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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: Athol-Royalston

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 06/05/2017.

**Mandatory One-Year Compliance Date:** **06/05/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | 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 46 | Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 10C | Student Discipline | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 18 | Responsibilities of the school principal | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| ELE 4 | Waiver Procedures | Partially Implemented |
| ELE 5 | Program Placement and Structure | Partially Implemented |
| ELE 6 | Program Exit and Readiness | Partially Implemented |
| ELE 12 | Equal Access to Nonacademic and Extracurricular Programs | Partially Implemented |
| ELE 14 | Licensure Requirements | Partially 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 8 IEP Team composition and attendance | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that when a Team meeting is convened to discuss transition services for a student who has reached the age of majority, the district does not consistently invite a public agency, or a representative of a public agency, who is likely to be responsible for providing or paying for transition services.  Student record review and interviews indicate that the district does not consistently document, in writing, when a parent/guardian agrees to excuse a Team member's participation. Also, written input from excused Team members was not consistently provided to the parent prior to the meeting. | | |
| **Description of Corrective Action:**  The high school special education and guidance staff will receive professional development in the SE 8 regulations. This training will include identifying specific contacts at each adult agency to send invitations to including MRH, DSS, DCF and DMH. At the beginning of the school year the student class lists will be reviewed and students reaching the age of majority during the year, and those at the age of majority will be identified and meeting status noted so invitations can be sent at least two weeks prior to the IEP meeting. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Pupil Services / Principal / High school guidance and special education liaisons | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  All IEP team attendance sheets and invitations will have adult serving agencies listed | | |
| **Description of Internal Monitoring Procedures:**  All files of students turning 18 or older will have files reviewed by the Dir of Pupil Services | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Clarification: Not all team meetings require the participation of an agency. If it is determined that an adult agency should be invited, the district must have the consent of the parent or student 18 years or over to invite the agency.  Also, the district did not address the process for excusing Team members, including that required Team members who are excused must provide written input to the parent and the IEP Team before the meeting. | | |
| **Department Order of Corrective Action:**  The district will train staff on the requirement to invite a representative of a participating agency that is likely to be responsible for providing or paying for transition services, with the consent of the parent(s) or student who has reached the age of majority, and training on the excusal process for Team members. | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide evidence (agenda, attendance sheet with signature/role, training materials) that staff has been trained on the requirement to invite a representative of a participating agency that is likely to be responsible for providing or paying for transition services, with the consent of the parent(s) or student who has reached the age of majority, and training on the requirements of the excusal of a required Team member by a parent, with written input from the excused member given prior to the Team meeting.  By February 28, 2018, submit the results of a record review for Team meetings held for students 18 and older, conducted after corrective action, to determine if public agencies have been invited to Team meetings, when appropriate.  By February 28, 2018, submit the results of a second record review for Team meetings held for students across all grade levels, conducted after correction action, to determine if IEP Teams are appropriately documenting when a parent gives consent to excuse a required Team member and that the excused Team member is providing written input prior to the Team meeting.  For both record reviews, please include:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  \* Please note 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  11/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that when a student is identified with a disability on the autism spectrum, the Team does not specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing in the IEP. | | |
| **Description of Corrective Action:**  All special education liaisons will partake in professional development prior to the start of the school year to review regulation SE 18. A revised IEP team meeting note page will be created highlighting the need to discuss the impact of bullying by or towards the student with autism. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Pupil Services / Principals / Special ed liaisons | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  IEP team meeting notes will clearly indicate the nature of the bullying discussion | | |
| **Description of Internal Monitoring Procedures:**  The Director of Pupil Services will review all IEP meeting notes for students identified as being on the autism spectrum as they are submitted. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  For students on the autism spectrum, documentation of a discussion by the IEP Team is not sufficient to meet the requirement of this regulation. The IEP Team must specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment or teasing in the IEP.  Also, the district's description does not include re-convening the Team to address the skills needed to avoid and respond to bullying, harassment or teasing for the two records identified by the Department at the onsite review (AB, KB). The student names and corrective actions were listed on the Student Record Issues Worksheet provided to the district at the Corrective Action Plan Technical Assistance meeting. | | |
| **Department Order of Corrective Action:**  The district will train special education staff on the requirement that for students diagnosed on the autism spectrum, the skills and proficiencies needed to avoid and respond to bullying, harassment or teasing will be addressed and included in the IEP.  For the students identified by the Department, the district must reconvene the IEP Teams and include in the IEP the skills and proficiencies needed for the student to respond to bullying, harassment or teasing. | | |
| **Required Elements of Progress Report(s):**  Review the Department's guidance: Technical Assistance Advisory SPED 2011-2:Bullying Prevention and Intervention at http://www.doe.mass.edu/bullying/considerations-bully.html.  By October 4, 2017, provide evidence (agenda, attendance sheet with signature/role, training materials) that special education staff have been trained on the requirement to provide a student diagnosed on the autism spectrum with the skills and proficiencies needed to avoid and respond to bullying, harassment or teasing and provide for these skills and proficiencies within the IEP.  By October 4, 2017, for the two students identified by the Department, re-convene the Team and specifically address the skills needed to avoid and respond to bullying, harassment or teasing in the IEP. Submit a copy of the revised IEP or amendment and the Team Meeting Attendance Sheet (N3A) indicating that the IEP has reconvened.  By February 28, 2018, submit the results of a record review for Team meetings held for students diagnosed on the autism spectrum across all grade levels, conducted after corrective action, to determine if the skills and proficiencies the student needs to avoid and respond to bullying, harassment or teasing are incorporated into the student's IEP. Please include:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  \* Please note 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  11/10/2017  02/28/2018 | | |

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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:**  Student record review indicates that the district consistently provides a proposed IEP and placement to the parent/guardian immediately following the conclusion of the Team meeting. However, while a summary of the meeting is provided, it does not include information regarding the major goal areas associated with the special education services identified in the student's IEP. | | |
| **Description of Corrective Action:**  All special education liaisons will partake in professional development prior to the start of the school year to review regulation SE 18B. A revised IEP team meeting note page will be created highlighting the need to discuss the major goal areas the IEP will address. Copy of team meeting notes will be given to parents. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Pupil Services / Principals / Special Ed Liaisons | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  IEP meeting notes will have the major goal areas identified. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Pupil Services will review all team meeting notes as they are submitted with the IEPs for signature. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide evidence (agenda, attendance sheet with signature/role, training materials) that special education liaisons have been trained on providing the parent with a completed summary of the IEP Team meeting.  By February 28, 2018, submit the results of a record review across all grade levels for Team meetings held after training has been provided, for evidence in the record of the summary, including major goal areas. Please include:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  \* Please note 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  11/10/2017  02/28/2018 | | |

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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:**  Student record review and interviews indicate that special education documents, such as Individualized Education Programs, assessment summaries and progress reports, are not consistently translated into the primary language of the home when the primary language is other than English. | | |
| **Description of Corrective Action:**  All special education liaisons and guidance staff will partake in professional development prior to the start of the school year to review regulation SE 29. The home language survey will be presented to all staff and procedures developed to ensure the language requested is the one the IEP is translated into. If the parent does not translation that will need to be noted in the file. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Pupil l Services / Principals / Guidance staff / Special Ed Liaisons | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  The IEP will note the home language and if the parent wishes to have the IEP and other notices translated. | | |
| **Description of Internal Monitoring Procedures:**  Home language surveys indicating any language other than English will be sent to the Director of Pupil Services and Principal for review and translation services arranged. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 29 Communications are in English and primary language of home | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's description does not address translating documents contained within student records (IEP, progress reports, assessment summaries) or providing interpreters for the two students identified by the Department at the onsite review (BT, LS). The student names and corrective actions were listed on the Student Record Issues Worksheet provided to the district at the Corrective Action Plan Technical Assistance meeting. | | |
| **Department Order of Corrective Action:**  The district must translate documents contained within student records (IEP, progress reports, assessment summaries) for the two students identified by the Department, and reconvene their Team meetings with interpreters present. | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide evidence (agenda, attendance sheet with signature/role, training materials) that special education liaisons and guidance staff have been trained on the procedures that the IEP and other special education documents are translated into the primary language of the home.  By October 4, 2017, for the two records identified by the Department, translate documents contained within student record (IEP, progress reports, assessment summaries). Provide evidence that the district has reconvened the Team with an interpreter present, including Team Meeting Invitation (N3) and Team Meeting Attendance Sheet (N3A).  By February 28, 2018, submit the results of a record review across all grade levels for Team meetings held after training has been provided, for evidence that special education documents, such as IEPs, assessment summaries and progress reports, are translated into the primary language of the home when the primary language is other than English. Please include:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  \* Please note 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review with their role(s) and signature(s). | | |
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| COORDINATED PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  SE 37 Procedures for approved and unapproved out-of-district placements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and document review indicate that written contracts with out-of-district placements include a statement of nondiscrimination that is missing the protected category of gender identity. | | |
| **Description of Corrective Action:**  The standard contract has been adapted to include language as directed in SE 37. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Pupil Services / Administrative Assistant | | **Expected Date of Completion:**  10/01/2017 |
| **Evidence of Completion of the Corrective Action:**  All contracts will exhibit the desired wording | | |
| **Description of Internal Monitoring Procedures:**  Director of Pupil Services will review all contracts at the beginning of the year, and during the year if students are placed out of District. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 37 Procedures for approved and unapproved out-of-district placements | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide a copy of the written contract with out-of-district placements that contains a statement of nondiscrimination that includes the protected category of gender identity. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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

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| **Criterion & Topic:**  SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review, interviews, and document review indicate that when a suspension constitutes a change in placement of a student with disabilities, the district conducts a manifestation determination; however, the parent is not notified of the decision to take disciplinary action no later than the date of the decision, and the parent/guardian is not provided with written notice of procedural safeguards. | | |
| **Description of Corrective Action:**  All special education liaisons, Principals, Asst. Principals and Director of Pupil Services will partake in professional development prior to the start of the school year to review regulation SE 46. Revised procedures will be developed and agreed to by all parties involved in suspension. A checklist will be created and any cases where this criterion applies. | | |
| **Title/Role(s) of Responsible Persons:**  Principals / Director of Pupil Services / Assistant Principals | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  All cases where this criterion applies will include the checklist of steps and written evidence of notice. | | |
| **Description of Internal Monitoring Procedures:**  All cases where this criterion applies will be reviewed by the Principal, Asst Principal and Director of Pupil Services. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide evidence (agenda, attendance sheet with signature/role, training materials) that special education liaisons, Principals, Assistant Principals, and the Director of Pupil Services have been trained on the procedures for manifestation determination meetings, including the requirement that the parent is notified of the decision to take disciplinary action no later than the date of the decision and is provided with written notice of procedural safeguards. Also provide a copy of the checklist developed to monitor compliance.  By February 28, 2018, submit the results of a review of discipline records across all grade levels after training has been provided, for evidence that the parent is notified, subsequent to a manifestation determination, of the decision to take disciplinary action no later than the date of the decision and is provided with written notice of procedural safeguards. Please include:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  \* Please note 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  11/10/2017  02/28/2018 | | |

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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:**  Document review and interviews indicate that not all important information and documents being distributed to parents, including student handbooks, are translated into the major languages spoken by parents or guardians with limited English skills. | | |
| **Description of Corrective Action:**  The district shall develop a protocol to ensure that all important information and documents being distributed to parents are translated into the major languages spoken by parents. This protocol shall be completed and staff shall be trained in the protocol at the beginning of the 2017-2018 school year. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent and Director of Pupil Services | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  1) The completed protocol  2) Evidence of training - sign-in sheets and training materials  3) Translated documents | | |
| **Description of Internal Monitoring Procedures:**  The protocol shall include sending copies of the translated materials to the central office so that they may be posted on the website and stored in central office for reference. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide a copy of the protocol and evidence (agenda, attendance sheet with signature/role, training materials) that staff has been trained on the requirement that all important documents and information distributed to parents, including student handbooks, are translated into the major languages spoken by parents or guardians with limited English skills. Also, provide a list of all important information and documents that have been translated and distributed to parents and guardians with limited English skills to date. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates that the student handbook at Athol High School does not include procedures for accepting, investigating, and resolving complaints alleging discrimination or harassment and disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred.  Also, the Athol-Royalston Regional Middle School student handbook is missing the protected category of gender identity within the nondiscrimination statement. | | |
| **Description of Corrective Action:**  These changes shall be made to the handbooks over the summer and included in the handbooks for the 2017-2018 school year. | | |
| **Title/Role(s) of Responsible Persons:**  Principals & Director of Pupil Services | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  1) Revised student handbooks approved by the school committee in August 2017  2) Revised student handbooks distributed to faculty and students in September 2017 | | |
| **Description of Internal Monitoring Procedures:**  The Director of Pupil Services shall collect a sample of each student handbook for internal records | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, submit a copy or a web-link to the Athol High School handbook that includes procedures for accepting, investigating, and resolving complaints alleging discrimination or harassment and disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred and a copy or a web-link to the Athol-Royalston Regional Middle School handbook that contains the protected category of gender identity within the nondiscrimination statement. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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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:**  Document review indicates that the district has not updated the school handbooks or the Bullying Prevention Intervention Plan to conform with amendments to the Massachusetts anti-bullying law, which became effective July 1, 2013. Specifically, protections are not extended to students who are bullied by a member of the school staff and it does not make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. | | |
| **Description of Corrective Action:**  The Bullying Prevention Intervention Policy shall be amended to reflect the most current language. This new language will be included in all student handbooks and staff training materials. Staff will be trained on the new language in the beginning of the 2017-2018 school year | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent & Director of Pupil Services | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  1) Revised Policy  2) Revised Student and Staff Handbooks  3) Training sign-in sheets and training materials | | |
| **Description of Internal Monitoring Procedures:**  All sign-in sheets shall be cross referenced to ensure that all parties requiring bullying prevention training receive it. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, submit a copy of the school handbooks and Bullying Prevention Intervention Plan or web-links to these documents, demonstrating that they have been updated to include the amendments to the Massachusetts anti-bullying law, which became effective July 1, 2013; specifically, that protections are extended to students who are bullied by a member of the school staff and it makes clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report.  By October 4, 2017, provide evidence (agenda, attendance sheet with signature/role, training materials) that all staff have received training on the district's Bullying Prevention Intervention Plan. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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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:**  Document review indicates that the student discipline procedures for emergency removal do not address the requirement that the principal may not remove a student from school on an emergency basis for a disciplinary offense until adequate provisions have been made for the student's safety and transportation.  Also, the district's written Notice of Suspension is not sent to both the student and parent, and the district does not have procedures for a system of data collection to periodically review discipline data by selected populations. | | |
| **Description of Corrective Action:**  Student handbooks shall be amended to reflect the legal requirements for emergency removal. The letters for all disciplinary matters shall be changes to be addressed and issued to both the student and the parent. Finally, a protocol will be developed for accessing and analyzing the student discipline data housed in the student information system (X2). | | |
| **Title/Role(s) of Responsible Persons:**  Principal & Director of Pupil Services | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  1) Revised handbooks  2) Revised letters to students and parents  3) Protocol and evidence of use | | |
| **Description of Internal Monitoring Procedures:**  As part of the protocol, principals shall be required to submit their disciplinary analysis to the Director of Pupil Services on a regular basis. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide 1) a copy of the student discipline procedures that include emergency removal procedures addressing the requirement that the principal may not remove a student from school on an emergency basis for a disciplinary offense until adequate provisions have been made for the student's safety and transportation; 2) a copy of the revised written Notice of Suspension that documents that it is sent to both the student and parent; and 3) the protocol developed for a system of data collection to periodically review discipline data by selected populations. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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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:**  Document review and interviews indicate that the notice sent within five days of a student's tenth consecutive unexcused absence does not offer an extension of up to 14 days for the date and time of the exit interview and the notice is not addressed to both the student and the parent. | | |
| **Description of Corrective Action:**  This letter will be amended to include the extension period and send to both the student and parent. | | |
| **Title/Role(s) of Responsible Persons:**  AHS Principal & Director of Student Services | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Samples of the sent letters | | |
| **Description of Internal Monitoring Procedures:**  Copies of these letters shall be sent to the director of pupil services office for monitoring. | | |
| 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:** Partially Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  In addition to providing the Department with a revised copy of the notice to students 16 or over leaving school sent within five days of a student's tenth consecutive unexcused absence, the district must submit procedures outlining the process and person responsible for monitoring and sending notices sent home to both the student and parent. | | |
| **Department Order of Corrective Action:**  Develop procedures outlining the process and person responsible for monitoring days of absence and the sending of notices to parents and students. | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide a copy of the revised notice to students 16 or over sent within five days of a student's tenth consecutive unexcused absence that includes an offer to extend the exit interview for up to 14 days. Also, submit a copy of the procedures ensuring that both the student and the parent receive a copy of the notice and staff member responsible for monitoring compliance. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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

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| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the written restraint prevention and behavior support policy does not include procedures for the use of time-out. | | |
| **Description of Corrective Action:**  The written restraint procedure will be reviewed over the summer to include procedures for the use of time-out. These procedures will be distributed to all staff and all staff will be trained at the opening of the school year. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent & Director of Pupil Services | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  1) Revised procedure  2) Sign-in sheets and materials from training | | |
| **Description of Internal Monitoring Procedures:**  All restraint reports shall be sent to the Director of Pupil Services | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide a copy of the revised restraint prevention and behavior support procedures that include procedures for the use of time-out, and evidence (agenda, attendance sheet with signature/role, training materials) that all staff have been trained on the revised restraint prevention and behavior support procedures. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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

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| **Criterion & Topic:**  CR 18 Responsibilities of the school principal | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the district has not developed a Curriculum Accommodation Plan to meet the needs of diverse learners in the general education program, which includes: methods to assist the regular classroom teacher in analyzing and accommodating diverse learning styles of all children in the regular classroom; providing appropriate services and support within the general education program including, but not limited to, direct and systematic instruction in reading; provision of services to address the needs of children whose behavior may interfere with learning; provisions encouraging teacher mentoring and collaboration; and parental involvement. | | |
| **Description of Corrective Action:**  Over the summer, the administrative team will develop a Curriculum Accommodation Plan which will consist of a protocol for teachers to follow to ensure that they are meeting the needs of all learners. This protocol will be distributed to staff and staff will be trained on the protocol to open the school year. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Pupil Services & Principals | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  1) Revised Curriculum Accommodation Plan  2) Sign-in sheets and training materials | | |
| **Description of Internal Monitoring Procedures:**  When teachers refer students to the student support teams, they will be required to indicate to the principals how they attempted to follow the CAP prior to the referral. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide a copy of the revised Curriculum Accommodation Plan and evidence (agenda, attendance sheet with signature, training materials) that all staff have been trained on the district's Curriculum Accommodation Plan to meet the needs of diverse learners in the general education program, which includes: methods to assist the regular classroom teacher in analyzing and accommodating diverse learning styles of all children in the regular classroom; providing appropriate services and support within the general education program including, but not limited to, direct and systematic instruction in reading; provision of services to address the needs of children whose behavior may interfere with learning; provisions encouraging teacher mentoring and collaboration; and parental involvement. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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

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| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates that while individual teachers in the district review educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, religion, national origin and sexual orientation and provide appropriate activities, discussions and/or supplementary materials to provide balance and context for any such stereotypes depicted in educational materials, gender identity is not included as a protected category. | | |
| **Description of Corrective Action:**  The director of pupil services will develop a protocol for teacher to use to review educational materials. This protocol will be distributed to teachers and teachers will be trained in how to use it at the beginning of the school year. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Pupil Services | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  1) Curriculum review protocol  2) Sign-in sheets and training materials | | |
| **Description of Internal Monitoring Procedures:**  Protocol products shall be sent to the director of pupils services to monitor for accuracy and compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district will include the protected category of gender identity in the curriculum review procedures. | | |
| **Department Order of Corrective Action:**  In addition to training staff on the revised curriculum review procedures, the district will need to the add the protected category of gender identity to the curriculum review process. | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide a copy of the revised curriculum review procedures that include the protected category of gender identity, in addition to the categories of race, color, sex, religion, national origin and sexual orientation, and evidence (agenda, attendance sheet with signature/role, training materials) that all teaching staff have been trained on the district's revised curriculum review procedures. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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

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| **Criterion & Topic:**  ELE 4 Waiver Procedures | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that, at times, the district uses its waiver process to exit English learners (ELs) from the ELE program under the pretext that these students would benefit from instruction that targets their cognitive/academic needs. G.L. c. 71A states that a parent may request a program waiver only to allow the student a different ELE program than the state-mandated SEI program model. The current waiver policy and practice in the district is not consistent with the waiver requirements stated in G.L. c. 71A. | | |
| **Description of Corrective Action:**  Based on low benchmark scores in reading (including ACCESS), one student was exited from EL status in order to make beneficial change for a Wilson Reading program. This decision was taken because the student's needs seemed to be more related to literacy issues than L1 issues. The district misunderstood the waiver criteria and thought that this placement was allowable under GL c 71A. The guardians of the student, reading specialist, EL teachers and administration were all in agreement that this was a positive individually-targeted plan and signed what we believed were the appropriate forms. | | |
| **Title/Role(s) of Responsible Persons:**  EL teachers | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  The student was reinstated in the EL program in the fall of 2016. She has received EL instruction and taken the ACCESS test since that time. | | |
| **Description of Internal Monitoring Procedures:**  The problem is resolved, and there is a better understanding in the district as to the waiver process. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 4 Waiver Procedures | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, revise the district's waiver, opt-out and reclassification procedures. Provide training to all ELE staff to ensure that they are knowledgeable about the changes. Submit the training materials, sign-in sheets and agendas.  By October 4, 2017, submit evidence showing that student(s) who were on a waiver as a result of the district's former practice have access to ELE services. Should the parents prefer to decline services, submit signed and dated opt-out forms and the evidence of progress monitoring to ensure that these students are making adequate progress. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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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 the Castañeda's Three-Pronged Test completed by the district and student data showing the amount of ESL instruction ELs receive indicate that the district is not implementing its chosen ELE program with reliability and ELs do not receive the amount of ESL instruction the district determined necessary to make adequate progress in acquiring English and to have access to the content curricula taught in the district. The district also stated in the Castañeda's Three-Pronged Test that the implementation of the program with fidelity, as well as the ESL instruction provided to ELs, would depend on the grade level cluster, funding and staffing. The Department concludes that the district does not meet its obligation to provide the personnel necessary to effectively implement its chosen ELE program and therefore, its ELE program is not in compliance with G.L. c. 71A that requires districts to promote and support the rapid acquisition of English language proficiency so that English learners can participate meaningfully in the district's general education program. | | |
| **Description of Corrective Action:**  The district has doubled its instruction capacity by hiring an additional EL teacher, who is also licensed k-12. Both teachers have taught SEI to core teachers (one in the teacher and administrators' course and one in the licensure programs at higher ed institutes) and are qualified to support core teachers in modifying thier content for ELs. The next year students should receive more direct ESL instruction and teachers should receive more SEI support. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  teacher schedules | | |
| **Description of Internal Monitoring Procedures:**  The district has already hired the new teacher so the district has built its capacity to meet its obigation to implement an SEI/ ESL model. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, complete district information in the EL Roster form available in the Document Library by school for each EL in the district.  By October 4, 2017, provide a copy of the 2017-18 ESL teacher schedules for all grade levels district wide. All schedules should include the following for each block of time:  -Names of the EL students  -Grade level for each student  -English proficiency level for each student | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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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:**  Please see ELE 4. | | |
| **Description of Corrective Action:**  Please see response to ELE 4 | | |
| **Title/Role(s) of Responsible Persons:**  EL Teachers | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Please see response to ELE 4 | | |
| **Description of Internal Monitoring Procedures:**  Please see response to ELE 4 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Please see ELE 4. | | |
| **Progress Report Due Date(s):**  11/10/2017 | | |

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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:**  Document review and interviews indicate that information provided to students and their parents or guardians concerning extracurricular activities and school events is not consistently translated into the parents' preferred language. | | |
| **Description of Corrective Action:**  The district will develop a protocol for translating extra-curricular materials.  Home language surveys will be reviewed and updated if necessary to determine which families would benefit from translation.  Teachers, coaches and other stakeholders will | | |
| **Title/Role(s) of Responsible Persons:**  Principals  EL teachers as coaches | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  obvious markers (possibly in x2) that families require translation in the record system  completed protocol  evidence of teacher training - sign in and training materials  sample translated documents | | |
| **Description of Internal Monitoring Procedures:**  Principals (or other evaluators) will monitor ongoing translation as part of the teacher evaluation process under the family engagement piece. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 12 Equal Access to Nonacademic and Extracurricular Programs | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide a copy of the protocol developed for providing information to students and their parents or guardians concerning extracurricular activities and school events in the primary language of the home. Also provide evidence (agenda, attendance sheet with signature/role, training materials) that all staff have been trained on the procedures.  By February 28, 2018, provide a list of all notices for extracurricular activities and school events that have been translated into the major languages spoken by parents or guardians whose primary language is not English. | | |
| **Progress Report Due Date(s):**  11/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  ELE 14 Licensure Requirements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that not all district ESL teachers/tutors that provide students with ESL instruction in Kindergarten and first grade hold an appropriate license or current waiver issued by the Massachusetts Department of Elementary and Secondary Education. | | |
| **Description of Corrective Action:**  The EL teaching assistant will not be used in the future as the district has doubled its instruction capacity by hiring a new full time teacher who is licensed k-12. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Please check licensure of new hire: Rebecca Diagle. | | |
| **Description of Internal Monitoring Procedures:**  By hiring a new licensed teacher, the conflict is resolved. There is nothing to resolve. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 08/02/2017  **Correction Status:** Corrected | |
| **Basis for Decision:**  Teachers who are assigned to provide ESL instruction in the district are are appropriately licensed.  No further progress reporting is required for this criterion. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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

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| **Criterion & Topic:**  ELE 18 Records of ELL students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicates that EL student records do not consistently include copies of annual parent notification letters or evidence of follow-up monitoring for students who exit the ELE program. | | |
| **Description of Corrective Action:**  Annual notification letters will by filed (even when students are picked up into the EL program after the first month of school.) EL teachers will participate in more team level common planning time to get monitor forms completed rather than rely on passing papers about through mailboxes. | | |
| **Title/Role(s) of Responsible Persons:**  EL teachers | | **Expected Date of Completion:**  06/01/2018 |
| **Evidence of Completion of the Corrective Action:**  checklist in each EL folder which is initialed at time of spot checks. | | |
| **Description of Internal Monitoring Procedures:**  At the midterm of the year, EL teachers will spot check each other's EL files with a checklist relying on the extra set of eyes to be sure paperwork does not fall through the cracks. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 18 Records of ELL students | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district will provide training the staff responsible for monitoring the contents of EL records, create a tracking system, and identify the staff person responsible for monitoring compliance. | | |
| **Department Order of Corrective Action:**  The district will provide evidence of training to ELE teachers on monitoring the required contents of EL records, submit a copy of the tracking system, and name the staff person responsible for monitoring compliance. | | |
| **Required Elements of Progress Report(s):**  By October 4, 2017, provide evidence (agenda, attendance sheet with signature/role, training materials) that ELE teachers have been trained on monitoring the required contents of EL student records including annual parent notification letters and evidence of follow-up monitoring for students who exit the ELE program. In addition, submit the tracking system and person responsible for monitoring compliance.  By February 28, 2018, submit the results of a record review across all EL student records held after training has been provided, for evidence that annual parent notification letters and evidence of follow-up monitoring for students who exit the ELE program are included in student records. Please include:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  \* Please note 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  11/10/2017  02/28/2018 | | |