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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: Freetown-Lakeville

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 03/26/2017.

**Mandatory One-Year Compliance Date:** **03/26/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 3 | Special requirements for determination of specific learning disability | Partially Implemented |
| SE 11 | School district response to parental request for independent educational evaluation | Partially Implemented |
| SE 14 | Review and revision of IEPs | Partially Implemented |
| SE 34 | Continuum of alternative services and placements | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |
| ELE 17 | Program Evaluation | Not Implemented |

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| **Criterion & Topic:** SE 3 Special requirements for determination of specific learning disability | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that when a student is suspected of having a specific learning disability, the written determination as to whether or not the student has a specific learning disability is not consistently signed by a general education teacher. |
| **Description of Corrective Action:** The appropriate staff will be identified and trained in this special requirement for determination of specific learning disability to ensure that a written determination as to whether or not a student has a specific learning will be consistently signed by the appropriate general education teacher. |
| **Title/Role(s) of Responsible Persons:**Ellen Witter-HarringtonDirector of Student Services | **Expected Date of Completion:**02/28/2018 |
| **Evidence of Completion of the Corrective Action:**A record review will show that the District is following the regulation as signatures of the appropriate general education staff will be secured and in the students' records. |
| **Description of Internal Monitoring Procedures:** All Special education paperwork (IEPs, Placement pages, Evaluation Consent forms, Amendments, etc.) are sent out from the central office. Prior to sending out and filing paperwork, the secretarial staff will double check the packets of all initial and reevaluation meetings in which a specific learning disability is found to be present to ensure the form is included with the general education staff's signature. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 3 Special requirements for determination of specific learning disability | **Corrective Action Plan Status:** Partially Approved **Status Date:** 06/14/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The proposed oversight does not identify the name and role of administrator responsible for oversight. |
| **Department Order of Corrective Action:**Please identify the name and role of the administrator responsible for the proposed oversight in the corrective action plan. |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit evidence of all staff training on the requirement for all members of the Team to sign the written determination as to whether or not a student has specific learning disability including agenda, signed attendance sheet, name and role of presenter, and a sample of training materials. By September 22, 2017 submit the name and role of the administrator responsible for oversight. By December 20, 2017 review a sample of student records with specific learning disability determination from different grade levels and submit the results of the review including the number of records reviewed at each level and the number found to be compliant. 1f noncompliance 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 conducting internal monitoring, the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade 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):** 09/22/201712/20/2017 |

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| **Criterion & Topic:** SE 11 School district response to parental request for independent educational evaluation | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that when a parent requests an independent educational evaluation, the district procedures do not ensure that within five school days, the district will either agree to pay for the independent education evaluation or proceed to the Bureau of Special Education Appeals (BSEA) to show that its evaluation was comprehensive and appropriate. |
| **Description of Corrective Action:** District procedures will be reviewed and revised to ensure that a parent will receive notification within five school days as to whether the District will either agree to pay for an independent evaluation or proceed to the Bureau of Special Education Appeals (BSEA) to show that its evaluation was comprehensive and appropriate. |
| **Title/Role(s) of Responsible Persons:**Ellen Witter-HarringtonDirector of Student Services | **Expected Date of Completion:**02/28/2018 |
| **Evidence of Completion of the Corrective Action:**Revised district procedures document(s).Dissemination of this revised procedures to the appropriate staff.Training provided to appropriate staff. |
| **Description of Internal Monitoring Procedures:** All parental requests for an independent evaluation will be directed to the central office. The date of the request will be stamped on the request and logged in. A response to ensure that a parent will receive notification within five school days as to whether the District will either agree to pay for an independent evaluation or proceed to the Bureau of Special Education Appeals (BSEA) to show that its evaluation was comprehensive and appropriate will be provided. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 11 School district response to parental request for independent educational evaluation | **Corrective Action Plan Status:** Partially Approved **Status Date:** 06/14/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The proposed oversight does not identify the name and role of administrator responsible for oversight. |
| **Department Order of Corrective Action:**Please identify the name and role of the administrator responsible for the proposed oversight in the corrective action. |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit revised procedures for response to parental request for independent educational evaluations in an area not assessed by the school district, or when the student does not meet income eligibility standards or the family chooses not to provide financial documentation to the school district establishing family income level. By September 22, 2017 submit the name and role of the administrator responsible for oversight. By October 20, 2017 submit evidence of staff training on the revised procedures including dated agenda, signed attendance sheet, name and role of presenter and training materials. |
| **Progress Report Due Date(s):** 09/22/201710/20/2017 |

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| **Criterion & Topic:** SE 14 Review and revision of IEPs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that IEP Teams do not consistently meet annually, on or before the anniversary date of the IEP, to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate. |
| **Description of Corrective Action:** Tracking and procedures will be revamped to ensure that all IEP Teams do not consistently meet annually, on or before the anniversary date of the IEP, to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate. Training on these revised procedures will be provided to appropriate staff. |
| **Title/Role(s) of Responsible Persons:**Ellen Witter-HarringtonDirector of Student Services | **Expected Date of Completion:**02/28/2018 |
| **Evidence of Completion of the Corrective Action:**Revised tracking and procedures document(s).Training to staff completed as evidenced by training agendas and signed attendance sheets.Student records will be reviewed to ensure compliance with this regulation. |
| **Description of Internal Monitoring Procedures:** All students' IEP end dates will be created into a list at the beginning of the 2017-2018 school year by month. The secretarial staff will schedule IEP Team meetings prior to or by the IEP end date. Secretarial staff will check on a weekly basis that these meetings have been held within the required timelines. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 14 Review and revision of IEPs | **Corrective Action Plan Status:** Partially Approved **Status Date:** 06/14/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The proposed oversight does not identify the name and role of administrator responsible for oversight |
| **Department Order of Corrective Action:**Please identify the name and role of the administrator responsible for the proposed oversight in the corrective action plan. |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit evidence of special education staff training on IEP annual review on or before the anniversary date of the IEP to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation as appropriate, including agenda, signed attendance sheet, name and role of presenter, and a sample of training materials. By September 22, 2017 submit the name and role of the administrator responsible for oversight. By November 20, 2017 submit the results of an internal record review including the number of records reviewed at each level; the number found to be compliant; an explanation of the root cause(s)for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance. |
| **Progress Report Due Date(s):** 09/22/201711/20/2017 |

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| **Criterion & Topic:** SE 34 Continuum of alternative services and placements | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records, documents, and administrative interviews indicated that the district does not have a continuum of alternative services and placements at the high school level. Special education programming at the high school consists of academic support, substantially separate English and math classes, and a vocational/life skills program. However, students whose IEPs indicated an emotional disability requiring significant social and emotional support are provided with 30 minutes of counseling every six (6) days, with few exceptions. A review of student records, documents, and administrative interviews also indicated that several students with emotional disabilities at the middle school were placed out of district instead of attending the high school because, despite evidence of progress in the middle school behavioral support program, the high school does not have sufficient services and programming to address the social and emotional needs of these students. |
| **Description of Corrective Action:** The high school principal Dr. Barbara Starkie, and the secondary special education coordinator, Ashley Bouley, will work with the high school educational community to increase emotional supports to high school students with an emotional disability. |
| **Title/Role(s) of Responsible Persons:**Ellen Witter-HarringtonDirector of Student Services | **Expected Date of Completion:**02/28/2018 |
| **Evidence of Completion of the Corrective Action:**The high school will begin to have sufficient services and programming to address the social and emotional needs of these students who require significant social and emotional support. |
| **Description of Internal Monitoring Procedures:** Increased emotional supports and programming at the high school level as evidenced by monitoring and tracking of the services provided to students requiring significant social and emotional support due to their emotional disability as well as reviewing the appropriate student records. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 34 Continuum of alternative services and placements | **Corrective Action Plan Status:** Approved **Status Date:** 06/14/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit a plan to address the needs of students with emotional disabilities transitioning from middle school to high school, including behavioral supports, services and programs. Additionally, submit a description of procedures to ensure that Teams consider a range of supports for students with emotional disabilities at the high school. |
| **Progress Report Due Date(s):** 09/22/2017 |

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| **Criterion & Topic:** CR 3 Access to a full range of education programs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that although the district has a policy ensuring equal access to all aspects of education regardless of race, color, sex, religion, national origin, sexual orientation, disability, or homelessness, this policy does not address the protected category of gender identity. |
| **Description of Corrective Action:** Include the protected category of gender identity in the policy. |
| **Title/Role(s) of Responsible Persons:**Director of Curriculum & Assessment | **Expected Date of Completion:**10/01/2017 |
| **Evidence of Completion of the Corrective Action:**Revised PolicyCopy of email as evidence of revised policy disseminated to school community |
| **Description of Internal Monitoring Procedures:** Building Principals and Central Administration will monitor that the revised policy is implemented and adhered to |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved **Status Date:** 06/14/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit evidence of updated non-discrimination policy statement ensuring equal access to a full range of education programs, including link to district's website, Student Handbook, Employee Handbook, district stationery. Additionally, submit evidence of dissemination to students, staff and families, including email to families or link to a notice on the district's website. |
| **Progress Report Due Date(s):** 09/22/2017 |

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| **Criterion & Topic:** CR 9 Hiring and employment practices of prospective employers of students | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that although the district requires employers recruiting at the school to sign a statement that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices and specifically includes race, color, national origin, sex, handicap, religion, and sexual orientation, this statement does not include the protected category of gender identity. |
| **Description of Corrective Action:** Statement will be revised to include the protected category of gender identity. |
| **Title/Role(s) of Responsible Persons:**Director of Curriculum & Assessment | **Expected Date of Completion:**10/01/2017 |
| **Evidence of Completion of the Corrective Action:**Revised statementCopy of email showing statement was disseminated to appropriate staff |
| **Description of Internal Monitoring Procedures:** Central Administration and High School Principal will monitor statement compliance |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved **Status Date:** 06/14/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit a revised copy of the non-discrimination statement that the district requires employers recruiting at the school to sign for assurance that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices. |
| **Progress Report Due Date(s):** 09/22/2017 |

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| **Criterion & Topic:** CR 10A Student handbooks and codes of conduct | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that although the district's codes of conduct include a nondiscrimination policy that affirms each school's non-tolerance for harassment based on race, color, national origin, sex, religion, or sexual orientation, or discrimination on those same bases, this policy does not include the protected category of gender identity. |
| **Description of Corrective Action:** Code of Conduct will be revised to include the protected category of gender identity. |
| **Title/Role(s) of Responsible Persons:**Director of Curriculum & Assessment | **Expected Date of Completion:**10/01/2017 |
| **Evidence of Completion of the Corrective Action:**Revised Code of ConductHandbooks and website updatedCopy of email supporting dissemination to school community |
| **Description of Internal Monitoring Procedures:** Central Administration and Building Principals will monitor implementation and compliance as well as insure handbooks are updated annually |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved **Status Date:** 06/14/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit a link to the 2017-2018 Student Handbook on the district website, updated to include gender identity as a protected category in the code of conduct and evidence that the updated policy has been disseminated to students, staff and families. |
| **Progress Report Due Date(s):** 09/22/2017 |

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| **Criterion & Topic:** CR 10B Bullying Intervention and Prevention | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and interviews indicated that although the district updated its Bullying Intervention and Prevention Plan so that it is consistent with the amendments to the Massachusetts anti-bullying law, handbooks have not been updated to make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. |
| **Description of Corrective Action:** Bullying and Intervention Plan will be updated to include language indicating that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. |
| **Title/Role(s) of Responsible Persons:**Director of Curriculum & Assessment | **Expected Date of Completion:**10/01/2017 |
| **Evidence of Completion of the Corrective Action:**Updated planHandbook updatesEmail showing dissemination to school community |
| **Description of Internal Monitoring Procedures:** Central Administration and Building Principals will monitor implementation and compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Partially Approved **Status Date:** 06/14/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district did not include staff training on the updated Bullying Intervention and Prevention Plan. |
| **Department Order of Corrective Action:**Please Include staff training on the updated Bullying Intervention and Prevention Plan in the corrective action. |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit a revised Bullying Intervention and Prevention Plan updated to include language that a member of staff may be named the "aggressor" or "perpetrator" in a bullying report. By November 20, 2017 submit minutes or other evidence documenting that the revised policy has been approved by the school committee. By November 20, 2017 submit evidence, including the agenda, training materials, signed attendance sheets, and name and role of presenter, that all staff have been trained on the updated bullying intervention and prevention policy. By December 20, 2017 submit evidence that the district's revised bullying intervention and prevention policy has been disseminated to staff and families. |
| **Progress Report Due Date(s):** 09/22/201711/20/201712/20/2017 |

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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 although the district takes steps to notify applicants, students, parents, and employees, as well as unions or professional organizations holding collective bargaining or professional agreements with the district, that it does not discriminate on the basis of race, color, national origin, sex, or disability, the notification does not include the protected category of gender identity. A review of documents also indicated that the notice in the elementary school handbooks does not include coordinator address(es); the middle school handbook does not include coordinator name(s) or address(es); and the high school handbook does not include the 504 coordinator name and address or the Title IX coordinator address. |
| **Description of Corrective Action:** Nondiscrimination notification will be revised to include the protected category of gender identity.Handbooks will be reviewed and corrected with coordinator names/contact information. |
| **Title/Role(s) of Responsible Persons:**Director of Curriculum & Assessment | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**Revised nondiscrimination notificationUpdated handbooksProof of dissemination to school community |
| **Description of Internal Monitoring Procedures:** Central Administration will insure notification statements are updated and disseminated. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved **Status Date:** 06/14/2016 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit a link to all 2017-2018 elementary, middle school and high school Student Handbooks on the district website, updated to include gender identity as a protected category in the non discrimination statement, and demonstrating that each contains the name and address of the 504 coordinator and the Title IX coordinator. By November 20, 2017 submit evidence that the updated policy has been disseminated to students, staff and families. |
| **Progress Report Due Date(s):** 09/22/201711/20/2017 |

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| **Criterion & Topic:** CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that although the district has developed and implemented written restraint prevention and behavior support policy and procedures, they are not consistent with regulations under 603 CMR 46.00. Specifically, policy and procedures do not include: methods for preventing student violence, self injurious behavior and suicide; methods for engaging parents and youth in discussions about restraint prevention and use; a description and explanation of the program's alternatives to physical restraint and method of physical restraint in emergency situations; and a statement prohibiting prone restraint unless permitted pursuant to 603 CMR 46.03 (1)(b). A review of documents and staff interviews indicated that program staff have been identified to serve as school-wide resources for the administration of restraint and provided with in-depth training on the use of physical restraint. |
| **Description of Corrective Action:** Physical restraint prevention and behavior support policy will be revised to meet regulations under 603CMR 46.00. |
| **Title/Role(s) of Responsible Persons:**Director of Curriculum & Assessment | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**Revised policy and proceduresEvidence of dissemination and training to school community |
| **Description of Internal Monitoring Procedures:** Central Administration and Building Principals will revise, implement, and insure compliance with the policy and procedures. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Partially Approved **Status Date:** 06/15/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district did not include staff training on the updated policy as part of the corrective action. |
| **Department Order of Corrective Action:**Please include staff training on the updated policy as part of the corrective action. |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit a revised physical restraint prevention and behavior support policy and procedures including all the required elements of the new regulations under 603 CMR 46.00. By November 20, 2017 submit minutes or other evidence documenting that the revised policy and procedures have been approved by the school committee. By November 20, 2017 submit evidence of all staff training on the updated physical restraint policy, including dated agenda, training materials, signed attendance sheets, name and role of presenter. By December 20, 2017, submit evidence that the district's revised physical restraint prevention and behavior support policy and procedures have been disseminated to students, staff and families. |
| **Progress Report Due Date(s):** 09/22/201711/20/201712/20/2017 |

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| **Criterion & Topic:** CR 21 Staff training regarding civil rights responsibilities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that although the district provides in-service training for all school personnel at least annually regarding civil rights responsibilities, including the prevention of discrimination and harassment on the basis of students' race, color, sex, religion, national origin, and sexual orientation and the appropriate methods for responding to it in the school setting, training materials did not include the protected category of gender identity. |
| **Description of Corrective Action:** Training materials will be revised to include the protected category of gender identity. |
| **Title/Role(s) of Responsible Persons:**Director of Curriculum & Assessment | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**Updated training materialsEvidence of Training |
| **Description of Internal Monitoring Procedures:** Central Administration will update materials and Principals will adhere to training requirements with all staff. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved **Status Date:** 06/15/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit updated staff training materials on civil rights responsibilities including prevention of discrimination and harassment. By September 22, 2017 submit evidence of staff training on civil rights responsibilities, including dated agenda, signed attendance sheets, training materials that include gender identity as protected category, and the name and role of the presenter. |
| **Progress Report Due Date(s):** 09/22/2017 |

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| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents and interviews indicated that the district does not evaluate all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. |
| **Description of Corrective Action:** The district admin team will annually review the K-12 program to ensure all students in protected categories are have equal access to all programs. |
| **Title/Role(s) of Responsible Persons:**Director of Curriculum & AssessmentDistrict Administrative Team | **Expected Date of Completion:**03/01/2018 |
| **Evidence of Completion of the Corrective Action:**Evaluation tool or template created and completedSummary of evaluation results |
| **Description of Internal Monitoring Procedures:** District Administrative team discusses at an admin council meeting and Central Administration collects the data from building principals and other staff administrators to complete tool and produce a summary. Changes are recommended to procedures or access as needed. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 06/14/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By September 22, 2017 submit a self evaluation tool or template to evaluate all aspects of the district's K-12 program for equal access. By November 20, 2017 submit a narrative summary of results of the institutional self evaluation and an action plan for program adjustments or changes in response to the outcomes of the institutional self-evaluation to improve equal access to all programs, including athletics and other extracurricular activities. |
| **Progress Report Due Date(s):** 09/22/201711/20/2017 |

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| **Criterion & Topic:** ELE 17 Program Evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** Documentation and staff interviews indicated that the district has not conducted periodic evaluations of the effectiveness of its ELE program in developing students' English language skills and increasing their ability to participate meaningfully in the educational program. |
| **Description of Corrective Action:** An annual evaluation of the effectiveness of the ELE program will be conducted. |
| **Title/Role(s) of Responsible Persons:**Director of Curriculum & AssessmentESL Staff | **Expected Date of Completion:**12/01/2017 |
| **Evidence of Completion of the Corrective Action:**Completed tool/template evaluating program components |
| **Description of Internal Monitoring Procedures:** Director of Curriculum & Assessment, in conjunction with ESL staff will meet to review and summarize findings annually. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 06/15/2017 **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):** 09/22/2017 |