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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: Greenfield

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 09/28/2017.

**Mandatory One-Year Compliance Date:** **09/28/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 37 | Procedures for approved and unapproved out-of-district placements | Partially Implemented |
| SE 51 | Appropriate special education teacher licensure | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 14 | Counseling and counseling materials free from bias and stereotypes | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Not Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| ELE 3 | Initial Identification | 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 8 | Declining Entry to a Program | Not Implemented |
| ELE 10 | Parental Notification | Partially Implemented |
| ELE 11 | Equal Access to Academic Programs and Services | Partially Implemented |
| ELE 12 | Equal Access to Nonacademic and Extracurricular Programs | Partially Implemented |
| ELE 13 | Follow-up Support | Not Implemented |
| ELE 16 | Equitable Facilities | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |
| ELE 18 | Records of ELL students | Partially Implemented |

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

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and interviews indicated that the district does not consistently provide the parent(s) with two copies of the proposed IEP and proposed placement along with the required notice immediately following the Team meeting. | | |
| **Description of Corrective Action:**  The Greenfield Schools provided a 6 hour IEP training for all special education staff on August 23, 2017 with Sharon Jones, a Professional Staff Developer, from the Collaborative for Educational Services. The requirement of parents/ guardians to receive a copy of the proposed IEP along with placement and procedural notice immediately following the meeting was reviewed. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne M. Ellis, Director of Pupil Services | | **Expected Date of Completion:**  10/15/2017 |
| **Evidence of Completion of the Corrective Action:**  Following training all special education staff are expected to take detailed IEP summary & placement notes, provide a signed copy to the parent/guardian along with a copy of the attendance sheet with parent/guardian initials indicating that Parents Rights were provided. | | |
| **Description of Internal Monitoring Procedures:**  All Special Education Staff will adhere to an IEP Checklist document that provides a visual reminder of all required components to complete within the TEAM process.  The Assistant Directors of Student Services as well as the Special Education Office Administrative Assistant review submitted IEPS from all district schools, on a weekly basis, for completion prior to sending out to parent/guardians. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **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 the agenda, signed attendance sheet, name and role of presenter, and training materials, on the requirement to provide the parent with two (2) copies of the IEP and Placement page immediately following development of the IEP.  By April 13, 2018, submit the results of a review of student records across all schools, whose Team meetings were held after corrective action, to confirm that the district is providing parents with two copies of the proposed IEP and placement along with the required notice immediately following the Team meeting. Include the number of student records reviewed, the number of records in compliance, and for any records not in compliance, determine the root cause(s) of the non-compliance and the district's plan to remedy the non-compliance.  \* Please note when conducting internal monitoring the school 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):**  12/15/2017  04/13/2018 | | |

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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:**  Document review indicated that the written contracts for out-of-district placements do not include a statement of nondiscrimination to include race, color, religion, sexual orientation, gender identity, national origin, or disabilities. | | |
| **Description of Corrective Action:**  Through the Coordinated Review Process it was noted that the Greenfield Public Schools out-of-district placements did not include a required statement of non-discrimination. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne M. Ellis, Director of Pupil Services | | **Expected Date of Completion:**  08/30/2017 |
| **Evidence of Completion of the Corrective Action:**  For the 2017-2018 school year all Greenfield Public Schools out of district contracts include the required statements of non-discrimination. This language has been added to our contract template and will be reflected in all future school contracts executed. | | |
| **Description of Internal Monitoring Procedures:**  As this citation was the result of an omission, that has been corrected, an internal monitoring process is not needed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 37 Procedures for approved and unapproved out-of-district placements | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, submit a copy of the district's written contract for out-of-district placements that includes a statement of nondiscrimination that includes race, color, religion, sexual orientation, gender identity, national origin, and disabilities. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  SE 51 Appropriate special education teacher licensure | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that one special education teacher in the district who designs and provides direct special education services described in IEPs is not appropriately licensed. | | |
| **Description of Corrective Action:**  The district has hired a new special educator for the elementary Transition program. She replaces a licensed teacher the district hired last year who abruptly left the district within 90 days. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne M. Ellis  Nancy Putnam | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Although the district has hired a licensed special educator this individual is licensed in the State of Rhode Island which does not have reciprocity with Massachusetts. The district applied for and has obtained a waiver while this educator pursues meeting her MA State requirements for license over the course of this school year. | | |
| **Description of Internal Monitoring Procedures:**  The district has robust hiring practices in place that promote equal opportunity employment for qualified applicants that include procedures for verifying credentials, transcripts, references, and license status. There is a critical shortage for filling special education positions in our region which poses challenges in filling high demand positions and unexpected vacancies. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 51 Appropriate special education teacher licensure | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, submit a copy of the waiver issued by the Department for the special education teacher who was hired for the elementary transition program. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Observations and interviews revealed the following facilities issues:  Greenfield High School: The Transitions Program occupies an entire wing of the building, comprising nine rooms clustered together, completely separate from the other classrooms in the school. The location of the program does not maximize the inclusion of the students with disabilities into the life of the school.  Greenfield Middle School: Two special education classrooms are isolated. The Transitions Program is located in Room 102, with Room 103 serving as a "cool down" room for the program. There are no other classrooms in that wing of the building. The ACES program is located on the ground floor of the building, at the end of a ramp, with an adjacent "cool down" room. There are no other classrooms nearby. The locations of these two programs do not maximize the inclusion of the students into the life of the school.  Discovery School at Four Corners: Two special education classrooms, the ACES program and a resource room, are located in the new addition of the school, with no general education classrooms. As a result, the location of these classes does not maximize the inclusion of the students into the life of the school. In addition, one of the rooms in this location has been divided into smaller spaces for the resource room, ELE classroom, and Title 1 classrooms, using bookcases, file cabinets and a wall divider. When the classes are meeting at the same time, noise is an issue. Lastly, a sign identifies one classroom as ACES. | | |
| **Description of Corrective Action:**  As previously documented in the response to the draft CPR report dated June 20, 2017, the district maintains that the special education classrooms located at Greenfield Middle School, Greenfield High School, and the Discovery School do maximize the inclusion of students with disabilities into the life of the school. These specialized sub-separate classrooms participate in meaningful, inclusive programming that includes encore classes, grade level advisory, general ed. content area classes, lunch, specials, electives, content area classes, extracurricular activities/clubs, and sports to the fullest extent possible, with support services as needed, based on individual planning and IEP team decisions. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne M. Ellis, Director of Student Services, Jordana Harper, Superintendent, District principals | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  The district is prepared to further document through student specific schedules, level of involvement within inclusion based programming, and team placement decisions that placement in specific classrooms and programs, including the issue of classroom location relative to other general education classrooms, not only supports meaningful inclusion but maximizes it appropriate to student need within the district. Students within these identified classrooms have returned from significantly more restrictive out of district settings, including 4 students this current school year. Additionally, these classrooms have maximized student inclusion within the school community by reducing the occurrence of students placed out of district. | | |
| **Description of Internal Monitoring Procedures:**  Greenfield Public Schools embraces student success in the least restrictive setting and vigilantly monitors through data collection, student performance measures, and the IEP Team process that we are meeting the requirements of FAPE in the least restrictive setting. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district will have the opportunity to clarify the classroom locations and inclusionary practices for Greenfield Middle School and the Discovery School.  At Greenfield High School, the district did not provide a plan to address the nine transition classrooms that are located in one wing away from the general school population. | | |
| **Department Order of Corrective Action:**  Provide floor plans and schedules for the students at Greenfield Middle School and the Discovery school for the classrooms identified by the Department. | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, submit updated floor plans of Greenfield Middle School and the Discovery school that clearly show the locations of the all special education classrooms and the and identify the use of all nearby classrooms. Also, verify that a sign identifying the ACES classroom has been removed.  By December 15, 2017. submit schedules of all students enrolled in the identified programs at Greenfield Middle School and the Discovery School that document their participation in inclusive programming.  By December 15, 2017, provide a proposed floor plan for Greenfield High School to indicate where the nine transition classrooms currently occupying one wing of the high school building will be relocated for the 2018-2019 school year. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not consistently translate all notices and communications that are being provided to English-speaking parents for parents with limited English skills. | | |
| **Description of Corrective Action:**  The district has made significant gains in our identification and accommodation of families with limited English skills throughout the district. We have a full time Russian / Romanian tutor / translator and interpreter and have now added a comparable position to support our Spanish speaking families. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne M. Ellis, Director of Pupil Services | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  The district is diligently working to fully implement this criterion area through the following measures:  1) For the 2017-2018 school year administer home language surveys to all new enrolling students and each year to returning students in each of our schools, preK-post graduate level as a means of consistently identifying and accommodating language needs of our families.  2) Streamline district enrollment forms as well as forms common to all schools (emergency contacts, health forms, etc.) to ease degree of language translation demands. Many of these forms have already been translated into Russian, Romanian, and Spanish as the primary secondary languages of our community, but through the CPR review process, we identified not all forms were consistently translated throughout each building within the district.  3) We now have a google translate widget on our website, consistent with what is in use on the DESE website, to improve informational access for families who are seeking information online.  4) The district has language tutors in place who can accommodate communication or child specific requests for language translation service (in Spanish, Russian, and Romanian) as well as arrange for document translation through UMASS or another reputable language translation service for specific district forms that may pose greater technical expertise. | | |
| **Description of Internal Monitoring Procedures:**  Through our administrative executive team structure building principals and program directors are aware of their responsibility to insure language access for our families. Collectively administrators have communicated to their respective faculty and staff the importance of identifying and meeting language translation requirements in both formal school notices and informal announcements of events and activities. New administrative forms are approved through a centralized process that insures greater compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **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 the agenda, signed attendance sheet, name and role of presenter, and training materials, including translation procedures, on the requirement to consistently translate all notices and communications that are being provided to English-speaking parents for parents with limited English skills.  By December 15, 2017, submit a list of all notices and communications that are routinely translated and the languages they are translated into. Please include samples of the translated documents. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  CR 8 Accessibility of extracurricular activities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the district's Co-Curricular and Extracurricular Activities Policy does not include the protected categories of gender identity and homelessness. | | |
| **Description of Corrective Action:**  The Greenfield School Committee Policy Subcommittee is engaged in an extensive review and update of many of our school district policies to have them be reflective of changes in educational practice that have occurred since the last policy adoption, including recognition of all protected categories recognized by statute to include gender identify and homelessness. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne M. Ellis, Director of Pupil Services, Jordana Harper, Superintendent. | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  The policy subcommittee meets twice monthly and will be updating the Co-Curricular and Extracurricular activities policy to reflect these protected categories. The policy will be subsequently brought to the full school committee during the course of the 2017-2018 school year for respective readings and full adoption. | | |
| **Description of Internal Monitoring Procedures:**  The school superintendent, in working with the school committee policy subcommittee, will determine a scheduled review process to better support necessary policy updates as indicated by changes in statutory requirements and DESE advisories. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, submit a copy of the district's Co-Curricular and Extracurricular Activities Policy that includes all of the protected categories, including gender identity and homelessness and provide evidence that the procedure has been shared with staff. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  CR 14 Counseling and counseling materials free from bias and stereotypes | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the district procedure to ensure that counseling and counseling materials are free from bias and stereotypes omits the protected categories of color, gender identity, national origin, disability and homelessness. Interviews indicated that the procedure also does not ensure effective communications with English learners, or support educational and occupational pursuits considered nontraditional for the student's gender. | | |
| **Description of Corrective Action:**  The Greenfield School?s guidance and counseling staff review materials to insure that district programs are free from bias and stereotypes and are inclusive of the protected categories of color, gender identity, national origin, disability and homelessness. The Greenfield High School Program of Studies offers a Manufacturing and Technology elective among other courses, taught by a female teacher, among other courses, combined with a sequential guidance program that exposes all students, including our English learners to a wide range of career and college pathways including non-traditional occupational areas for a student?s gender. While the Greenfield Public Schools has confidence that our counseling and counseling materials and instructional programs are free from bias and stereotypes, this CPR review process brought to light the need to update our school committee policy, JLD- Guidance Programs, to meet current standards including the use of more inclusive language and protected categories. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne M. Ellis, Director of Pupil Services, Jordana Harper, Superintendent of Schools | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  1) School instructional staff and guidance personnel will continue their inclusive practices with ongoing observation and supervision of building administrative personnel.  2) The Greenfield School Committee Policy Subcommittee is engaged in an extensive review and update of many of our school district policies to have them be reflective of changes in educational practice that have occurred since the last policy adoption, including recognition of all protected categories of color, gender identity, national origin, disability and homelessness within our Guidance Programs.  3) The policy subcommittee meets twice monthly and will be updating the Co-Curricular and Extracurricular activities policy to reflect these protected categories. The policy will be subsequently brought to the full school committee during the course of the 2017-2018 school year for respective readings and full adoption | | |
| **Description of Internal Monitoring Procedures:**  The school superintendent, in working with the school committee policy subcommittee, will determine a scheduled review process to better support necessary policy updates as indicated by changes in statutory requirements and DESE advisories.  Building administrators through ongoing observation, descriptive feedback, and supervision of educational personnel will insure inclusive practices are fully realized within school instructional programs. Periodic review of school and district data will also be utilized to monitor outcomes by subgroups. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 14 Counseling and counseling materials free from bias and stereotypes | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, submit a copy of the district procedure to ensure that counseling and counseling materials are free from bias and stereotypes that includes all of the protected categories including color, gender identity, national origin, disability and homelessness and provide evidence that the procedure has been shared with staff. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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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:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district has not developed a notice to be sent within five days from a student's tenth consecutive absence to include: two dates and times for an exit interview between the superintendent (or designee) and the student and the parent/guardian; contact information for scheduling the exit interview; and information to indicate that the date and time for the exit interview may be extended at the request of the parent/guardian, but for no longer than 14 days.  Additionally, the district has not developed a notice sent annually to former students who have not yet earned their competency determination to inform them of the availability of publicly funded post-high school academic support programs and encourage them to participate in those programs. The district does not send annual written notice to the last known address of each such student who attended a high school in the district within the past two years. | | |
| **Description of Corrective Action:**  The district has attendance monitoring and reporting procedures in place to address all student absences through written notification at regular intervals of 5, 10, and 15 days. Within this process school personnel make multiple attempts to directly engage with parent/guardians through phone calls and a request to conference. In addition, for students over the age of 16, the district has had notification procedures in place addressing educational options available to students who have separated from or otherwise dropped out from high school. Additional provisions are in place for students with disabilities who exit high school prior to earning a high school diploma, a certificate of attainment, or certificate of completion.  In the 2016-2017 school year, these procedures were not fully in place or consistently executed given the former principal had taken an unexpected, year long, leave of absence. | | |
| **Title/Role(s) of Responsible Persons:**  Karin Patenaude, High School Principal, Jordana Harper, Superintendent | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  The newly appointed principal at the high school will execute the requirements of this indicator. She has already updated the notification form previously used by the former principal to reflect a wider range of educational options available including credit recovery, virtual school, and dual enrollment with an area college. The principal actively works with guidance personnel on academic support, monitoring, and dropout prevention programming. Guidance staff will be engaged in annual outreach through a written notice sent to students who have left school advising them of educational options available to them as well as the offer to meet with the school superintendent. Beyond the required written notice, other outreach communication efforts such as phone calls, emails, and a public posting on our website will also be made available in an effort to reach exited students and make this information publicly available. | | |
| **Description of Internal Monitoring Procedures:**  School administrative staff monitor daily attendance and absence notification letters are generated through our student information management system.  In conducting weekly reviews, school personnel will monitor if any absent students are 16 years or older and have reached 10 consecutive absences.  Periodic review of school and district data will also be utilized to monitor any patterns, trends, and outcomes by subgroups. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Review the following documents:  High School Exit Intervention Model Protocol at http://www.doe.mass.edu/dropout/2014-05ExitProtocol.pdf, and  Information for School Districts about Required Notices Regarding Students who Leave High School Without Graduating at http://www.doe.mass.edu/news/news.aspx?id=3051  By December 15, 2017, submit a copy of the notice developed to be sent within five days from a student's tenth consecutive absence, to both the student and the parent, that includes: two dates and times for an exit interview between; contact information for scheduling the exit interview; and information to indicate that the date and time for the exit interview may be extended at the request of the parent/guardian, but for no longer than 14 days.  By December 15, 2017, submit a copy of the notice developed to be sent annually to former students who have not yet earned their competency determination to inform them of the availability of publicly funded post-high school academic support programs and encourage them to participate in those programs.  By April 13, 2018, submit samples of each of the notices that have been sent to students following corrective action, if any. | | |
| **Progress Report Due Date(s):**  12/15/2017  04/13/2018 | | |

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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 indicated that the district's restraint prevention and behavior support policies and procedures have not been updated to be consistent with the requirements for the implementation of 603 CMR 46.00, effective January 1, 2016. | | |
| **Description of Corrective Action:**  While the district has restraint prevention and behavioral support policies and procedures in place to include annual training of staff in Crisis Prevention and Intervention (CPI), incident and restraint reporting forms and notifications (parent/guardian, state reporting) they have not been consistently updated and disseminated across the district to fully reflect all necessary statutory language of 603 CMR 46.00. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne M. Ellis, Director of Pupil Services, Jordana Harper, Superintendent. | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  The district is diligently working to fully implement this criterion area through the following measures:  1) The district has written guidance and has revised its restraint reporting form so that all fields and language descriptors align with state reporting.  2) Annually building administrators will review procedures on student discipline, de-escalation, crisis protocols, and restraint policy through faculty and staff meetings.  3) The district conducts multiple CPI trainings during the year including the full course and annual refresher training to insure staff are well versed in verbal de-escalation principles and specific and limited conditions in which a student may be physically restrained in accordance with legal statute. The district maintains training records of all CPI staff.  4) School administrative personnel, including the School Superintendent and the Director of Pupil Services will insure model language regarding physical restraint is including in the annual student handbook, subject to review by school improvement councils and approved by school committee.  5) The Greenfield School Committee Policy Subcommittee is engaged in an extensive review and update of many of our school district policies to have them be reflective of changes in educational practice that have occurred since the last policy adoption.  6) The policy subcommittee meets twice monthly and will be updating the district Restraint policy (JKAA) to reflect changes enacted in 2016. The policy will be subsequently brought to the full school committee during the course of the 2017-2018 school year for respective readings and full adoption. | | |
| **Description of Internal Monitoring Procedures:**  The school superintendent, in working with the school committee policy subcommittee, will determine a scheduled review process to better support necessary policy updates as indicated by changes in statutory requirements and DESE advisories.  Building administrators through ongoing observation, supervision of educational personnel, and review of all incident and restraint reports will insure compliance with statutory requirements and procedural protections afforded to students.  Periodic review of school and district data will also be utilized to evaluate for equity, disproportionality, and for any patterns or trends. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The revised physical restraint regulations (603 CMR 46.00) went into effect on January 1, 2016. At the first month of each school year, all school staff must be trained on the district's physical restraint policy and procedures. | | |
| **Department Order of Corrective Action:**  In addition to updating the physical restraint policy, the district also needs to develop procedures for the implementation of the policy to include:  1) methods for preventing student violence, self-injurious behavior and suicide;  2) methods for engaging parents in discussions about restraint prevention and use;  3) a description and explanation of the program's alternatives to physical restraint and method of physical restraint in emergency situations;  4) a statement prohibiting: medication restraint, mechanical restraint, prone restraint unless permitted pursuant to 603 CMR 46.03(1)(b), seclusion, and the use of restraint inconsistent with 603 CMR 46.03;  5) a description of the program's training requirements, reporting requirements, and follow-up procedures;  6) a procedure for receiving and investigating complaints;  7) a procedure for conducting periodic review of data and documentation on the program's use of restraint;  8) a procedure for implementing the reporting requirements;  9) a procedure for making both oral and written notification to the parent; and  10) a procedure for the use of time-out.  Staff must be trained on these procedures. | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, submit a copy of the district's updated restraint prevention and behavior support policies and procedures to be consistent with the requirements for the implementation of 603 CMR 46.00, effective January 1, 2016, and evidence of staff training provided within the first month of the school year. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  CR 23 Comparability of facilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Observation indicated that at the Discovery School at Four Corners, the ELE classroom is located in the new addition of the school, in a room that has been divided into smaller spaces for the resource room, Title 1 classroom, and ELE classroom, using bookcases, file cabinets and a wall divider. When the classes are meeting at the same time, noise is an issue. The location and services provided for English learners are not comparable to those provided to the overall student population. | | |
| **Description of Corrective Action:**  The Discovery School at Four Corners is overcrowded given enrollment demands to meet state requirements for instructional learning environments. Limited physical space of the building has impacted general education, special ed., and the instructional learning space for English language learners. In an effort to offer fully functional and proportional space for all student learning needs the principal divided a full classroom to allow for the creation of a student support service center with portioned areas to accommodate pull out instructional groups for Title 1, speech & language, special ed. and ELL. Additionally, the school had to increase class sizes in third grade rather than open a new section as classroom space is not available to accommodate. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services, Jordana Harper, School Superintendent. | | **Expected Date of Completion:**  09/28/2018 |
| **Evidence of Completion of the Corrective Action:**  The district is challenged to provide a short term solution to this finding.  A Capital Improvement Plan request is being prepared by the school department for submission to the town that includes a request by Discovery School at Four Corners (DSFC) to construct and install 4 portable classrooms connected to the main DSFC building. This is the most preferable course of action which would provide more space school-wide so that we can reassign learning spaces to include those educators/students served in the student support center classroom.  A second option being evaluated by the school department involves constructing fully insulated walls with doors providing sound proofing and privacy in the current student support classroom to improve the individual learning environments.  A third option includes eliminating the art room, thus providing art-on-a-cart to classrooms so that the educators in the current student support room can be spread out into a second classroom space.  A fourth option may include having the ELL teacher rotate through available general education classrooms while students are out at specials. While this allows for the use of a full classroom space it is less functional for the ELL teacher to utilize visuals, anchor charts, and have full access to instructional materials in a guest classroom. | | |
| **Description of Internal Monitoring Procedures:**  At present, a monitoring process does not apply. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 23 Comparability of facilities | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district explained its situation with overcrowding at Discovery School at Four Corners and its intention to prepare a Capital Improvement Plan to present to the town government that would provide a long-term solution to the problem. However, the district did not submit a short-term plan to provide a location and services for English learners that are comparable to those provided to the overall student population. | | |
| **Department Order of Corrective Action:**  The district must draft a short-term plan to provide a location and services for English learners that are comparable to those provided to the overall student population. | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, provide a description of how services for English learners will be provided for the 2017-2018 school year that are comparable to those provided to the overall student population and submit a floor plan of the school that identifies the location where EL services will be provided. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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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 indicated that the district has practices in place to 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, and use appropriate activities, discussions and/or supplementary materials to provide balance and context for any stereotypes depicted in the materials; however, interviews indicated that the practice is not consistently implemented by teachers throughout the district. | | |
| **Description of Corrective Action:**  The district has procedures in place to annually review curriculum to ensure alignment with standards and to address any weaknesses regarding learning targets, activities, or assessments. Together, teachers, teacher leaders, building administration and central administration review 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. When materials involved in activities or discussions relate to any sort of stereotype or bias, coaches work with teachers to establish a developmentally appropriate way to engage students in learning in a psychologically safe and educationally focused way. In other words, discussions and/or materials are used to provide balance and context for any stereotype depicted in materials, based on the enacted policy of the Greenfield School Committee.  While these procedures are in place, staff interviews within the CPR review indicate that explicit annualized training and further written guidance is provided to staff to ensure common understanding of expectations are consistently maintained. | | |
| **Title/Role(s) of Responsible Persons:**  Jordana Harper, School superintendent, building based principals | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Within annual mandatory training all district staff will be reminded of their responsibilities in this area and a written protocol will be developed and presented within building based faculty meetings that offers further written guidance for teachers and instructional staff to maintain vigilance in their assessment and review of 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, and use appropriate activities, discussions and/or supplementary materials to provide balance and context for any stereotypes depicted in the materials | | |
| **Description of Internal Monitoring Procedures:**  Building administrators will annually collect staff signature pages acknowledging staff training and adherence in all areas of mandatory training.  Within faculty meetings an additional curriculum review protocol will be introduced.  Curriculum teams will utilize the protocol while examining materials and determining ways to developmentally engage students in learning, in safe supported ways, that provide balance, context, and increased understanding. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **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 the agenda, signed attendance sheet, and name and role of presenter on the requirement to 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, and use appropriate activities, discussions and/or supplementary materials to provide balance and context for any stereotypes depicted in the materials. Include a copy of the written protocol on the curriculum review requirement that will be developed and provided to staff. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  ELE 3 Initial Identification | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and staff interviews indicated that the district has an initial identification process in which not all students receive the Home Language Survey. Thus, English learners (ELs) are not consistently and accurately identified. Furthermore, the district does not have a process to identify or assess pre-school students to determine if they are ELs. The district's current initial identification practices are not consistent with the Department guidelines consistent with Title VI, EEOA, G.L. 71A & 76, and 603 CMR 14.02(1). Please see the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners," as found at HYPERLINK "http://www.doe.mass.edu/ell/guidance/Guidance.pdf" http://www.doe.mass.edu/ell/guidance/Guidance.pdf . | | |
| **Description of Corrective Action:**  The district previously administered home language surveys to new enrollments, K-12, rather than all students preschool to postgraduate level high school students. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services | | **Expected Date of Completion:**  09/30/2017 |
| **Evidence of Completion of the Corrective Action:**  Upon the start of the 2017-2018 school year the district now administers home language surveys to all new enrolling students and each year to returning students in each of our schools, preK-post graduate level as a means of consistently identifying, assessing, and accommodating language needs of our families. | | |
| **Description of Internal Monitoring Procedures:**  Home language surveys are reviewed and placed in cumulative student files. A copy is given to the ELL teacher for review and assessment, and a copy to the student services office for those families that identify a home language need other than English. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 3 Initial Identification | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, please provide the following:  1- The Initial Identification Procedures form located in the Document Library to provide a description of the district's initial identification procedures showing that: a- the district administers a HLS to all newly enrolling students; b- the district screens the English language proficiency of a student using a WIDA screener when the answer to any of the questions on the HLS is a language other than English; c- the district determines whether or not the student is an EL and makes initial placement decisions using screening test results and cut scores provided by the Department; d- the district notifies the parent/guardian of language assessment results and initial placement no later than 30 days after the beginning of the school year or within two weeks if the student enrolls in the school district during the school year; e- the district informs the parents of their right to opt out or to secure an SEI program waiver with the parent notification form sent to the parents upon initial placement of the student in the district's ELE program; f- the district codes the student determined to be EL in all future SIMS reports submitted to the Department.  2. 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 materials presented, meeting dates, minutes and sign-in sheets.  3. The "Initial Identification Testing Data" form that is available in the Document Library to document the district's efforts to identify ELs in preschool and other newly enrolled students in SY 2017-18. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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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 staff interviews indicated that the district uses the waiver process to provide an "alternate service" when G.L. c. 71A states that a parent may request a program waiver to allow the student in a different English learner education (ELE) program than the state-mandated SEI program model. The current waiver policy in the district is not consistent with the waiver requirements stated in G.L. c. 71A. | | |
| **Description of Corrective Action:**  At the time of the CPR review the Greenfield Public Schools had its third Director of Pupil Services in a three year period. The English Language Education Program in the district did not have the full benefit of consistent administrative support and leadership, and as a result, practices and procedures in the district had not been updated to reflect all changes in statutory requirements.  In March of the 2016-2017 school year a new English Language Learners procedural guidance manual was drafted and introduced to district staff that reflects updated, current state procedures for identification, assessment, placement, and re-classification of English learners. The guidance manual will be updated annually and amended to include identification and support of preschool students.  At the time of the CPR review all new district procedures were not fully implemented and teaching staff had not had sufficient time and training to fully enact changes in practice. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Student Services | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  At the start of the 2017-2018 school year ELL teachers are now utilizing new procedures and forms put forth within the procedural manual, to include complying with waiver procedures. | | |
| **Description of Internal Monitoring Procedures:**  Within each EL student folder, at the school level, all identified students have English Language Education program folders that include copies of mandatory and applicable forms for each student recorded on a program folder checklist.  A copy of these student records and program folder components will also be maintained within central office records as well. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 4 Waiver Procedures | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017:  1- Submit the district's revised 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.  2- Submit evidence showing that students who were on a waiver as a result of the district's former practice have access to ELE services. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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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:**  Document review and staff interviews indicated that the district does not have an ESL curriculum or a plan to develop one. ESL teachers use reading and literacy programs to provide ESL instruction to ELs at the elementary level, and middle school ESL teachers do not have any specific curriculum/material to provide ESL instruction. Reading and literacy programs help students improve their reading skills and can be used as resources; however, they cannot replace an ESL curriculum that targets growth in reading, listening, writing and speaking. Furthermore, a review of English Learner Student Learning Targets revealed that the district has not met Academic Achievement target for three consecutive years. The Department concludes that there is no evidence showing whether the time dedicated to ESL instruction is used for English language development and the district's ELE program requires appropriate program adjustments to improve the outcomes of the service delivery. Please see the district's English Learner Student Learning Targets in the Security Portal at HYPERLINK "https://gateway.edu.state.ma.us" https://gateway.edu.state.ma.us . | | |
| **Description of Corrective Action:**  The Greenfield Public Schools has some English Language Learner specific curriculum programs that include, but are not limited to, Hampton Brown Edge, Prentice Hall Keys to Learning & Shining Star, and the Scott Forsman series for English Language Learners. Additionally the district has some dated ELL curriculum programs (High Point, LAS-LINKS) that are not aligned with the Common Core. In the 2016 -2017 school year under a new Director of Pupil Services a curriculum review process was initiated to identify existing resources and gaps in our instructional programs in conjunction with our Assistant Superintendent of Instruction, Curriculum, and Professional Development. The Assistant Superintendent has subsequently left the district and a full curriculum review was not completed.  In terms of learning targets, the district is cognizant that some of our EL populations, in particular Spanish speaking students, are lagging behind other EL cohorts. In our district analysis we have identified a number of complicating factors including high mobility rates, environmental, and social/economic factors that appear to further complicate educational outcomes. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services, TBD, Curriculum Director | | **Expected Date of Completion:**  09/28/2018 |
| **Evidence of Completion of the Corrective Action:**  At this point in the corrective action process the Greenfield Public Schools is seeking technical assistance, professional development, and integration of available resource documents and materials into our instructional practices as a course of action to address curricular deficits. This approach will allow us to build capacity of our staff and thoughtfully plan and invest district resources into evidence based instructional approaches, materials, and curriculum programs.  Thus far we have identified and explored the following resources:  &#61656; DESE Model Curriculum Units  &#61656; Next Generation ESL Project: Curriculum Resource Guide  &#61656; The ?GO TO Strategies: Scaffolding Options for Teachers of English Language Learners  &#61656; SIOP- Sheltered Instruction Observation Protocols & Research Briefs  &#61656; Colorin? Colorado Website Resources  &#61656; Use of the Collaboration Tool to examine key use of academic language and practice  &#61656; Consultation with David Valade, English Language Acquisition and Academic Achievement office at DESE  &#61656; GPS- ELL teacher participation in the Collaborative for Educational Services Professional Learning Community  &#61656; Participation of district ELL teachers in OELAAA/ WIDA workshops on select topic areas (scaffolding language and engaging ELs in Math).  Action planning to address lagging performance of EL?s on learning targets will require a more comprehensive program evaluation process to include root cause analysis, articulated intervention and action planning, data collection and analysis. | | |
| **Description of Internal Monitoring Procedures:**  1. Utilization of MA Ed. Evaluation System- student learning & professional practice goals  2. Build departmental professional learning community to examine and evaluate ELL specific curricular programs, instructional practices and scaffolding.  3. Seek technical assistance and program consultation support to evaluate ELL program to include short term and long term goal setting. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017:  1- Please provide the Department with information about the process of developing ESL/ELD curriculum as well as the timeline that shows executive milestones of the project, estimated completion and implementation time frame. Please note that the plan should reflect the content to be taught and address the instructional needs of the EL population at all levels.  2- Please provide information regarding the roles and responsibilities of the staff who are assigned to the ESL curriculum project and their qualifications.  3- Please submit evidence of systematic English language development occurring during the time dedicated to ESL such as unit plans and/or lesson plans that ESL teachers use for ESL instruction. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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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:**  Document review indicated that the district does not have written reclassification procedures. Furthermore, interviews indicated inconsistent familiarity with reclassification procedures and awareness of any students who have been reclassified. 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. Please see the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" as found at HYPERLINK "http://www.doe.mass.edu/ell/guidance/Guidance.pdf" http://www.doe.mass.edu/ell/guidance/Guidance.pdf . | | |
| **Description of Corrective Action:**  At the time of the CPR review the Greenfield Public Schools had its third Director of Pupil Services in a three year period. The English Language Education Program in the district did not have the full benefit of consistent administrative support and leadership, and as a result, practices and procedures in the district had not been updated to reflect all changes in statutory requirements.  In March of the 2016-2017 school year a new English Language Learners procedural guidance manual was drafted and introduced to district staff that reflects updated, current state procedures for identification, assessment, placement, and re-classification of English learners. The guidance manual will be updated annually and amended to include identification and support of preschool students.  At the time of the CPR review all new district procedures, including reclassification procedures, were not fully implemented and teaching staff had not had sufficient time and training to fully enact changes in practice. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services, building principals | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  At the start of the 2017-2018 school year ELL teachers are now utilizing new procedures and forms put forth within the procedural manual, to include complying with reclassification procedures. | | |
| **Description of Internal Monitoring Procedures:**  Within each EL student folder, at the school level, all identified students have English Language Education program folders that include copies of mandatory and applicable forms for each student recorded on a program folder checklist.  A copy of these student records and program folder components will also be maintained within central office records as well. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017:  1-Submit the district's revised reclassification policies and procedures.  2- Provide training to all staff members involved in the reclassification process to ensure that they are all knowledgeable about the changes and submit the training materials, sign-in sheets and agendas.  3-Please use FEL Roster available in the Document Library to provide information for all the ELs in your district who have been reclassified in the last school year. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  ELE 8 Declining Entry to a Program | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review, student record review and interviews indicated that the district does not have established policies and procedures to provide ELs who have been opted out of ELE programming meaningful access to the educational program. There is no indication of monitoring or parent notification on a regular basis. The district's current procedures for students who have been opted out are not in compliance with Title VI, EEOA, and Chapter 71A for providing opted-out ELs meaningful access to the district's educational program. Please see the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" as found at HYPERLINK "http://www.doe.mass.edu/ell/guidance/Guidance.pdf" http://www.doe.mass.edu/ell/guidance/Guidance.pdf . | | |
| **Description of Corrective Action:**  At the time of the CPR review the Greenfield Public Schools had its third Director of Pupil Services in a three year period. The English Language Education Program in the district did not have the full benefit of consistent administrative support and leadership, and as a result, practices and procedures in the district had not been updated to reflect all changes in statutory requirements.  In March of the 2016-2017 school year a new English Language Learners procedural guidance manual was drafted and introduced to district staff that reflects updated, current state procedures for identification, assessment, placement, and re-classification of English learners. The guidance manual will be updated annually and amended to include identification and support of preschool students.  At the time of the CPR review all new district procedures, including procedures for students who are opted out of services, were not fully implemented and teaching staff had not had sufficient time and training to fully enact changes in practice to reflect ongoing monitoring of these students. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services, building principals | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  At the start of the 2017-2018 school year ELL teachers are now utilizing new procedures and forms put forth within the procedural manual, to include complying with opt out and monitoring procedures.  School based student support teams will be trained to work with ELL teachers to assist on monitoring needs for opted out students to insure sufficient support is in place, if there are any district curriculum accommodation planning considerations, and to monitor for effective progress. | | |
| **Description of Internal Monitoring Procedures:**  School based student support team (SST) analysis of student performance data.  Completion of monitoring forms for opted out students to include evidence of actions, communications with families, and support services being put in place as indicated. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 8 Declining Entry to a Program | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017:  1-Please submit a plan explaining how the school will monitor the progress of students whose parents declined ELE services to ensure that they make adequate progress and the level of support that will be available for them provided that students need such support to have access to the curricula taught in the school.  2-Provide training to all ELE staff to ensure that they are all knowledgeable about the process and submit the training materials, sign-in sheets and agendas by the progress report due date. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  ELE 10 Parental Notification | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicated that the district does not always send to the parents of students in the ELE program report cards and progress reports in a language they understand. | | |
| **Description of Corrective Action:**  At the time of the CPR review the Greenfield Public Schools had its third Director of Pupil Services in a three year period. The English Language Education Program in the district did not have the full benefit of consistent administrative support and leadership, and as a result, practices and procedures in the district had not been updated to reflect all changes in statutory requirements.  In March of the 2016-2017 school year a new English Language Learners procedural guidance manual was drafted and introduced to district staff that reflects updated, current state procedures for identification, assessment, placement, and re-classification of English learners. The guidance manual will be updated annually and amended to include identification and support of preschool students.  At the time of the CPR review all new district procedures, including parent/ guardian notification procedures for students were not fully implemented and teaching staff had not had sufficient time and training to fully enact changes in practice to reflect use of the new notification forms. Our old notification forms along with progress reports were in use including translated into home languages that families could understand. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services, building principals | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  At the start of the 2017-2018 school year ELL teachers are now utilizing new procedures and forms put forth within the procedural manual, to include parent notification procedures translated into the home language of the respective families.  While new translated parent/guardian notification forms are in place the district has additional work to insure we are fully compliant in meeting our translated document requirements for all progress and grade report forms throughout each of our schools. | | |
| **Description of Internal Monitoring Procedures:**  Within each EL student folder, at the school level, all identified students have English Language Education program folders that include copies of mandatory and applicable forms for each student recorded on a program folder checklist.  A copy of these student records and program folder components will also be maintained within central office records as well. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 10 Parental Notification | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017:  1- Submit samples of the progress reports the district will send to parents or legal guardians to inform them of their child's progress in English language acquisition.  2- Provide the district's plan including information about how often ELE progress cards will be issued and how the district will monitor the process to ensure that parents receive them in their preferred language. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  ELE 11 Equal Access to Academic Programs and Services | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not consistently provide notices to ELs about activities, responsibilities, and academic standards in a language they understand. | | |
| **Description of Corrective Action:**  The district has made significant gains in our identification and accommodation of families with limited English skills throughout the district to provide equal access to academic programs and services. We have a full time Russian / Romanian tutor / translator and interpreter and have now added a comparable position to support our Spanish speaking families. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services, building principals | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  The district is diligently working to fully implement this criterion area through the following measures:  1) For the 2017-2018 school year administer home language surveys to all new enrolling students and each year to returning students in each of our schools, preK-post graduate level as a means of consistently identify and accommodate language needs of our families.  2) Streamline district enrollment forms as well as forms common to all schools (emergency contacts, health forms, etc.) to ease degree of language translation demands. Many of these forms have already been translated into Russian, Romanian, and Spanish as the primary secondary languages of our community, but through the CPR review process, we identified not all forms were consistently translated throughout each building within the district.  3) We now have a google translate widget on our website, consistent with what is in use on the DESE website, to improve informational access for families who are seeking information online.  4) The district has language tutors in place who can accommodate communication or child specific requests for language translation service (in Spanish, Russian, and Romanian) as well as arrange for document translation through UMASS or another reputable language translation service for specific district forms that may pose greater technical expertise. | | |
| **Description of Internal Monitoring Procedures:**  Through our administrative executive team structure building principals and program directors are aware of their responsibility to insure language access for our families. Collectively administrators have communicated to their respective faculty and staff the importance of identifying and meeting language translation requirements in both formal school notices and informal announcements of events and activities. New administrative forms are approved through a centralized process that insures greater compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 11 Equal Access to Academic Programs and Services | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, submit evidence that all staff have been informed of the requirement to provide notices to ELs about activities, responsibilities, and academic standards in a language they understand. Please include samples of the translated documents. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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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 indicated that the district does not consistently provide information to ELs about extracurricular activities and school events in a language they understand. | | |
| **Description of Corrective Action:**  The district has made significant gains in our identification and accommodation of families with limited English skills throughout the district to provide equal access to non-academic programs, services, and extracurricular and athletic offerings. We have a full time Russian / Romanian tutor / translator and interpreter and have now added a comparable position to support our Spanish speaking families. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services, building principals | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  The district is diligently working to fully implement this criterion area through the following measures:  1) For the 2017-2018 school year administer home language surveys to all new enrolling students and each year to returning students in each of our schools, preK-post graduate level as a means of consistently identify and accommodate language needs of our families.  2) Streamline district enrollment forms as well as forms common to all schools (emergency contacts, health forms, etc.) to ease degree of language translation demands. Many of these forms have already been translated into Russian, Romanian, and Spanish as the primary secondary languages of our community, but through the CPR review process, we identified not all forms were consistently translated throughout each building within the district.  3) We now have a google translate widget on our website, consistent with what is in use on the DESE website, to improve informational access for families who are seeking information online.  4) The district has language tutors in place who can accommodate communication or child specific requests for language translation service (in Spanish, Russian, and Romanian) as well as arrange for document translation through UMASS or another reputable language translation service for specific district forms that may pose greater technical expertise | | |
| **Description of Internal Monitoring Procedures:**  Through our administrative executive team structure building principals and program directors are aware of their responsibility to insure language access for our families. Collectively administrators have communicated to their respective faculty and staff the importance of identifying and meeting language translation requirements in both formal school notices and informal announcements of events and activities. New administrative forms are approved through a centralized process that insures greater compliance | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 12 Equal Access to Nonacademic and Extracurricular Programs | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, submit evidence that staff have been informed of the requirement to provide notices to ELs about extracurricular activities and school events in a language they understand. Please include samples of the translated documents. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  ELE 13 Follow-up Support | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not have established procedures to provide follow up support for reclassified students (FELs). The district's current monitoring procedures are not in compliance with Title VI, EEOA, and ESSA that require districts to actively monitor FELs and provide language support to remedy any academic deficits in accordance with the Department's guidelines. Please see the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" as found at HYPERLINK "http://www.doe.mass.edu/ell/guidance/Guidance.pdf" http://www.doe.mass.edu/ell/guidance/Guidance.pdf . | | |
| **Description of Corrective Action:**  At the time of the CPR review the Greenfield Public Schools had its third Director of Pupil Services in a three year period. The English Language Education Program in the district did not have the full benefit of consistent administrative support and leadership, and as a result, practices and procedures in the district had not been updated to reflect all changes in statutory requirements.  In March of the 2016-2017 school year a new English Language Learners procedural guidance manual was drafted and introduced to district staff that reflects updated, current state procedures for identification, assessment, placement, and re-classification of English learners. The guidance manual will be updated annually and amended to include identification and support of preschool students.  At the time of the CPR review all new district procedures, including follow up support for reclassified students (FELs) were not fully implemented and teaching staff had not had sufficient time and training to fully enact changes in practice to reflect use of the new procedures and forms. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne M. Ellis, Director of Pupil Services, building principals | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  At the start of the 2017-2018 school year ELL teachers are now utilizing new procedures and forms put forth within the procedural manual, to include complying with follow up support requirements for reclassified students. | | |
| **Description of Internal Monitoring Procedures:**  1) Central office program folders will allow for increased monitoring and ELL program review.  2) On a quarterly basis the director of pupil services will conduct EL program file reviews at select schools to insure all required records are adequately being maintained including the use of updated procedures and forms.  3) On a quarterly basis, ELL teachers and Student Support Teams (district does not have a Language Acquisition Team) will review reclassified EL students? academic progress across academic content and school performance domains to monitor for effective progress and devise action steps, if indicated. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 13 Follow-up Support | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2107:  1- Please submit a plan explaining how the school will monitor the progress of FELs to ensure that they make adequate progress and the level of support that will be available for them provided that they need such support to remedy any academic deficits they incurred as a result of participation in the ELE program and to have access to the curricula taught in the school.  2- Provide training to all ELE staff to ensure that they are all knowledgeable about the process and submit the training materials, sign-in sheets and agendas by the progress report due date. Submit any evidence showing that the district started to monitor students who have been reclassified as FELs  3- Submit samples of the completed forms used to monitor the progress of the current FELs. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  ELE 16 Equitable Facilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  See CR 23. | | |
| **Description of Corrective Action:**  The Discovery School at Four Corners is overcrowded given enrollment demands to meet state requirements for instructional learning environments. Limited physical space of the building has impacted general education, special ed., and the instructional learning space for English language learners. In an effort to offer fully functional and proportional space for all student learning needs the principal divided a full classroom to allow for the creation of a student support service center with portioned areas to accommodate pull out instructional groups for Title 1, speech & language, special ed. and ELL. Additionally, the school had to increase class sizes in third grade rather than open a new section as classroom space is not available to accommodate. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services, Jordana Harper, School Superintendent. | | **Expected Date of Completion:**  09/28/2018 |
| **Evidence of Completion of the Corrective Action:**  The district is challenged to provide a short term solution to this finding.  A Capital Improvement Plan request is being prepared by the school department for submission to the town that includes a request by Discovery School at Four Corners (DSFC) to construct and install 4 portable classrooms connected to the main DSFC building. This is the most preferable course of action which would provide more space school-wide so that we can reassign learning spaces to include those educators/students served in the student support center classroom.  A second option being evaluated by the school department involves constructing fully insulated walls with doors providing sound proofing and privacy in the current student support classroom to improve the individual learning environments.  A third option includes eliminating the art room, thus providing art-on-a-cart to classrooms so that the educators in the current student support room can be spread out into a second classroom space.  A fourth option may include having the ELL teacher rotate through available general education classrooms while students are out at specials. While this allows for the use of a full classroom space it is less functional for the ELL teacher to utilize visuals, anchor charts, and have full access to instructional materials in a guest classroom. | | |
| **Description of Internal Monitoring Procedures:**  At present, a monitoring process does not apply. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 16 Equitable Facilities | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  See CR 23. | | |
| **Department Order of Corrective Action:**  See CR 23. | | |
| **Required Elements of Progress Report(s):**  See CR 23. | | |
| **Progress Report Due Date(s):**  12/15/2017 | | |

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

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| **Criterion & Topic:**  ELE 17 Program Evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and staff interviews indicated that the district does not have a comprehensive system in place to evaluate the effectiveness of its ELE program 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:**  Description: At the time of the CPR review the Greenfield Public Schools had its third Director of Pupil Services in a three year period. The English Language Education Program in the district did not have the full benefit of consistent administrative support and leadership, and as a result, practices and procedures in the district had not been updated to reflect all changes in statutory requirements. There has not been a recent structured evaluation of the English Language Learning program given these circumstances. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Pupil Services, Jordana Harper, Superintendent of Schools | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  In utilizing the DESE ELL Program Evaluation template the Greenfield Public Schools will initiate a structured evaluation process within the 2017-2018 school year to examine practices, instructional strategies/programs, interventions, and service needs within our English Language Program, in an effort to raise student achievement and improve educational outcomes for all EL students. | | |
| **Description of Internal Monitoring Procedures:**  1) Establish timeframes and program evaluation committee representation by Nov.30, 2017  2) Gather & analyze data sources including potential root cause analysis by Jan. 31, 2018  3) Formulate action & intervention plan for district implementation by June 30, 2018 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 11/16/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, provide the following information:  1- 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.  By June 29, 2018:  1- complete the program evaluation tool that is available at http://www.doe.mass.edu/ell/ProgramEvaluation.pdf  The district must complete all of the components of the attached form in order to evaluate the effectiveness of its ELE program in developing students' English language skills and increasing their ability to participate meaningfully in the district's educational program.  2- Please provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation.  3- Please provide a plan of action to make appropriate program adjustments or changes that are responsive to the outcomes of the program evaluation to improve the effectiveness of the program at promoting and supporting the rapid acquisition of English language proficiency by ELs as is required in G.L. c. 71A. | | |
| **Progress Report Due Date(s):**  12/15/2017  06/29/2018 | | |

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

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| **Criterion & Topic:**  ELE 18 Records of ELL students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicated that records for ELs do not consistently contain all required documents, including: home language surveys, initial and annual parent notification letters, report cards and progress reports. | | |
| **Description of Corrective Action:**  At the time of the CPR review the Greenfield Public Schools had its third Director of Pupil Services in a three year period. The English Language Education Program in the district did not have the full benefit of consistent administrative support and leadership, and as a result, practices and procedures in the district had not been updated to reflect all changes in statutory requirements.  The district did not maintain centralized program folders for all identified EL students that contain all required documents. Additionally individual program folders at the school level were not consistently organized and maintained to include all new required forms. | | |
| **Title/Role(s) of Responsible Persons:**  Dianne Ellis, Director of Student Services | | **Expected Date of Completion:**  06/30/2018 |
| **Evidence of Completion of the Corrective Action:**  1) ELL teachers have had training, coupled with a new procedural manual, on their professional expectations to maintain program folders that meet the required elements.  2) Short term, clerical assistance has been added to central office time to gather documents and develop organized copies of EL program folders at central office that meet the required elements. | | |
| **Description of Internal Monitoring Procedures:**  1) Central office program folders will allow for increased monitoring and program review.  2) On a quarterly basis the director of student services will conduct EL program file reviews at select schools to insure all required records are adequately being maintained including the use of updated procedures and forms. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 18 Records of ELL students | **Corrective Action Plan Status:** Approved  **Status Date:** 11/01/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 15, 2017, submit evidence that staff training including sign-in sheet and materials used, on maintaining complete records for ELs that contain all required documents including: home language surveys, initial and annual parent notification letters, report cards and progress reports.  By April 13, 2018, submit the results of a review of EL records to ensure all required records are maintained. Include the number of student records reviewed, the number of records in compliance, and for any records not in compliance, determine the root cause(s) of the non-compliance and the district's plan to remedy the non-compliance.  \* Please note when conducting internal monitoring the school 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):**  12/15/2017  04/13/2018 | | |