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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: Dudley-Charlton Reg

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 09/13/2017.

**Mandatory One-Year Compliance Date:** **09/13/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 25 | Parental consent | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 24 | Curriculum review | Not Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |
| ELE 4 | Waiver Procedures | Partially Implemented |
| ELE 6 | Program Exit and Readiness | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |

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| **Criterion & Topic:** SE 20 Least restrictive program selected | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that if a student is removed from the general education classroom at any time, IEP Teams do not consistently state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. |
| **Description of Corrective Action:** The district will consistently state why the removal from the general education classroom is critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and service, could not be achieved satisfactorily. |
| **Title/Role(s) of Responsible Persons:**Director of Special Education, School Team Chairs | **Expected Date of Completion:**06/12/2018 |
| **Evidence of Completion of the Corrective Action:**1. Training will occur with all special education and related service staff on this issue as evidenced by agenda and sign-in sheets from each school by December 31, 20172. Samples of Non-participation Justification statement on IEPs will be reviewed monthly by team chairs showing 100% compliance by June 12, 2018. |
| **Description of Internal Monitoring Procedures:** 1. Director will check random IEPs for valid Nonparticipation Justification statements monthly.2. Team Chairs will notify the Director of a staff who may need additional training in this area.3. Director will report annually to the Superintendent on the outcome of these reviews. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved **Status Date:** 10/26/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 5, 2018, submit evidence of training of appropriate staff to ensure that if a student is removed from the general education classroom at any time, IEP Teams consistently state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature. By January 5, 2018, submit a description of the district's internal oversight and tracking system with periodic reviews, along with the name/role of the designated person responsible for oversight. By April 6, 2018, submit the results of a review of student records across all levels to ensure that if a student is removed from the general education classroom at any time, IEP Teams consistently state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Include the number of records reviewed; the number of records in compliance; and for any records not in compliance, determine the root cause; and specific corrective actions taken to remedy the non-compliance.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 01/05/201804/06/2018 |

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| **Criterion & Topic:** SE 25 Parental consent | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that when parent consent is required and the parent fails or refuses to participate, the district does not consistently attempt to secure consent through multiple attempts using a variety of documented methods. |
| **Description of Corrective Action:** The district will consistently attempt to secure consent through multiple attempts using a variety of documented efforts when a parent fails or refuses to participate. |
| **Title/Role(s) of Responsible Persons:**Director of Special Education, School Team Chairs | **Expected Date of Completion:**06/12/2018 |
| **Evidence of Completion of the Corrective Action:**1. Training will occur with all special education and related service staff on this issue as evidenced by agenda and sign-in sheets from each school by December 31, 2017.2. A flowchart outlining the timeline for each variety of attempt will be the focus of the training. 3. Randomly checked files with consents will be reviewed by Team Chairs and 100% compliance will be achieved by 6/12/2018 |
| **Description of Internal Monitoring Procedures:** 1. Director will check consent timelines and status of approvals and/or attempts to secure approval as submitted by team chairs monthly.2. Team Chairs will notify the Director of a staff who may need additional training in this area.3. Director will report annually to the Superintendent on the outcome of these reviews. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 25 Parental consent | **Corrective Action Plan Status:** Approved **Status Date:** 10/26/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 5, 2018, submit evidence of training of appropriate staff to ensure when parent consent is required and the parent fails or refuses to participate, the district consistently attempts to secure consent through multiple attempts using a variety of documented methods. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature. By January 5, 2018, submit a description of the district's internal oversight and tracking system with periodic reviews, along with the name/role of the designated person responsible for oversight. By April 6, 2018, submit the results of a review of student records to ensure that when parent consent is required and the parent fails or refuses to participate, the district consistently attempts to secure consent through multiple attempts using a variety of documented methods. Include the number of records reviewed; the number of records in compliance; and for any records not in compliance, determine the root cause; and specific corrective actions taken to remedy the non-compliance.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 01/05/201804/06/2018 |

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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 an employer 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, this statement is missing the protected category of gender identity. |
| **Description of Corrective Action:** The protected category of gender identity has been added to the employer recruiting statement. |
| **Title/Role(s) of Responsible Persons:**Lorinda Allen, Director of Curriculum, Instruction & Student Assessment | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**The uploaded employer recruiting statement is proof of completion of corrective action. Copy of e-mail showing distribution to all school administrators is included as evidence. |
| **Description of Internal Monitoring Procedures:** 1. The updated employer recruiting statement will be reviewed annually be the administrative council, which includes the District Superintendent. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved **Status Date:** 10/26/2017 **Correction Status:** Corrected |
| **Basis for Decision:** The district submitted evidence (see additional documents upload), indicating the protected category of gender identity has been added to the employer recruiting statement. The district submitted evidence of dissemination of the updated document to all staff. Additionally, the district provided evidence of ongoing monitoring to ensure the employer recruiting statement will be reviewed annually. |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**  |
| **Progress Report Due Date(s):**  |

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| **Criterion & Topic:** CR 24 Curriculum review | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district does not ensure that individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. |
| **Description of Corrective Action:** The District curriculum coordinator, in conjunction with principals, will present to the Superintendent a plan to assure for regular review by teachers of all materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation; and that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such materials by February 2, 2018. These plans will also include training for teachers on how they should review materials that are unique to their classroom in the same manner. Review cycles will be completed by 6/12/2018. |
| **Title/Role(s) of Responsible Persons:**Lorinda Allen, Director of Curriculum, Instruction & Student Assessment | **Expected Date of Completion:**06/12/2018 |
| **Evidence of Completion of the Corrective Action:**Plans for the review cycle and teacher training will be submitted to DESE, along with attendance and agendas from teacher trainings. |
| **Description of Internal Monitoring Procedures:** 1. Principals and Director of Curriculum, Instruction & Student Assessment shall report to the Superintendent annually on the outcome of these reviews. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Approved **Status Date:** 10/26/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By March 1, 2018, provide a description the district's newly developed procedures and samples of the tools used to ensure staff review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation.By March 1, 2018, submit description of the district's internal oversight and tracking system with periodic reviews, along with the name/role of the designated person.By April 6, 2018, provide evidence to of training, including agenda, signed attendance sheets and materials, to all staff on newly developed procedures. |
| **Progress Report Due Date(s):** 03/01/201804/06/2018 |

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| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district does not annually evaluate all aspects of its K-12 programming 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:** 1. A voluntary District equity team will be established by Dec. 31, 2017. 2. Coaches, Advisors, and After-School Teachers; in conjunction with building principals, will prepare reflection sheets on an annual basis to review student participation data for their program and/or club, sport or activity. The equity team will review this data for areas of concern and/or trends. 3. The outcome of this data review will be reported to the Superintendent annually. |
| **Title/Role(s) of Responsible Persons:**Lorinda Allen, Director of Curriculum, Instruction & Student Assessment | **Expected Date of Completion:**06/12/2018 |
| **Evidence of Completion of the Corrective Action:**1. Equity team attendance list and agenda will be provided to DESE along with the annual review checklist. 2. Samples of review checklists by coaches, advisors, etc. will be provided to DESE |
| **Description of Internal Monitoring Procedures:** Findings of the equity team data review will be shared annual at the Administrative Retreat and with the Superintendent to discuss any need for changes. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/26/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district proposed establishing an equity team comprised of coaches, advisors, after-school teachers and principals, to reflect on student participation in their programs, clubs, sports and/or activities. The district is however, also required to evaluate all K-12 academic programs to ensure that all protected categories have equal access to all programs. The district proposed collecting data on student participation based on protected categories as a measure of accessibility. This self-assessment should include other tools to ensure equal access for all students regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status. These tools may address, but are not limited to; review of athletic and curricular policies, entrance criteria for remedial or advanced classes, supports for students taking advanced classes, translations of documents promoting school programs, review of facilities, and other activities that ensure equal access to all K-12 education programs. |
| **Department Order of Corrective Action:**Develop procedures and tools to conduct an annual institutional self-evaluation to evaluate all aspects of the district's K-12 programming 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 academics, athletics and other extracurricular activities.Submit the results of the district's institutional self-evaluation utilizing these newly developed procedures; include recommendations and action steps, if necessary, for any improvements needed based upon evaluation results. |
| **Required Elements of Progress Report(s):** By January 5, 2018, provide a description the district's newly developed procedures and samples of the tools used for the purpose of institutional self-evaluation to evaluate all aspects of the district's K-12 programming 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 academics, athletics and other extracurricular activities.By June 15, 2018, submit the results of the district's institutional self-evaluation utilizing these newly developed procedures; include recommendations and action steps, if necessary, for any improvements needed based upon evaluation results. |
| **Progress Report Due Date(s):** 01/05/201806/15/2018 |

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| **Criterion & Topic:** ELE 4 Waiver Procedures | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district used the waiver process to exit an English learner (EL) with disabilities from the ELE program although G.L. c. 71A requires a waiver to be granted for students with special needs only when the educational staff and the principal conclude that an alternate ELE program, namely Transitional Bilingual Education (TBE), would be better for the student's educational progress and rapid acquisition of English. 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:** Professional Development on waiver procedures will be conducted at the district and building levels in order train administration and building ELL liaisons on correct waiver procedures. The first professional development installment was presented at the district administrative summer retreat held at Nichols College in August. The second was for building liaisons and was held in Sept. in order to start the school year off with accurate and updated information. Periodic checks will be held during the first quarter to ensure compliance. |
| **Title/Role(s) of Responsible Persons:**Barbara Marderosian, ELL Program Coordinator | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**The training power point, meeting agenda/minutes, and corresponding forms serve as evidence of completion. |
| **Description of Internal Monitoring Procedures:** The ELL liaisons and ELL Program coordinator will monitor files closely during first quarter intakes and periodically as needed throughout the school year. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 4 Waiver Procedures | **Corrective Action Plan Status:** Approved **Status Date:** 10/26/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 5, 2018, submit evidence of training including materials, agenda/minutes, and attendance sheets to ensure appropriate waiver procedures are utilized. |
| **Progress Report Due Date(s):** 01/05/2018 |

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| **Criterion & Topic:** ELE 6 Program Exit and Readiness | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that some students have been reclassified as Former English Learners (FELs) at the WIDA proficiency level as low as 3.3. ELs at this proficiency level require significant support to participate meaningfully in all aspects of the district's general education program and therefore should not be considered for reclassification. The district's current reclassification procedures are not in compliance with 603 CMR 14.02 that requires districts to establish exit criteria in accordance with the Department's guidelines. |
| **Description of Corrective Action:** Professional Development has been conducted at the building and district level to review the Nov. 2016 Guidance Document that outlines reclassification (table 6). District FLEP policy has been changed consider reading and writing proficiency scores discretely, not as composite literacy scores. The new ACCESS 2.0 and cut scores have also been reviewed and at both district and building levels and at the New Teacher Institute. |
| **Title/Role(s) of Responsible Persons:**Barbara Marderosian | **Expected Date of Completion:**06/01/2017 |
| **Evidence of Completion of the Corrective Action:**The power point, meeting agendas/minutes, updated district FLEP policy, and corresponding DESE support documents will serve as evidence. |
| **Description of Internal Monitoring Procedures:** All FLEP files will be reviewed by the district program coordinator during the last quarter of the school year and checked for compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved **Status Date:** 10/26/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 5, 2018, submit evidence of the district's revised reclassification policies and procedures. By January 5, 2018, submit evidence of training to all staff on updated policies and procedures including training materials, attendance sheets and agendas. By March 1, 2018, submit FEL Roster (available in the Document Library) to provide information for all the ELs in your district who have been reclassified in the last school year. |
| **Progress Report Due Date(s):** 01/05/201803/01/2018 |

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| **Criterion & Topic:** ELE 17 Program Evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents indicated that the district conducts meetings with the ELE team to discuss programmatic needs and developments in the field to ensure EL success; however, the district does not have a comprehensive process to evaluate the effectiveness of its ELE programming in developing students' English language skills and increasing their ability to participate meaningfully in the educational program. Please see http://www.doe.mass.edu/ell/ProgramEvaluation.pdf. |
| **Description of Corrective Action:** The ELL Program Coordinator will a will establish a team of stakeholders in order to conduct a program evaluation to be shared at the district, building, and school committee level. The purpose of the program evaluation will be in order to analyze data, program strengths/weaknesses, and set strategic goals. |
| **Title/Role(s) of Responsible Persons:**Barbara Marderosian | **Expected Date of Completion:**02/02/2018 |
| **Evidence of Completion of the Corrective Action:**A completed "Program Evaluation" document from OELAA forms and corresponding powerpoint and meeting agenda/minutes will serve as evidence. |
| **Description of Internal Monitoring Procedures:** After initial goals are established in February, progress assessing to what extent they are met and reflections thereof will occur annually during district ELL liaison meetings. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 10/26/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By April 6, 2018, 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. By April 6, 2018, please provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation. By April 6, 2018, 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 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):** 04/06/2018 |