|  |
| --- |
| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION****Program Quality Assurance Services** |

##### COORDINATED PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Groton-Dunstable

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 09/06/2017.

**Mandatory One-Year Compliance Date:** **09/06/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |
| ELE 3 | Initial Identification | Partially Implemented |
| ELE 5 | Program Placement and Structure | Partially Implemented |
| ELE 6 | Program Exit and Readiness | Partially Implemented |
| ELE 10 | Parental Notification | Partially Implemented |
| ELE 14 | Licensure Requirements | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |
| ELE 18 | Records of ELL students | Partially Implemented |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 18B Determination of placement; provision of IEP to parent | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and staff interviews indicated that although the district provides the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice, the IEP is not consistently provided to parents immediately following the development of the IEP. |
| **Description of Corrective Action:** The district will 1) provide a detailed narrative description of its new procedures regarding provisionof IEP to parent; and 2) provide staff with training on these procedures, which will include, but not belimited to relevant memorandum, email correspondence, and a training/meeting. |
| **Title/Role(s) of Responsible Persons:**Jill Greene, Director of Pupil Personnel Services | **Expected Date of Completion:**05/31/2018 |
| **Evidence of Completion of the Corrective Action:**Updated referral and evaluation procedures which outline the specific timeline to befollowed to maintain compliance with getting IEP to parents within designated timelines.Evidence of staff training on these procedures, which will include, but not belimited to relevant memorandum, email correspondence, training/meeting agenda, signedattendance sheets and a sample of training materials on or before January 31, 2018. |
| **Description of Internal Monitoring Procedures:** Director of Pupil Personnel Services will review when IEPs are provided to parents following the development of the IEP. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, submit a description of procedures developed to ensure that the district provides parents with two (2) copies of the proposed IEP immediately following the development of the IEP. Provide evidence of training for appropriate staff on these procedures. Please include the training materials, agenda, and signed attendance sheet with staff name, role and signature. Additionally, submit a description of the district's internal monitoring and tracking protocols that ensure future compliance; include the roles of those responsible for implementation and the dates of initial implementation.By February 26, 2018, submit the results of an internal review of records to ensure that two (2) copies of the proposed IEP are provided to parents immediately following the development of the IEP. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance. \*Please note when conducting internal monitoring, the school must maintain the following documentation and make it available to the Department upon request: a) list of the student names and grade levels for the records reviewed; b) date of the review; and c) name of person(s) who conducted the review, their role(s), and signature(s). |
| **Progress Report Due Date(s):** 12/18/201702/26/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 20 Least restrictive program selected | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that when a student is removed from the general education classroom at any time, the Team does not consistently state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. |
| **Description of Corrective Action:** The district will 1) provide a detailed narrative description of its new procedures regarding least restrictive program selected and supporting documentation on IEPs and 2) provide staff with training on these procedures, which will include, but not belimited to relevant memorandum, email correspondence, and a training/meeting. |
| **Title/Role(s) of Responsible Persons:**Jill Greene, Director of Personnel Services | **Expected Date of Completion:**05/31/2018 |
| **Evidence of Completion of the Corrective Action:**Updated least restrictive program selected procedures which decision making and supporting documentation.Evidence of staff training on these procedures, which will include, but not belimited to relevant memorandum, email correspondence, training/meeting agenda, signedattendance sheets and a sample of training materials on or before January 31, 2018. |
| **Description of Internal Monitoring Procedures:** Director of Pupil Personnel Services will review IEP documentation on why the removal of a student from general education is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, submit evidence of training of appropriate staff to ensure that when a student is removed from the general education classroom at any time, the Team states on the IEP why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Please include the training materials, agenda, and signed attendance sheet with staff name, role and signature. Submit a description of the district's internal monitoring and tracking protocols that ensure future compliance; include the roles of those responsible for implementation and the dates of initial implementation. By February 26, 2018, submit the results of an internal review of records to ensure that when a student is removed from the general education classroom at any time, the Team states why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance. \*Please note when conducting internal monitoring, the school must maintain the following documentation and make it available to the Department upon request: a) list of the student names and grade levels for the records reviewed; b) date of the review; and c) name of person(s) who conducted the review, their role(s), and signature(s). |
| **Progress Report Due Date(s):** 12/18/201702/26/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 54 Professional development | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district does not ensure that all staff, including both special education and general education staff, are trained on: state and federal special education requirements and related local special education policies and procedures; and methods of collaboration among teachers, paraprofessionals and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. |
| **Description of Corrective Action:** The district will provide training to ensure that all staff, including both special education and general education staff, are trained on: state and federal special education requirements and related local special education policies and procedures; and methods of collaboration among teachers, paraprofessionals and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. |
| **Title/Role(s) of Responsible Persons:**Jill Greene, Director of Pupil Personnel Services | **Expected Date of Completion:**05/31/2018 |
| **Evidence of Completion of the Corrective Action:**Evidence of staff training, which will include, but not be limited to relevant memorandum, email correspondence, training/meeting agenda, signed attendance sheets and a sample of training materials on or before January 31, 2018. |
| **Description of Internal Monitoring Procedures:** Director of Pupil Personnel Services will review training content and ensure trainings are provided district-wide. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 54 Professional development | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By February 26, 2018, submit evidence of training to ensure that all staff, including both special education and general education staff, are trained on: state and federal special education requirements and related local special education policies and procedures; and methods of collaboration among teachers, paraprofessionals and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. Please include the training materials, agenda, and signed attendance sheet with staff name, role and signature. |
| **Progress Report Due Date(s):** 02/26/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 3 Access to a full range of education programs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that although the district ensures all students have equal access to the full range of education programs, the school committee policy entitled "Equal Education Opportunities" does not include homelessness and disability as protected categories. |
| **Description of Corrective Action:** Our School Committee has a Policy subcommittee. All policy changes are brought to this committee and then to the full school committee. We will provide the CPR Final Report and request appropriate changes. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent of Schools | **Expected Date of Completion:**01/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of revised policy. |
| **Description of Internal Monitoring Procedures:** The policy sub committee will review policies annually to ensure all are updated in accordance to state and federal laws. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By February 26, 2018, provide evidence that the protective classes of disability and homelessness have been included in the school committee approved non-discrimination policy. Additionally, provide evidence of dissemination of the revised non-discrimination policy to the school community, inclusive of staff, students, and parents. |
| **Progress Report Due Date(s):** 02/26/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 8 Accessibility of extracurricular activities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that although the district ensures that extra-curricular activities are nondiscriminatory, the school committee policy entitled "Equal Education Opportunities" does not include homelessness and disability as protected categories. |
| **Description of Corrective Action:** Our School Committee has a Policy subcommittee. All policy changes are brought to this committee and then to the full school committee. We will provide the CPR Final Report and request appropriate changes. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent of Schools | **Expected Date of Completion:**01/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of revised policy. |
| **Description of Internal Monitoring Procedures:** The policy sub committee will review policies annually to ensure all are updated in accordance to state and federal laws. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By February 26, 2018, provide evidence that the protective classes of disability and homelessness have been included in the school committee approved non-discrimination policy. Additionally, provide evidence of dissemination of the revised non-discrimination policy to the school community, inclusive of staff, students, and parents. |
| **Progress Report Due Date(s):** 02/26/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 10A Student handbooks and codes of conduct | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the elementary school code of conduct does not contain: procedures assuring due process in disciplinary proceedings; the district's responsibility to provide every student with an opportunity to make academic progress during the period of suspension whether in-school, out-of-school, or expulsion; and appropriate procedures for the discipline of students with disabilities and students with Section 504 Accommodation Plans. In addition, the elementary school code of conduct does not contain procedures for accepting, investigating and resolving complaints alleging discrimination or harassment; and the disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred. At both the elementary and middle school levels, student handbooks do not include gender identity as a protected category in the nondiscrimination statements. |
| **Description of Corrective Action:** Our School Leadership Team (SLT) meets every two weeks and we will include the review, revision and updates on all school handbooks throughout the year at these meetings. Once the revisions are made, in accordance with the CPR review, we will bring the handbooks to the School Committee for them to vote on them, as this is required by SC policy. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent of Schools | **Expected Date of Completion:**02/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of revised elementary and middle school handbooks. |
| **Description of Internal Monitoring Procedures:** We will continue to review these handbooks annually, as well as bring them forward to the SC for adoption. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By February 26, 2018, submit relevant sections the elementary school code of conduct, approved by the school committee, as evidence that it contains: procedures assuring due process in disciplinary proceedings; the district's responsibility to provide every student with an opportunity to make academic progress during the period of suspension whether in-school, out-of-school, or expulsion; and appropriate procedures for the discipline of students with disabilities and students with Section 504 Accommodation Plans. Additionally, the revised elementary school code of conduct must also contain procedures for accepting, investigating and resolving complaints alleging discrimination or harassment; and the disciplinary measures that the school may impose if it determines that harassment or discrimination has occurred.By February 26, 2018, submit relevant sections of the revised elementary and middle school student handbooks, approved by the school committee, as evidence that the non-discrimination statement now includes gender identity as a protected category. Additionally, provide evidence of dissemination of the revised code of conduct and non-discrimination policy to the school community, inclusive of staff, students, and parents. |
| **Progress Report Due Date(s):** 02/26/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 10B Bullying Intervention and Prevention | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that the elementary school handbooks do not make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. A review of documents also indicated that the elementary and middle school handbooks, as well as employee handbooks, do not contain the relevant sections of the Bullying Prevention and Intervention Plan relating to the duties of faculty and staff and relevant provisions addressing the bullying of students by a school staff member. |
| **Description of Corrective Action:** Our School Leadership Team (SLT) meets every two weeks and we will include the review, revision and updates on all school handbooks throughout the year at these meetings. Once the revisions are made, in accordance with the CPR review, we will bring the handbooks to the School Committee for them to vote on them, as this is required by SC policy. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent of Schools | **Expected Date of Completion:**02/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of revised elementary, middle and employee handbooks. |
| **Description of Internal Monitoring Procedures:** We will continue to review these handbooks annually, as well as bring them forward to the SC for adoption. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By February 26, 2018, submit the relevant sections of the revised student and employee handbooks, approved by the school committee, as evidence that these documents make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. Provide evidence that the relevant portions of the Bullying Prevention and Intervention Plan are included in these handbooks. Additionally, provide evidence of dissemination of the revised Bullying Prevention and Intervention Plan to the school community, inclusive of staff, students, and parents. |
| **Progress Report Due Date(s):** 02/26/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that individual school and district websites do not include a notice that the school does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion, or sexual orientation. |
| **Description of Corrective Action:** Our district and school websites are updated and revised on a rolling basis, so at the next update, the district webmaster, the Director of Technology, will ensure that the required language is on all individual and district web sites. |
| **Title/Role(s) of Responsible Persons:**Luke Callahan, Director of Technology | **Expected Date of Completion:**11/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of home pages of all individual school and district websites. |
| **Description of Internal Monitoring Procedures:** Each time there is an update in federal or state protected classes, we will ensure that the web site, and all district documents, reflect those changes. We currently review our non-discrimination notice on all recruitment and hiring web sites, so we will include the district web site in the same review. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By February 26, 2018, submit the links to the revised homepages from district and school-based websites that include assurances that the school does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion, or sexual orientation. |
| **Progress Report Due Date(s):** 02/26/2018 |

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

|  |  |
| --- | --- |
| **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:** Administrative staff interviews indicated that training regarding the district's restraint prevention and behavior support policy and procedures does not consistently occur within a month of employment for employees hired after the school year begins. |
| **Description of Corrective Action:** Currently, physical restraint training is not included in our on-boarding process in HR. We will ensure that all district employees are trained within a month of employment by creating an additional item on our HR on-boarding checklist so the scheduling of the training can be handled by the HR office. |
| **Title/Role(s) of Responsible Persons:**Justin Williams, Assistant Director of Human Resources and Business | **Expected Date of Completion:**02/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of on-boarding checklist used to ensure that district employees meet all requirements for employment and training. |
| **Description of Internal Monitoring Procedures:** Each year, we review this process, so once Physical Restraint Training is included, we will be able to enter the dates when all employees receive the training and can set up notifications to ensure it's completely within the month by scheduling monthly trainings. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, submit a description of procedures developed to ensure that the district provides training regarding the district's restraint and procedures within a month of employment for employees hired after the school year begins. Provide evidence of training for appropriate staff on these protocols.By February 26, 2018, after subsequent corrective action, submit the results of an administrative review of completed training for employees hired after the start of the school year to ensure that they receive training regarding the district's restraint and procedures within a month of employment. Please include the following: 1) the number of staff hired after the start of the school year; 2) the number of staff in receipt of appropriate training; 3) for any staff who did not receive appropriate training, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance. |
| **Progress Report Due Date(s):** 12/18/201702/26/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 24 Curriculum review | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that although the district has a policy regarding curriculum and supplemental material adoption, the district does not ensure that individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. |
| **Description of Corrective Action:** Our curriculum adoption process currently requires all teachers to review educational materials for the following: "There are no generalizations in the text on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation." We will have to update the language of this item. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent of Schools | **Expected Date of Completion:**11/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of updated Curriculum Adoption Guidelines |
| **Description of Internal Monitoring Procedures:** All curriculum adoptions require teachers to complete a rubric to assess materials for quality, content, and generalizations. Before moving forward with piloting, the curriculum office will review all rubrics and ensure that teachers completed this critical step in the process. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The finding indicated that the district has a policy regarding curriculum and supplemental material adoption. The corrective action must address the implementation of the policy and protocals. |
| **Department Order of Corrective Action:**Conduct staff training to ensure that individual teachers in the district 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. Training should also address the use of appropriate activities, discussions and/or supplementary materials to provide balance and context for any such stereotypes depicted in such materials. |
| **Required Elements of Progress Report(s):** By December 18, 2017, provide a description of procedures that ensure individual teachers in the district 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. Procedures must also ensure that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such materials.By February 26, 2018, provide evidence of staff training on curriculum review 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. Please include the training materials, agenda, and signed attendance sheet with staff name, role and signature. |
| **Progress Report Due Date(s):** 12/18/201702/26/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district does not evaluate all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. |
| **Description of Corrective Action:** In our annual needs assessment process, we evaluate our K-12 program. Moving forward, this process will include an equity audit, using the Integrative Comprehensive Systems as a guide, to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent | **Expected Date of Completion:**01/01/2018 |
| **Evidence of Completion of the Corrective Action:**An equity audit report, using the Integrative Comprehensive Systems as a guide, as we prepare for our Needs Assessment that will be presenting at the beginning of the budget cycle. |
| **Description of Internal Monitoring Procedures:** We already have an internal needs assessment process. This equity audit will become a part of the review, in addition to the current staffing, programmatic, and operational review. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, provide a description of procedures developed so that the district conducts an annual self-evaluation of all aspects of its K-12 programs to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. Procedures must also ensure that the district provides recommendations, as necessary, for changes as indicated by the self-assessment.  Bt December 18, 2017, provide copies of any tools designed to conduct the annual self-evaluation. Additionally, provide evidence of training and/or dissemination of these tools and procedures to staff responsible for implementation. By March 22, 2018, submit the results of the annual self-evaluation of all aspects of its K-12 programs to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. Please include recommendations, as necessary, for changes as indicated by the self-assessment. |
| **Progress Report Due Date(s):** 12/18/201703/22/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** ELE 3 Initial Identification | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documentation and staff interviews indicated that although some English learners (ELs) at the high school came to the district with documentation indicating that they were ELs and were receiving ESL services, the district failed to code these students in the database as ELs. The district's current initial identification practices are not consistently in compliance with 603 CMR 14.02(1) that requires districts to follow initial identification procedures in accordance with the Department's guidelines. Please see the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners." |
| **Description of Corrective Action:** Currently, all ELL students who register must complete a home language survey. At that time, all students are evaluated for services. We will revise our district ELL Guide to ensure that this assessment process includes communication with the district Data & Education Technology Administrator to ensure that all students are coded properly in compliance with initial identification procedures. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent of SchoolsCheney Harper, ELL Teacher | **Expected Date of Completion:**01/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of updated ELL District Guide that complies with initial identification procedures outlined in "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners." |
| **Description of Internal Monitoring Procedures:** Our ELL Procedural Guide is reviewed yearly. This review will include a review of "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" and any updates in that document. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 3 Initial Identification | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, please: 1) submit the district's updated ELL District Guide; 2) provide training to all staff members involved in the initial identification process to ensure that they are all knowledgeable about the changes and submit the training materials, sign-in sheets and agendas; and 3) complete and submit the "Initial Identification Testing Data" form that is available in the Document Library for SY 2017-18. |
| **Progress Report Due Date(s):** 12/18/2017 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** ELE 5 Program Placement and Structure | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documentation and staff interviews indicated that the district did not provide ELE services to some students who registered in the high school with documentation showing that they were ELs and receiving ELE services in their former district. Additionally, the district does not have an ESL teacher or an ELE program at the high school to meet the academic and language needs of its high school EL population by providing them with English language development that will promote and support the rapid acquisition of English language of these students as required in G.L. c. 71A. |
| **Description of Corrective Action:** In FY17, ELE understaffed. This was outlined in our district Needs Assessment. Based on SC budget guidance, we added an additional 1.0 ELE teacher beginning FY18. The district now has an ELE program with an ESL teacher and all HS students who are eligible will receive services in alignment with "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners." |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent of Schools | **Expected Date of Completion:**11/01/2018 |
| **Evidence of Completion of the Corrective Action:**The schedule of the ESL teacher who was hired to facilitate an ELE program at the MS and HS which will align to "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners." |
| **Description of Internal Monitoring Procedures:** Our ELL Procedural Guide is reviewed yearly. This review will include a review of "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" and any updates in that document. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, provide a copy of the 2017-18 ESL teacher schedules for all grade levels in the district's middle and high schools. All schedules should include the following for each block of time: names of the ELL student; grade level for each student; and English proficiency level for each student. |
| **Progress Report Due Date(s):** 12/18/2017 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** ELE 6 Program Exit and Readiness | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documentation and staff interviews indicated that for some high school EL students, the district exited them from the ELE program by failing to code them as ELs, even though these students provided documentation from their former districts demonstrating that they were ELs and had not yet met the minimum exit criteria required for EL reclassification. The district's current reclassification practices are not consistently in compliance with 603 CMR 14.02 that requires districts to establish exit criteria in accordance with the Department's guidelines. |
| **Description of Corrective Action:** In FY17, ELE understaffed. This was outlined in our district Needs Assessment. Based on SC budget guidance, we added an additional 1.0 ELE teacher beginning FY18. The district now has an ELE program with an ESL teacher and all HS students who are eligible will receive services in alignment with "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent | **Expected Date of Completion:**02/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of updated ELL District Guide that complies with reclassification procedures outlined in "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners." |
| **Description of Internal Monitoring Procedures:** Our ELL Procedural Guide is reviewed yearly. This review will include a review of "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" and any updates in that document. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, please submit the district's updated ELL District Guide. 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. |
| **Progress Report Due Date(s):** 12/18/2017 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** ELE 10 Parental Notification | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documentation indicated that the parent notification form that is sent to EL parents upon students' initial identification as ELs and annually thereafter does not include information regarding the specific exit requirements and parents' right to apply for a waiver or to decline ELE services. |
| **Description of Corrective Action:** We will revise our district ELL Guide, which includes the parent notification form, to ensure that the letter includes information regarding the specific exit requirements and parents' right to apply for a waiver or to decline ELE services. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent | **Expected Date of Completion:**11/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of updated parent notification form. |
| **Description of Internal Monitoring Procedures:** Our ELL Procedural Guide is reviewed yearly. This review will include a review of "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" and any updates in that document. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 10 Parental Notification | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December, 18, 2017, submit a copy of the revised parent notification letter the district will use. |
| **Progress Report Due Date(s):** 12/18/2017 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** ELE 14 Licensure Requirements | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documentation and staff interviews indicated that the district did not meet its obligation to take all reasonable steps to assign students who enrolled in the district's high school as ELs to SEI endorsed teachers. |
| **Description of Corrective Action:** To ensure that more high school teachers are SEI endorsed, we become a registered provider for MA DESE to offer the RETELL course. This fall, 30 of our teachers are taking the course. This will ensure a large number of teachers who are SEI endorsed and if a student is assigned to a teacher who does not yet have the endorsement, they will take the course immediately. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent | **Expected Date of Completion:**01/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of schedules for SEI endorsed course, as well as roster of all high school teachers enrolled, a full list of HS endorsed teachers and the schedules of all ELE students at the HS. |
| **Description of Internal Monitoring Procedures:** Our ELL Procedural Guide is reviewed yearly. This review will include a review of "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" and any updates in that document. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, please submit the schedules for the SEI endorsement courses, as well as a roster of all high school teachers enrolled in the course, a full list of SEI endorsed high school teachers, and the schedules of all ELE students at the high school. |
| **Progress Report Due Date(s):** 12/18/2017 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** ELE 17 Program Evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documentation and staff interviews indicated that the district does not have a comprehensive process to evaluate the effectiveness of its ELE programming in developing students' English language skills and increasing their ability to participate meaningfully in the district's educational program. |
| **Description of Corrective Action:** We will begin to implement a comprehensive process to evaluate the effectiveness of its ELE programming in developing students' English language skills and increasing their ability to participate meaningfully in the district's educational program |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent of SchoolsCheney Harper, Dominique Sutherland, ELL teachers | **Expected Date of Completion:**06/01/2018 |
| **Evidence of Completion of the Corrective Action:**A report outlining the results of that review. |
| **Description of Internal Monitoring Procedures:** Our ELL Procedural Guide is reviewed yearly. This review will include a review of "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" and any updates in that document. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 10/12/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, please complete the program evaluation tool that is available at http://www.doe.mass.edu/ell/ProgramEvaluation.pdf. The district must complete all of the components of the 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. Please provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation. 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. |
| **Progress Report Due Date(s):** 03/22/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** ELE 18 Records of ELL students | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that EL student records do not consistently include results of identification and proficiency tests and evaluations, report cards, and MCAS/PARCC reports. |
| **Description of Corrective Action:** We will review all ELL student records and ensure that all include results of identification and proficiency tests and evaluations, report cards, and MCAS/PARCC reports. |
| **Title/Role(s) of Responsible Persons:**Katie Novak, Assistant Superintendent | **Expected Date of Completion:**06/01/2018 |
| **Evidence of Completion of the Corrective Action:**Submission of selected ELL student records using updated filing procedures, aligned to "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" and any updates in that document. |
| **Description of Internal Monitoring Procedures:** Our ELL Procedural Guide is reviewed yearly. This review will include a review of "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" and any updates in that document. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 18 Records of ELL students | **Corrective Action Plan Status:** Approved **Status Date:** 10/16/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2017, submit a description of procedures developed to ensure that ELL records contain all required documents including the results of identification and proficiency tests and evaluations, report cards, and MCAS/PARCC reports. Provide evidence of training on the newly developed procedures to appropriate staff. Please include the training materials, agenda, and signed attendance sheet with staff name, role and signature. By February 26, 2018, subsequent to all corrective actions, submit the results of an administrative record review of a sample ELL records across all levels ensure that these records contain the required documents. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance.\*Please note when conducting internal monitoring, the school must maintain the following documentation and make it available to the Department upon request: a) list of the student names and grade levels for the records reviewed; b) date of the review; and c) name of person(s) who conducted the review, their role(s), and signature(s). |
| **Progress Report Due Date(s):** 12/18/201702/26/2018 |