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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: Eastham

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 10/10/2017.

**Mandatory One-Year Compliance Date:** **10/10/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |
| ELE 3 | Initial Identification | Partially Implemented |
| ELE 14 | Licensure Requirements | Partially Implemented |
| ELE 16 | Equitable Facilities | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |

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| **Criterion & Topic:** SE 55 Special education facilities and classrooms | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Observations indicated that two special education instructional spaces in the Eastham Elementary School are not given the same priority as general education programs in the allocation of instructional space. Specifically, each instructional space is used as a resource room to provide academic support and specialized instruction to eligible students outside of the general education classroom. One resource room is a former office which is apart from the other classrooms and can only be accessed through the main office. The other resource room is used by both a special education teacher and an English learner education teacher who, at times, share the space during the same instructional block; although the district has provided portable dividers to minimize visual distractions, the space presents audible distractions and lacks confidentiality. |
| **Description of Corrective Action:** The resource room which was in the main office is no longer used to deliver instruction. It is once again being used as an office for staff. |
| **Title/Role(s) of Responsible Persons:**Dr. Ann Caretti, Director of Student Services | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**This change was verified by Director of Student Services |
| **Description of Internal Monitoring Procedures:** This change was verified by Director of Student Services |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Partially Approved **Status Date:** 11/20/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district reports in the Corrective Action Plan that the resource room located in the main office is no longer used for instructional space. Also, the district reports that the other resource room which is a shared space with English learner education students is not used by both services within the same instructional block. |
| **Department Order of Corrective Action:**The Department will conduct an on-site visit by a representative to verify that the room located in the main office is no longer used as a resource room. |
| **Required Elements of Progress Report(s):** By March 8, 2018, the Department will conduct an on-site visit to verify that the room located in the office is no longer used as a resource room. |
| **Progress Report Due Date(s):** 03/08/2018 |

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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 the Nondiscrimination Policy Statement in the district's student/family handbook indicated that homelessness as a protected category is not included. |
| **Description of Corrective Action:** Please refer to page 63 of the Parent/Student Handbook. |
| **Title/Role(s) of Responsible Persons:**Dr. Ann Caretti | **Expected Date of Completion:**10/31/2017 |
| **Evidence of Completion of the Corrective Action:**Please refer to page 63 of the Parent/Student Handbook. |
| **Description of Internal Monitoring Procedures:** The Parent/Student Handbook will be reviewed annually |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved **Status Date:** 11/20/2017 **Correction Status:** Corrected |
| **Basis for Decision:** The district provided the updated Parent/Student Handbook 2017-2018. Based on the review of the Nondiscrimination Policy Statement in the Parent/Student Handbook 2017-2018, homelessness has been included as a protected category. |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**  |
| **Progress Report Due Date(s):**  |

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| **Criterion & Topic:** CR 8 Accessibility of extracurricular activities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of the district's policy regarding accessibility of extracurricular activities indicated that homelessness as a protected category is not included. |
| **Description of Corrective Action:** Please see page 67 in the Handbook. (Link to be emailed) |
| **Title/Role(s) of Responsible Persons:**Dr. Ann Caretti, Director of Student Services | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**Please see page 67 in the Handbook. |
| **Description of Internal Monitoring Procedures:** The Handbook will be reviewed annually. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved **Status Date:** 11/20/2017 **Correction Status:** Corrected |
| **Basis for Decision:** The district provided the updated Parent/Student Handbook 2017-2018. Based on the review of the district's policy regarding accessibility of extracurricular activities in the Parent/Student Handbook 2017-2018, homelessness has been included as a protected category. |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**  |
| **Progress Report Due Date(s):**  |

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| **Criterion & Topic:** CR 10B Bullying Intervention and Prevention | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of the district's Bullying Prevention Policy and Bullying Prevention and Intervention Plan, as posted on its website, indicated that information regarding protections to students who are bullied by a member of the school staff is not included. |
| **Description of Corrective Action:** Please refer to page 19 of the Parent/Student Handbook |
| **Title/Role(s) of Responsible Persons:**Dr. Ann Caretti, Director of Student Services | **Expected Date of Completion:**10/31/2017 |
| **Evidence of Completion of the Corrective Action:**Please refer to page 19 of the Parent/Student Handbook |
| **Description of Internal Monitoring Procedures:** The Parent/Student Handbook will be reviewed annually. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved **Status Date:** 11/20/2017 **Correction Status:** Corrected |
| **Basis for Decision:** The district provided the updated Parent/Student Handbook 2017-2018 posted on the district's website. Based on the review of the Bullying Prevention Policy and Bullying Prevention and Intervention Plan, information regarding protection to students who are bullied by a member of the school staff has been included. |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**  |
| **Progress Report Due Date(s):**  |

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| **Criterion & Topic:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that the district does not notify parents and students of the name(s) and contact information of the person(s) designated to coordinate compliance under Title IX and Section 504. |
| **Description of Corrective Action:** Please see page 71 in the Handbook. |
| **Title/Role(s) of Responsible Persons:**Dr. Ann Caretti, Director of Student Services | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**Please see page 71 in the Handbook. |
| **Description of Internal Monitoring Procedures:** Handbook to be reviewed annually. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved **Status Date:** 11/20/2017 **Correction Status:** Corrected |
| **Basis for Decision:** The district provided evidence of correction for the finding in the Parent/Student Handbook 2017-2018. Based on the review of documents in the Parent/Student Handbook 2017-2018, the district does notify parents and students of the name(s) and contact information of the person(s) designated to coordinate compliance under Title IX and Section 504. |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**  |
| **Progress Report Due Date(s):**  |

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| **Criterion & Topic:** CR 23 Comparability of facilities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** See SE 55. |
| **Description of Corrective Action:** The room in question is still being shared by SN teacher and an ELL teacher, however, at no time are they in the room together as mentioned in the SE55 document. The teachers have purposely set their schedules to avoid using the room for students at the same time. |
| **Title/Role(s) of Responsible Persons:**Dr. Ann Caretti, Director of Student Services | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**The room in question is still being shared by SN teacher and an ELL teacher, however, at no time are they in the room together as mentioned in the SE55 document. The teachers have purposely set their schedules to avoid using the room for students at the same time. |
| **Description of Internal Monitoring Procedures:** Director of Student Services has reviewed the schedules. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 23 Comparability of facilities | **Corrective Action Plan Status:** Partially Approved **Status Date:** 11/20/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district asserted that the shared instructional space referenced in the finding of SE 55 is still used by both special education and English learner education. However, the space is not shared during the same instructional block at any time during the week. |
| **Department Order of Corrective Action:**The district will provide to the Department a copy of the weekly schedule for the shared space. The Department will conduct an on-site visit by a representative to verify the space is not used by both groups during the same instructional block. |
| **Required Elements of Progress Report(s):** By December 15, 2017 provide a schedule showing the instructional blocks during which special education and English learner education use the room in question. By March 8, 2018, the Department will conduct an on-site visit to verify shared space is not used by both groups during the same instructional block. |
| **Progress Report Due Date(s):** 12/15/201703/08/2018 |

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| **Criterion & Topic:** CR 24 Curriculum review | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and interviews indicated that the district has created a form to assist in the review of curriculum materials; however, teachers have not been provided with guidance or training on reviewing 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:** Asst. Superintendent has researched various curriculum review training materials. Training will occur first to the Curriculum and Assessment Committee and then to all teachers across the District. |
| **Title/Role(s) of Responsible Persons:**Dr. Ann Caretti, Director of Student Services | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**Training outlines and materials along with date training occurred. |
| **Description of Internal Monitoring Procedures:** This process will be reviewed annually. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Approved **Status Date:** 11/20/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 15, 2017, submit evidence of staff training including materials, agenda and signed attendance sheets. |
| **Progress Report Due Date(s):** 12/15/2017 |

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| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and interviews indicated that the district does not evaluate all aspects of its K-12 programs annually to ensure that all students have equal access to all programs, including athletics and other extracurricular activities. |
| **Description of Corrective Action:** Director of Student Services along with the Principal will send a survey to the staff at the school and the parents to ensure equal access to all activities associated with the school. |
| **Title/Role(s) of Responsible Persons:**Dr. Ann Caretti, Director of Student Services | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**Director of Student Services along with the Principal will send a survey to the staff at the school and the parents to ensure equal access to all activities associated with the school. This will be completed by December 1st. |
| **Description of Internal Monitoring Procedures:** Data will be collected and analyzed during December and January, 2018 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved **Status Date:** 11/20/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district submitted a plan of action, however, the district has not yet developed the survey tools that will be implemented to ensure that all students have equal access to programs. |
| **Department Order of Corrective Action:**Submit the tools that have been developed to solicit feedback on student access to all programs, extracurriculars, and athletics. Submit a summary of the evaluation results, including recommendations for actions as a result of responses. |
| **Required Elements of Progress Report(s):** By December 15, 2017, submit tools that will be used to gain feedback from students, faculty, and parents to determine that student have equal access to all programs, including athletics and other extracurricular activities. By June 29, 2018, submit a report and analysis of the results of the surveys. Indicated any changes that will be made as a result of the responses and evaluation. |
| **Progress Report Due Date(s):** 12/15/201706/29/2018 |

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| **Criterion & Topic:** ELE 3 Initial Identification | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of the "Implementation Practices" document submitted by the district confirmed inaccurate information regarding the initial identification process such as classifying a student as an English learner (EL) if there is another language on the Home Language Survey (HLS) or defining ACCESS for ELs as a screening test. District documentation also indicated that the district has not established English language proficiency screening procedures to determine each potential EL preschool student's English language proficiency level. The district's current implementation practices described in the documentation are not in compliance with 603 CMR 14.02(1) that requires districts to establish procedures in accordance with the Department's guidelines. |
| **Description of Corrective Action:** Implementation practices were revised and updated to meet criteria. |
| **Title/Role(s) of Responsible Persons:**Keith Gauley, Assistant SuperintendentCorina DaSilva, ELE Coordinator | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**See Attached (Additional Documents) |
| **Description of Internal Monitoring Procedures:** Implementation practices will be reviewed annually by ESL Staff and Coordinator. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 3 Initial Identification | **Corrective Action Plan Status:** Approved **Status Date:** 11/20/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Please provide information regarding the training opportunities provided to the staff involved in the initial identification process to keep them informed about the revised policy and procedures. Please include meeting dates, minutes and sign-in sheets. |
| **Progress Report Due Date(s):** 12/15/2017 |

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| **Criterion & Topic:** ELE 14 Licensure Requirements | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and Educator Licensure and Renewal (ELAR) indicated that not all district ESL teachers who provide students with ESL instruction hold an ESL license or a current waiver issued by the Massachusetts Department of Elementary and Secondary Education. |
| **Description of Corrective Action:** Current ESL Staff is pursuing licensure. Current staff is employed on an at will basis and job will be posted if current staff is unable to obtain licensure. |
| **Title/Role(s) of Responsible Persons:**Keith Gauley, Assistant SuperintendentCorina DaSilva, ELE Coordinator | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**Certificate of licensure will be provided once obtained. |
| **Description of Internal Monitoring Procedures:** Hiring practices will continue to seek licensed staff. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Approved **Status Date:** 11/20/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** 1- By 12/15/2017, provide information on the support the district will provide to help the uncertified educator(s) earn the appropriate licensure and a timeline that shows the educator(s)'s efforts towards earning his/her ESL license.2- By 12/15/2017, provide a report of the program director's monitoring of the educator(s)'s progress toward certification throughout 2017-2018 school year until licensure is secured, and a copy of any job posting and application information that may remain on file in the event the currently uncertified educator(s) fails to acquire proper certification by Summer 2018.3- By 6/29/2018, provide evidence of the licensure of the current ESL teacher(s). |
| **Progress Report Due Date(s):** 12/15/201706/29/2018 |

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| **Criterion & Topic:** ELE 16 Equitable Facilities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** See SE 55. |
| **Description of Corrective Action:** The room in question is still being shared by SN teacher and an ELL teacher, however, at no time are they in the room together as mentioned in the SE55 document. The teachers have purposely set their schedules to avoid using the room for students at the same time. |
| **Title/Role(s) of Responsible Persons:**Keith Gauley, Assistant SuperintendentCorina DaSilva, ELE Coordinator | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**The room in question is still being shared by SN teacher and an ELL teacher, however, at no time are they in the room together as mentioned in the SE55 document. The teachers have purposely set their schedules to avoid using the room for students at the same time. |
| **Description of Internal Monitoring Procedures:** Verified by the Director of Student Services. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 16 Equitable Facilities | **Corrective Action Plan Status:** Partially Approved **Status Date:** 11/20/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district asserted that the instructional space referenced in the finding of SE 55 is still used by both special education and English learner education. However, the space is not shared during the same instructional block at any time during the week. |
| **Department Order of Corrective Action:**The district will provide to the Department a copy of the weekly schedule for the shared space. The Department will conduct an on-site visit to verify that the shared space is not used by both groups during the same instructional block. |
| **Required Elements of Progress Report(s):** By December 15, 2017, the district will provide to the Department a copy of the weekly schedule showing the instructional blocks during which special education and English learner education use the room in question. By March 8, 2018, the Department will conduct an on-site visit to verify that the shared space is not used by both groups during the same instructional block. |
| **Progress Report Due Date(s):** 12/15/201703/08/2018 |

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| **Criterion & Topic:** ELE 17 Program Evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents indicated 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 HYPERLINK "http://www.doe.mass.edu/ell/ProgramEvaluation.pdf" http://www.doe.mass.edu/ell/ProgramEvaluation.pdf . |
| **Description of Corrective Action:** Program evaluation procedure has been rewritten based upon feedback. |
| **Title/Role(s) of Responsible Persons:**Keith Gauley, Assistant SuperintendentCorina DaSilva, ELE Coordinator | **Expected Date of Completion:**11/01/2017 |
| **Evidence of Completion of the Corrective Action:**See attached. |
| **Description of Internal Monitoring Procedures:** Program Evaluation procedures will be reviewed annually in conjunction with the evaluation process. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 17 Program Evaluation | **Corrective Action Plan Status:** Partially Approved **Status Date:** 11/20/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district has not submitted any detail or a timeline to show how the program evaluation process has been planned. |
| **Department Order of Corrective Action:**See the Required Documents of Progress Reports. |
| **Required Elements of Progress Report(s):** 1- By 12/15/2017, provide the following information:-names and the assignments of the staff members who will be involved in the district's program evaluation:-qualitative and quantitative data that will be analyzed;-meeting dates and agendas including a timeline for the process.2- By 6/29/2018, 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. 3- Please provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation. 4- 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):** 12/15/201706/29/2018 |