the outcomes of the service delivery. | | |
| **Description of Corrective Action:**  By 9/15/17, the district will have created an ELD task force that consists of the Director of Student Services, Elementary Curriculum Coordinator, ESL Teacher, and one principal from the secondary level and will have determined meeting dates, necessary action steps, responsible person(s) and interim due dates for the task force to accomplish a comprehensive review and revision of its ELD program. Some action steps are as follows:    By 9/15/17, the district will provide a list of EL students and a schedule of their instruction to the Department that includes student grade levels, English language proficiency levels, and amount of time dedicated to ESL instruction each week.    As of the time of this writing, the students? initials, grade levels, ELP levels, and projected levels of ESL instruction time are as follows:  AN, K, Level 2 (WIDA performance definitions), 2x45  AO, K, Level 3 WIDA performance definitions), 1x45  SP, 1, Level 1 (pre-LAS non-English Speaker), 2x45  EW, 3, Access Level 3.7, 1x45  FZ, 3, Access Level 3.9, 1x45  KP, 3, Access Level 3.8, 1x45  HP, 4, Access Level 4.1, 1x45  KW,5, Access Level 3.8, 1x45  CA, 11, Access Level 2.5, 2x45    KS 3, Access Level 2.7, opted out of ELL program 0  AAW, 8, Access Level 3.4, opted out of ELL program 0    By 11/15/17, the district will submit a detailed plan to the Department that describes its process to develop a curriculum for ELs that integrates WIDA ELD standards and, for more advanced learners, consists of students’ grade level content curriculum that has been modified and enhanced to support the language and literacy development of ELs. This plan will include, but is not limited to, the following:  Curriculum mapping: The Elementary Curriculum Coordinator and ESL teacher will develop a curriculum map for students in grades K-5, since all but one of the ELs in RPS are in this grade level span.  The secondary administrator and ESL teacher will develop a curriculum map for students in grades 6-12; the immediate focus of their work will be mapping the ELD curriculum for grades 6, 11 and 12, given there will be one EL in grade 5 in the 2017-18 SY who will be in grade 6 in the following year, and one EL in grade 11 in the 2017-18 SY who will be in grade 12 the following year.  Training to ESL teacher: the district’s ESL teacher will be provided with additional training on instructional methodologies and the use of curriculum for ELs.  Training to general education teachers: The Elementary Curriculum Coordinator and ESL teacher will provide training to general education teachers about teaching strategies specifically intended to enhance literacy and language skills for ELs in their classroom  Decision making and analysis of actions steps with consideration of the framework of Castaneda’s Three-Prong Test    To best address the Department’s conclusion, based on the EL students? ACCESS scores, that ELs are not being appropriately served, in addition to the steps described above, the ESL teacher will meet at least once per month with the Elementary Coordinator and show data on progress monitoring for all EL students. Under the supervision of the Elementary Curriculum Coordinator, the ESL teacher will use data from progress monitoring to inform instruction.    The EL task force will be a standing agenda item on the Superintendent’s leadership team agendas | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services  Elementary Curriculum Coordinator  ESL Teacher  Secondary Principal | | **Expected Date of Completion:**  05/26/2018 |
| **Evidence of Completion of the Corrective Action:**  ELD Task force meeting dates, action steps, allocation of responsibilities, and meeting notes showing that Castaneda’s three prong test is providing a structure for program development and analysis.  List of EL students with schedule of instruction  Plan to develop curriculum for ELs  Documentation of PD provided to ESL teacher  Training agendas and proof of attendance by ESL teacher  Professional development for general education teachers on meeting the needs of ELs in their classrooms  Sample curriculum units developed by ESL teacher under supervision of curriculum coordinator  Sample progress monitoring  Notes from EL task force updates at leadership team meetings | | |
| **Description of Internal Monitoring Procedures:**  Regular task force meetings  Student progress monitoring | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1-Use the "Root Cause Analysis, Corrective Action Plans and Progress Reports" document available in the Document Library to clarify why the district did not meet English Learner Student Learning Target Numbers for Growth and Attainment and what the district's corrective action will be to improve ELE program outcomes. Please be specific with all the adjustments or changes that will be required in order to provide better learning opportunities to ELs.  2-Please complete the Castañeda test available in the Document Library. 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.  3-Please provide training to all staff members involved in the education of ELs to ensure that they are knowledgeable about the program goals described in Castañeda Test submitted by the district and the district's commitment to provide sheltered content instruction and ESL instruction to ELs at all proficiency levels. Submit the training materials, agendas and sign-in sheets.  4- Please submit evidence of systematic English language development occurring during the time dedicated to ESL such as unit plans or an ESL Curriculum that ESL teachers use for ESL instruction.  5-Please explain how the district will monitor the progress towards compliance and submit the district's monitoring system to ensure that English language development occurs during the time dedicated to ESL.  6-Please complete the EL Student Roster form available in the Document Library by school for each EL in the district. | | |
| **Progress Report Due Date(s):**  09/29/2017 | | |

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

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| **Criterion & Topic:**  ELE 6 Program Exit and Readiness | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district has not established reclassification criteria in accordance with Department of Elementary and Secondary Education guidelines to identify or reclassify students who may no longer be ELs. Please see the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" as found at http://www.doe.mass.edu/ell/guidance/default.html. | | |
| **Description of Corrective Action:**  The district revised its reclassification procedures in October 2016 based on the Department’s guidance but has not yet finalized them or provided additional training to relevant staff.  As described, by 9/15/17, the district will have created an ELD task force that consists of the Director of Student Services, Elementary Curriculum Coordinator, ESL Teacher, and one principal from the secondary level and will have determined meeting dates, necessary action steps, responsible person(s) and interim due dates for the task force to accomplish a comprehensive review and revision of its ELD program.    By 9/15/17, the Director of Student Services will have finalized the district’s draft reclassification procedures so that they can be reviewed with the ELD task force in September 2017.    By 10/30/17, the ESL teacher, who is a member of the ELD task force, will meet with the Elementary Curriculum Coordinator to provide additional coaching on these reclassification procedures.    RPS has a low incidence of ELs. Ongoing monitoring of the appropriate use of these procedures will be conducted by the Elementary Curriculum Coordinator, who supervises and coaches the ESL teacher. Each step of the process for students who are eligible for reclassification will be overseen and monitored by the Elementary Curriculum Coordinator and Director of Student Services. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services, ESL teacher, Elementary Curriculum Coordinator | | **Expected Date of Completion:**  10/15/2017 |
| **Evidence of Completion of the Corrective Action:**  Final version of district’s identification procedure  Date of task force review meeting  Sign in sheet/materials from review of procedures with ESL Teacher  Documentation relevant to reclassified students (if applicable and available) | | |
| **Description of Internal Monitoring Procedures:**  RPS has a very low incidence of ELs, allowing for close monitoring of each step of the reclassification process. Each step of the process for all students who are eligible for reclassification will be overseen by the ESL teacher and monitored by the Elementary Curriculum Coordinator and Director of Student Services. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1-Submit the district's revised reclassification policies and procedures.  2- Provide training to all staff members involved in the reclassification process to ensure that they are all knowledgeable about the changes and submit the training materials, sign-in sheets and agendas.  3-Please use FEL Roster available in the Document Library to provide information for all the ELs in your district who have been reclassified in the last school year. | | |
| **Progress Report Due Date(s):**  09/29/2017 | | |

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

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| **Criterion & Topic:**  ELE 7 Parent Involvement | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the district sometimes uses an online translator, or a local resident for translating written documents and providing interpretation services for parent-teacher conferences. In some instances translation services are not available to parents. Online translators do not accurately convey the meaning of the source document and relying on local residents is not appropriate for translations that require confidentiality. The Department concludes that the district does not meet the obligation to communicate effectively with parents whose preferred language of communication is not English and fails to include these parents of ELs in matters pertaining to their children's education. | | |
| **Description of Corrective Action:**  As described, by 9/15/17, the district will have created an ELD task force that consists of the Director of Student Services, Elementary Curriculum Coordinator, ESL Teacher, and one principal from the secondary level and will have determined meeting dates, necessary action steps, responsible person(s) and interim due dates for the task force to accomplish a comprehensive review and revision of its ELD program. Improving parent involvement will be part of this review.    By 9/30/17, the district will identify (according to the HLS) all of the families who require information in translation or through the use of interpreter services.    By 10/15/17, the district will provide a plan to improve the meaningful involvement of parents of ELs in their children’s education by ensuring that the district communications are provided to parents in accurate, high quality translation and that professional interpreters are available to allow families full access to the life of the school while also ensuring confidentiality.    This plan will include:  Specific procedures for each school building to procure translation and interpreter services in a timely manner and in the home languages of the families receiving information about or attending school events  A list of vendors who will be used for these services  A list of documents that will be translated professionally and uploaded to the district website  A list of documents that will be made available in translation to parents throughout the school year  A compilation of school events, at each school level, where parents may need interpreter services, and evidence that the district has provided this information to families in advance, via notices of these events.    The district will develop a means of documenting the provision of translated documents to the parent and the use of interpreter services. | | |
| **Title/Role(s) of Responsible Persons:**  Building Principals, ESL Teacher, Building Secretaries | | **Expected Date of Completion:**  05/26/2018 |
| **Evidence of Completion of the Corrective Action:**  List of families (by initials) who require translation and/or interpreter services, and languages required  ELD Task force plan (please see above for information that will be in this plan)  Documentation of use of translation and interpreter services  Results of internal monitoring | | |
| **Description of Internal Monitoring Procedures:**  Because the district has a low-incidence of ELs, it will monitor the files of ALL students whose families require translation or interpreter services according to the HLS to ensure that these services have been provided in a timely manner, by trained professionals, for the school-related events and correspondence identified by the ELD task force. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 7 Parent Involvement | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Please submit the following:  1-The district's written key procedures and processes to follow in securing a translator or an interpreter  2- Processes the school district uses to identify limited English proficient parents  3- A description of steps the schools and the district take to provide effective language assistance to parents whose preferred language is not English  4- Evidence of translated documents for SY 2017-18. | | |
| **Progress Report Due Date(s):**  09/29/2017 | | |

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

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| **Criterion & Topic:**  ELE 10 Parental Notification | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and documents indicated that the district does not send progress reports to parents or legal guardians of students that include information regarding the student's progress in becoming proficient in using the English language. | | |
| **Description of Corrective Action:**  By 9/15/17, the Elementary Curriculum Coordinator and a secondary administrator will meet with the ESL teacher to develop written district expectations regarding the provision of progress reports to parents or legal guardians of EL students that are data-driven and include specific measures of the student’s progress toward ELP. These expectations will be informed by the Department’s guidance as well as by district-wide assessments, and will be considered a “live” or “working document;” as the district’s ELD task force maps and develops its curriculum for ELs (see ELE 5 above), the district will add to these expectations as needed. However, at a minimum, the progress reports will provide information on student progress in reading, writing, listening and speaking, as established by baseline data and subsequent assessments.    Also, at a minimum, these progress reports will be provided concurrent with report cards (3x/year for students at the elementary level and 4x/year for students at the secondary level). | | |
| **Title/Role(s) of Responsible Persons:**  ESL Teacher, Elementary Curriculum Coordinator, Secondary Administrator | | **Expected Date of Completion:**  05/26/2018 |
| **Evidence of Completion of the Corrective Action:**  Written expectations for writing progress reports  Samples of completed progress reports  Results of internal monitoring process | | |
| **Description of Internal Monitoring Procedures:**  The district has a very low incidence of ELs, allowing for thorough monitoring of this criterion. During the 2017-18 school year, the Elementary Curriculum Coordinator will review all student progress reports written for ELs at the elementary level. The secondary administrator will review all student progress reports written for ELs at the MHS levels. The administrators monitoring the progress reports will discuss any reports that lack measurability or are not based on data with the ESL teacher, and provide coaching and support in this area. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 10 Parental Notification | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1- Submit samples of the progress reports the district will send to parents or legal guardians to inform them of their child's progress in English language acquisition.  2- Provide the district's plan of how the district plans to provide ELE progress reports including information about how often ELE progress reports will be issued and how the district will monitor the process to ensure that parents receive them in their preferred language. | | |
| **Progress Report Due Date(s):**  09/29/2017 | | |

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

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| **Criterion & Topic:**  ELE 12 Equal Access to Nonacademic and Extracurricular Programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that information provided to EL students about extracurricular activities and school events is not always provided in a language they understand. | | |
| **Description of Corrective Action:**  As described, by 9/15/17, the district will have created an ELD task force that consists of the Director of Student Services, Elementary Curriculum Coordinator, ESL Teacher, and one principal from the secondary level and will have determined meeting dates, necessary action steps, responsible person(s) and interim due dates for the task force to accomplish a comprehensive review and revision of its ELD program. Ensuring the provision of information to students about extracurricular activities and school events in a language they can understand will be part of the task force’s work.    By 9/30/17, the district will identify the primary sources of information FOR STUDENTS on extracurricular activities and school events.    By 10/15/17, the district will provide a plan to ensure that students receive information on extracurricular activities and school events in a language that they can understand. In some cases, this may mean translating information about school events and activities into the student’s home language. In other cases, depending on the student’s ELP, it may mean rewriting or modifying materials that describe school related events and extracurricular activities using simplified language. Please also see ELE 7 regarding corrective action taken to ensure that translation and/or interpreter services are provided in a timely manner and by professionally trained individuals.    The district will document the provision of translated, simplified or modified documents to students in the same way it documents the provision of translated materials and interpreter services to parents. | | |
| **Title/Role(s) of Responsible Persons:**  Building Principals, ESL Teacher, Building Secretaries | | **Expected Date of Completion:**  09/30/2017 |
| **Evidence of Completion of the Corrective Action:**  Evidence of Completion of Corrective Action:    Notes from ELD task force meeting identifying the sources of information for students on school activities and extracurricular events.  Copy of district plan to ensure that students receive the sources of information identified in language they can understand  Samples of information provided to students either in translation or in language they can understand. | | |
| **Description of Internal Monitoring Procedures:**  Because the district has a low-incidence of ELs, it will monitor the files of ALL EL students to ensure that students who require correspondence regarding school-related events and extracurricular activities in translation or in simplified language are receiving this correspondence. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 12 Equal Access to Nonacademic and Extracurricular Programs | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 13, 2017 submit the district's identified primary sources of information for students on extracurricular activities and a plan to ensure that students receive information on extracurricular activities and school events in a language that they can understand.  By November 13, 2017 submit a direct link to the district's website to translated materials, along with a list of other methods of access the district has used to ensure ELs gain access to information about extracurricular activities and school events | | |
| **Progress Report Due Date(s):**  11/13/2017 | | |

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

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| **Criterion & Topic:**  ELE 13 Follow-up Support | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the district does not have a formal monitoring system in place to monitor the progress of the students who will exit or have exited the ELE program, including how to provide support to those students, if needed. | | |
| **Description of Corrective Action:**  By 9/30/2017, the above named people will meet to develop a protocol for a formal monitoring system for students in the program and those exited.  By 10/31/2017 Documents will be created to support the protocol and document analysis of EL student progress. These documents will be broken down by content area and criteria to report student progress and performance. | | |
| **Title/Role(s) of Responsible Persons:**  Building Principal, Elementary Curriculum Coordinator, ESL Teacher | | **Expected Date of Completion:**  05/26/2018 |
| **Evidence of Completion of the Corrective Action:**  The assigned staff will meet to discuss the priority criteria needed to assess students. We will together create a systemic process for monitoring each EL student. Once the group has developed a protocol the actual monitoring documents will be created with consultation with classroom teachers, the EL Teacher, and administration at each school level. These documents will be implemented by first report card. | | |
| **Description of Internal Monitoring Procedures:**  These documents will be reviewed at marking periods by the Elementary Curriculum Coordinator and principals.. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 13 Follow-up Support | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a plan explaining how the district will monitor the progress of FELs to ensure that they have made adequate progress as well as the level of support that will be available to FELS provided that they need such support to remedy any academic deficits they may still have and to provide them access to the curricula taught in the school. Provide training to all ELE staff to ensure that they are all knowledgeable about the process and submit the training materials, sign-in sheets and agendas by the progress report due date. | | |
| **Progress Report Due Date(s):**  09/29/2017 | | |

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

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| **Criterion & Topic:**  ELE 17 Program Evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Based on the lack of documentation of a program evaluation, the Department concludes that 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 district's educational program. Please see http://www.doe.mass.edu/ell/ProgramEvaluation.pdf. | | |
| **Description of Corrective Action:**  Using the Department's program evaluation template, the ELD task force (described in detail above) and Superintendent will develop a detailed plan to evaluate the ELD program that includes SMART goals, data collection, data analysis, persons responsible and associated timelines. | | |
| **Title/Role(s) of Responsible Persons:**  Director of SS, Elem. Curr. Coord, ESL teacher, Supt, MS or HS Principal | | **Expected Date of Completion:**  05/26/2018 |
| **Evidence of Completion of the Corrective Action:**  Evaluation plan showing adherence to timelines and progress toward achievement of goals | | |
| **Description of Internal Monitoring Procedures:**  As described above, the ELD program will be a standing item on the agenda of the district leadership team meetings. The district will self-monitor its progress on the timelines and interim steps associated with the ELE program evaluation at these leadership team meetings and at the ELD task force meetings. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1- Please complete the program evaluation tool that is available at http://www.doe.mass.edu/ell/ProgramEvaluation.pdf . The district must complete all of the components of the attached form in order to evaluate the effectiveness of its ELE program in developing students' English language skills and increasing their ability to participate meaningfully in the district's educational program.  2- Please provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation.  3- Please provide a plan of action to make appropriate program adjustments or changes that are responsive to the outcomes of the program evaluation to improve the effectiveness of the program at promoting and supporting the rapid acquisition of English language proficiency by ELs as is required in G.L. c. 71A. | | |
| **Progress Report Due Date(s):**  03/05/2018 | | |

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

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| **Criterion & Topic:**  ELE 18 Records of ELL students | | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that EL student records do not consistently include MCAS/PARCC reports, copies of annual parent notification letters, and progress reports. | | | |
| **Description of Corrective Action:**  By 6/21/17, the Elementary Curriculum Coordinator will meet with the ESL teacher to review the components of a complete student record and to provide coaching on how to locate and organize items in the student files. Using the Department Student Record Checklist, which will be attached to each file, the ESL Teacher will organize all EL student files prior to the end of the 16-17 SY, and will indicate which items are missing, if any. He and the Elementary Curriculum Coordinator will analyze the causes of this missing information in the context of the corrective actions proposed by the district and determine what additional barriers exist, if any, to ensuring that student records are accurately and completely maintained. | | | |
| **Title/Role(s) of Responsible Persons:**  Elementary Curriculum Coordinator  ESL Teacher | | **Expected Date of Completion:**  12/30/2017 | |
| **Evidence of Completion of the Corrective Action:**  Copies of Student Record Checklists showing an inventory of a complete file. | | | |
| **Description of Internal Monitoring Procedures:**  Given the small number of ELs in the district, the Elementary Curriculum Coordinator will monitor the completeness and organization of the all of the ELL student records three times per year. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | | |
| **Criterion:**  ELE 18 Records of ELL students | **Corrective Action Plan Status:** Approved  **Status Date:** 07/24/2017  **Correction Status:** Not Corrected | | |
| **Basis for Decision:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  By September 29, 2017 submit the district's EL record checklist and evidence of EL staff training, including the agenda, signed attendance sheets, and training materials.  By November 13, 2017 submit the results of an internal review of approximately 5-10 records of ELs subsequent to implementation of all corrective actions for evidence that records consistently contain all required elements, including MCAS/PARCC reports, copies of annual parent notification letters, and progress reports. Provide a detailed summary of the internal review including the number of records reviewed, and the number with all required documents. 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):**  09/29/2017  11/13/2017 | | | |