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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: Nauset

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 09/02/2017.

**Mandatory One-Year Compliance Date:** **09/02/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 51 | Appropriate special education teacher licensure | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |
| CR 26A | Confidentiality and student records | Partially Implemented |
| ELE 3 | Initial Identification | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |
| ELE 18 | Records of ELL students | Partially Implemented |

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| **Criterion & Topic:**  SE 51 Appropriate special education teacher licensure | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of teacher licensure indicated that one teacher at Nauset Regional High School who designs and provides direct special education services described in IEPs is not appropriately licensed. | | |
| **Description of Corrective Action:**  Jacob Pickard is now currently licensed #499444 | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Ann Caretti, Director of Student Services | | **Expected Date of Completion:**  09/28/2017 |
| **Evidence of Completion of the Corrective Action:**  Jacob Pickard is now currently licensed #499444 | | |
| **Description of Internal Monitoring Procedures:**  Nauset will review all certifications annually | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 51 Appropriate special education teacher licensure | **Corrective Action Plan Status:** Approved  **Status Date:** 10/02/2017  **Correction Status:** Corrected | |
| **Basis for Decision:**  The identified teacher has completed all requirements for licensure with the Department. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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| **Criterion & Topic:**  CR 3 Access to a full range of education programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of the Nondiscrimination Policy Statement in the district's student/family handbooks indicated that homelessness as a protected category is not included. | | |
| **Description of Corrective Action:**  CR3 Student Handbook Add on page 14 above ?Activities and Clubs? please insert the following:  Accessibility to a Full Range of Education Programs  All students, regardless of race, sex, religion, national origin, sexual orientation, disability, gender identify or homelessness, have equal access to the general education program and the full range of any occupational/vocational education programs offered by the district. This will be corrected by October 30, 2017. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Ann Caretti, Director of Student Services | | **Expected Date of Completion:**  09/28/2017 |
| **Evidence of Completion of the Corrective Action:**  The Handbook is in the process of being changed to include the language above. | | |
| **Description of Internal Monitoring Procedures:**  The Handbook will be reviewed annually | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date:** 10/03/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of changes to Student/Family Handbook indicating inclusion of 'homelessness' in list of protected categories of the Non-discrimination Policy Statement. Provide information on the actions taken to notify the school community of changes to the handbook by November 21, 2017. | | |
| **Progress Report Due Date(s):**  11/21/2017 | | |

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| **Criterion & Topic:**  CR 8 Accessibility of extracurricular activities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of the district's policy regarding accessibility of extracurricular activities indicated that homelessness as a protected category is not included. | | |
| **Description of Corrective Action:**  CR 8 Principal was asked to add Homelessness in the Student Handbook under  Nondiscrimination on page 47. This will be corrected by October 30, 2017. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Ann Caretti, Director of Student Services | | **Expected Date of Completion:**  09/28/2017 |
| **Evidence of Completion of the Corrective Action:**  The Handbook will be corrected by October 30, 2017. | | |
| **Description of Internal Monitoring Procedures:**  The Handbook will be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved  **Status Date:** 10/03/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of changes to handbooks indicating inclusion of 'homelessness' in list of protected categories of the Non-discrimination Policy Statement, specifically in relation to policies for equal access in athletics and extracurricular activities. Provide information on the actions taken to notify the school community of changes to the policy and handbooks by November 21, 2017. | | |
| **Progress Report Due Date(s):**  11/21/2017 | | |

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of the district's Bullying Prevention Policy and Bullying Prevention and Intervention Plan, as posted on its website, indicated that information regarding protections to students who are bullied by a member of the school staff is not included. | | |
| **Description of Corrective Action:**  Nauset Public Schools Bullying Plan, Policy and Reporting Forms | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Ann Caretti, Director of Student Services | | **Expected Date of Completion:**  09/28/2017 |
| **Evidence of Completion of the Corrective Action:**  http://www.nausetschools.org/documents.cfm?id=3615.11914 | | |
| **Description of Internal Monitoring Procedures:**  All forms and policies are reviewed annually | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 10/02/2017  **Correction Status:** Corrected | |
| **Basis for Decision:**  The district has posted the revised Bullying Prevention Policy and the revised Bullying Prevention and Intervention Plan to include all current regulatory language. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district does not notify parents and students of the name(s) and contact information of the person(s) designated to coordinate compliance under Title IX and Section 504. | | |
| **Description of Corrective Action:**  The Nauset Handbook has been updated. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Ann Caretti, Director of Student Services | | **Expected Date of Completion:**  09/28/2017 |
| **Evidence of Completion of the Corrective Action:**  http://www.nausetschools.org/files/filesystem/2017-18\_NRHS%20Student%20Handbook.pdf | | |
| **Description of Internal Monitoring Procedures:**  The handbook will be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date:** 10/02/2017  **Correction Status:** Corrected | |
| **Basis for Decision:**  The district has provided evidence that the names and contact information of person(s) designated to coordinate compliance under Title IX and Section 504 is available to all students and parents through the district website. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the notice for students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion is not sent within five days from the student's tenth consecutive absence. | | |
| **Description of Corrective Action:**  CR 16 The Principal will develop letters in accordance with the requirement of CR 16. Letters will be sent to students by November 1, 2017. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Ann Caretti, Director of Student Services | | **Expected Date of Completion:**  09/28/2017 |
| **Evidence of Completion of the Corrective Action:**  CR 16 The Principal will develop letters in accordance with the requirement of CR 16. Letters will be sent to students by November 1, 2017. | | |
| **Description of Internal Monitoring Procedures:**  This process will be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/03/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district did not submit example of letter to be sent to the student and student's parent(s), or evidence of change of policy. | | |
| **Department Order of Corrective Action:**  Submit example of letter developed to be sent to student and parent(s) following an absence of ten consecutive days. Identify who is responsible for tracking absences and following up with letters and communications to students and parents. | | |
| **Required Elements of Progress Report(s):**  Submit letter developed to be sent student and parent(s) following ten consecutive days of absence. Provide description of policy and procedure indicating who is responsible for tracking and sending communications by November 21, 2017. | | |
| **Progress Report Due Date(s):**  11/21/2017  01/17/2018 | | |

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| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that the district has created a form to assist in the review of curriculum materials; however, teachers have not been provided with guidance or training on reviewing all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | |
| **Description of Corrective Action:**  Asst. Superintendent has researched various curriculum review training materials. Training will occur first to the Curriculum and Assessment Committee and then to all teachers across the District. | | |
| **Title/Role(s) of Responsible Persons:**  Keith Gauley, Assistant Superintendent | | **Expected Date of Completion:**  01/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Training outlines and materials along with date training occurred. | | |
| **Description of Internal Monitoring Procedures:**  This process will be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 10/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training staff including materials, agenda, and signed attendance sheets by January 17, 2018. | | |
| **Progress Report Due Date(s):**  01/17/2018 | | |

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that the district does not evaluate all aspects of its  K-12 programs annually to ensure that all students have equal access to all programs, including athletics and other extracurricular activities. | | |
| **Description of Corrective Action:**  CR 25 A survey will be created and sent to parents staff and students. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Ann Caretti, Director of Student Services | | **Expected Date of Completion:**  09/28/2017 |
| **Evidence of Completion of the Corrective Action:**  CR 25 A survey will be created and sent to parents staff and students. | | |
| **Description of Internal Monitoring Procedures:**  A self evaluation will be conducted annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district submitted a plan of action, however, the district has not yet developed the survey tools that will be implemented to ensure that they appropriately address questions of access. | | |
| **Department Order of Corrective Action:**  Submit the tools that have been developed to solicit feedback on student access to all programs, extracurriculars, and athletics. Submit the summary evaluation, including recommendations for actions as a result of responses. | | |
| **Required Elements of Progress Report(s):**  Submit the survey tools that will be used to gain feedback from students, faculty, and parents to determine that students have equal access to all programs, including athletics and other extracurricular activities by November 21, 2017. Submit a report and analysis of the results of the surveys. Indicate any changes that will be made as a result of the responses and evaluation by March 21, 2018. | | |
| **Progress Report Due Date(s):**  11/21/2017  03/21/2018 | | |

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| **Criterion & Topic:**  CR 26A Confidentiality and student records | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that Nauset Regional High School records do not include a log of access in accordance with federal and state requirements. | | |
| **Description of Corrective Action:**  CR 26A Director of Student Services sent an email to the principals 9/28/17. Form is to be included in all student files by Nov. 1, 2017. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Ann Caretti, Director of Student Services | | **Expected Date of Completion:**  09/28/2017 |
| **Evidence of Completion of the Corrective Action:**  CR 26A Director of Student Services sent an email to the principals 9/28/17. Form is to be included in all student files by Nov. 1, 2017. | | |
| **Description of Internal Monitoring Procedures:**  This process will be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 26A Confidentiality and student records | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/02/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district indicated that a directive had been sent to principals requiring that all student files contain an access log. | | |
| **Department Order of Corrective Action:**  Submit a copy of the access log.  Conduct a review of student records to ensure that access logs are evident and develop a report of the results of the record review and include the following:  - The number of records reviewed;  - The number of records in compliance;  - For records not in compliance, determine the root cause(s); and  - The specific action(s) taken by the school to remedy the non-compliance. | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the access log. Submit a report of the results of the record review and include the following:  - The number of records reviewed;  - The number of records in compliance;  - For records not in compliance, determine the root cause(s); and  - The specific action(s) taken by the school to remedy the non-compliance.  Submit all required evidence by November 21, 2017. | | |
| **Progress Report Due Date(s):**  11/21/2017 | | |

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| **Criterion & Topic:**  ELE 3 Initial Identification | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of the "Implementation Practices" document submitted by the district included inaccurate information regarding the initial identification process such as classifying a student as an English learner (EL) if there is another language on the Home Language Survey (HLS) or defining ACCESS for ELs as a screening test. District documentation also indicated that the district has not established English language proficiency screening procedures to determine each potential EL preschool student's English language proficiency level. The district's current implementation practices described in the documentation are not in compliance with 603 CMR 14.02(1) that requires districts to establish procedures in accordance with the Department's guidelines. | | |
| **Description of Corrective Action:**  Implementation practices are being re-written to align with current practices and DESE regulations. | | |
| **Title/Role(s) of Responsible Persons:**  Carina DaSilva, ESL Coordinator | | **Expected Date of Completion:**  10/02/2017 |
| **Evidence of Completion of the Corrective Action:**  Revised implementation practices 'Document'. | | |
| **Description of Internal Monitoring Procedures:**  This process will be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 3 Initial Identification | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1. Please complete the "Initial Identification Procedures for ELs and FELs" form available 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 or FEL 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. Please provide information regarding the training opportunities provided to the staff involved in the initial identification process to keep them informed about the revised policy and procedures. Please include meeting dates, minutes and sign-in sheets.  3. Please complete the form "Initial Identification Testing Data" located in the Document Library to provide the names and scores of all the students who have been screened for the SY 2017-18 .  4. Please submit the district's implementation practices document. | | |
| **Progress Report Due Date(s):**  11/21/2017 | | |

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| **Criterion & Topic:**  ELE 17 Program Evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of documents indicated that the district does not have a comprehensive process to evaluate the effectiveness of its English language education (ELE) programming in developing students' English language skills and increasing their ability to participate meaningfully in the educational program. Please see HYPERLINK "http://www.doe.mass.edu/ell/ProgramEvaluation.pdf" http://www.doe.mass.edu/ell/ProgramEvaluation.pdf . | | |
| **Description of Corrective Action:**  Program Evaluation practices are being reviewed and will include additional data elements eg: state targets, access scores, MCAS 2.0 results along with the current parent and teacher surveys. | | |
| **Title/Role(s) of Responsible Persons:**  Carina DaSilva, ESL Coordinator | | **Expected Date of Completion:**  10/02/2017 |
| **Evidence of Completion of the Corrective Action:**  Evidence will be documented in a chart form and response to program concerns will be documented. | | |
| **Description of Internal Monitoring Procedures:**  This process will be monitored annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1. Please complete the program evaluation tool that is available at http://www.doe.mass.edu/ell/ProgramEvaluation.pdf The district must complete all of the components of the attached form in order to evaluate the effectiveness of its ELE program in developing students? English language skills and increasing their ability to participate meaningfully in the district's educational program.  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):**  01/17/2018 | | |

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| **Criterion & Topic:**  ELE 18 Records of ELL students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that records do not consistently include initial or annual parent notification letters, results of identification and proficiency tests and evaluations, current ACCESS test information, progress reports, evidence of translations of documents when requested in the Home Language Survey, or evidence of follow-up monitoring, if applicable. | | |
| **Description of Corrective Action:**  Required record elements were reviewed at September ESL staff meeting. Periodic review of student folders will occur the first two months of each school year. | | |
| **Title/Role(s) of Responsible Persons:**  Carina DaSilva, ESL Coordinator | | **Expected Date of Completion:**  10/06/2017 |
| **Evidence of Completion of the Corrective Action:**  Folders will have required information and documentation. | | |
| **Description of Internal Monitoring Procedures:**  Periodic review of student folders. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 18 Records of ELL students | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/03/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district indicated that requirements were reviewed but did not submit evidence or description of tracking and review process, or results of a review of student records. | | |
| **Department Order of Corrective Action:**  Submit a description of the internal oversight and tracking system with periodic reviews, along with the name/role of the designated person(s) responsible.  Submit a report of the results of the record review and include the following:  The number of records reviewed;  The number of records in compliance;  For records not in compliance, determine the root cause(s); and  The specific action(s) taken by the district to remedy the non-compliance. | | |
| **Required Elements of Progress Report(s):**  Submit a description of the internal oversight and tracking system with periodic reviews, along with the name/role of the designated person(s) responsible by November 21, 2017 .  Submit a report of the results of the record review and include the following:  • The number of records reviewed;  • The number of records in compliance;  • For records not in compliance, determine the root cause(s); and  • The specific action(s) taken by the charter school to remedy the non-compliance  by November 21, 2017. | | |
| **Progress Report Due Date(s):**  11/21/2017 | | |