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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: Needham

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 09/22/2017.

**Mandatory One-Year Compliance Date:** **09/22/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 14 | Review and revision of IEPs | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 18A | School district employment practices | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| ELE 6 | Program Exit and Readiness | Partially Implemented |
| ELE 10 | Parental Notification | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |

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

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| **Criterion & Topic:**  SE 14 Review and revision of IEPs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that on or before the anniversary date of the IEP, the district does not consistently convene a Team meeting to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate. | | |
| **Description of Corrective Action:**  All special education coordinators (school-based administrators) will receive administrative training on the requirement to hold a team meeting before the expiration of the IEP, to reconvene teams when needed to address any lack of expected progress towards annual goals or general curriculum, as well as process & procedures to ensure compliance with SE 14. All special education staff, including special education liaisons, related service providers, and team chair persons will be trained on the requirement to hold a team meeting before the expiration of the IEP. Training will include documentation requirements when team meetings are rescheduled beyond the one-year date at parent's request.  The Special Education Policy and Procedure Manual will be revised and reviewed with all special education staff as part of the above training and on an annual basis. Procedures will clarified as follows:  The date and time proposed in the Meeting Invitation (N3) should be sufficiently in advance of the one-year anniversary to allow the parent and district to establish mutually agreed upon dates before the one-year anniversary.  If, at parent request, the meeting must be rescheduled beyond the one-year date, the district must clearly document that the Team meeting has been rescheduled after the IEP's anniversary date at the parent's request. The liaison should use the  re-issued Meeting Invitation (N3) form for this documentation. The special education coordinator and special education director at each level will be provided a copy of the re-issued Meeting Invitation for purposes of internal oversight and tracking.  After each progress reporting period, special education coordinators, team chairpersons, and special education liaisons will review progress/report cards and note any student who is not making expected progress toward their annual goals or in the general curriculum. These teams will reconvene to review and revise the IEP to address any lack of expected progress. | | |
| **Title/Role(s) of Responsible Persons:**  Directors of Special Education, Preschool, K-8, High School | | **Expected Date of Completion:**  06/20/2018 |
| **Evidence of Completion of the Corrective Action:**  Signed participant attendance sheets/agendas/training materials.  Meeting invitations, IEPs, special education procedural handbook. | | |
| **Description of Internal Monitoring Procedures:**  The district's IEP software company includes a dashboard noting IEPs out of compliance. This data will be reviewed monthly by special education coordinators for patterns of non-compliance. Identified schools and or individuals will be provided additional training and supervision.  The Director of Special Education at each level will periodically review student records to ensure that when annual IEP Team meetings are scheduled beyond the anniversary date of the IEP at the parent's request, this request is clearly documented in the student record. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 14 Review and revision of IEPs | **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 January 12, 2018, submit evidence of training of appropriate staff to ensure on or before the anniversary date of the IEP, the district consistently convenes a Team meeting to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By April 13, 2018, submit the results of a review of records across all levels to ensure that on or before the anniversary date of the IEP, the district consistently convenes a Team meeting to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate. Include the number of records reviewed; number of records in compliance; for any records not in compliance, determine the root cause and specific corrective actions taken to remedy the non-compliance.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  01/12/2018  04/13/2018 | | |

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

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| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and staff interviews indicated that IEP Teams do not always consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing. | | |
| **Description of Corrective Action:**  All special education coordinators (school-based administrators), special education liaisons, related service providers, and team chairpersons will receive training on the requirement to consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing, as well as process & procedures to ensure compliance with SE 18a. Additional administrative training for special education coordinators and team chairpersons will include process & procedures to monitor compliance.  The Special Education Policy and Procedure Manual will be updated and reviewed with all special education staff as part of the above training and on an annual basis. Procedures will clarified as follows:  The Team Meeting Agenda will include discussion to consider and address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing;  When a student is identified with a disability that affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing, the development or revision of an IEP will include focus on accommodations, modifications, and/or skill instruction to address social skill development and vulnerabilities.  The N1 letter under "What Other Factors Were Relevant to the Decision?" will include documentation of team discussion and consideration of whether the student needs to learn additional social and language skills in order to avoid and respond to bullying along with the determination. | | |
| **Title/Role(s) of Responsible Persons:**  Directors of Special Education, Preschool, K-8, High School | | **Expected Date of Completion:**  06/20/2018 |
| **Evidence of Completion of the Corrective Action:**  Signed participant attendance sheets/agendas/training materials.  Meeting Agenda, N1, IEPs | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education at each level will periodically review student records to ensure that teams are considering and specifically addressing the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing.  Team Meeting Checklist will include team's consideration of bullying, harassment, or teasing and will be submitted to the Special Education Administrator or team chairperson at each level for ongoing monitoring. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **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 January 12, 2018, submit evidence of training of appropriate staff to ensure that IEP Teams always consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By January 12, 2018, for all students identified by the Department, submit evidence of reconvened Team meetings held to consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing. Evidence will include signed attendance sheets, an N1 letter, and signed copies of the IEP Response Section and Placement Consent Form.  By April 13, 2018, submit the results of a review of student records across all levels to ensure that IEP Teams always consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing. Include the number of records reviewed; the number of records in compliance; and for any records not in compliance, determine the root cause and specific corrective actions taken to remedy the non-compliance.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  01/12/2018  04/13/2018 | | |

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

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that if a student is removed from the general education classroom at any time, IEP Teams do not consistently state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  Review of current IEPs indicated that although each IEP contained a statement, the language used did not clearly and consistently state the reasons why the student's non-participation was necessary to ensure that the placement was the least restrictive environment possible.  The district will provide training to the special education coordinators, special education liaisons, and team chairpersons on selecting the Least Restrictive Environment possible and writing clear statements of justification for non-participation in general education. | | |
| **Title/Role(s) of Responsible Persons:**  Directors of Special Education, Preschool, K-8, High School | | **Expected Date of Completion:**  06/20/2018 |
| **Evidence of Completion of the Corrective Action:**  Signed participant attendance sheets, agendas, sample statements of non-participation | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education at each level will periodically review student records to ensure Non-Participation statements include the reason the removal from the general education classroom is considered critical to the student's program as well as 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:** 11/01/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 12, 2018, submit evidence of training of appropriate staff to ensure that if a student is removed from the general education classroom at any time, IEP Teams consistently state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By April 13, 2018, submit the results of a review of student records across all levels to ensure that if a student is removed from the general education classroom at any time, IEP Teams consistently state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Include the number of records reviewed; the number of records in compliance; and for any records not in compliance, determine the root cause and specific corrective actions taken to remedy the non-compliance.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  01/12/2018  04/13/2018 | | |

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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:**  Onsite observations at the Hillside School indicated that a space utilized for pull-out special education services is not given the same priority as general education programs in the allocation of instructional space in order to minimize the stigmatization of eligible students, nor is it at least equal in all physical respects to the average standards of general education facilities. Pull-out services are held in a location that is shared with the nurse's office in which file cabinets and bookcases create a partial wall between the pull-out service space and two beds used for sick students, compromising confidentiality and increasing auditory distractions.  Additional onsite observations at the Hillside School indicated that the Early Learning Center (ELC), a substantially separate program consisting of six students and six staff members, is housed in a space that is considerably smaller than general education classrooms. Within this space, there are cubbies for the students to work individually with a teacher or specialist in addition to tables and a calming space, creating a cramped environment with increased visual and auditory distractions. | | |
| **Description of Corrective Action:**  The location of the pull-out services for one of the special education liaisons will be moved to another location that increases confidentiality and limits auditory distractions.  The location of the Early Learning Center (ELC) will be moved to a larger classroom. | | |
| **Title/Role(s) of Responsible Persons:**  Assist Superintendent Support Services  Principal & AP ofl Hillside School  Dir SpEd | | **Expected Date of Completion:**  09/21/2018 |
| **Evidence of Completion of the Corrective Action:**  Site visit | | |
| **Description of Internal Monitoring Procedures:**  The Hillside Principal and Assistant Principal/Special Education Coordinator will assign classrooms space that meet this requirement and ensure student confidentiality.  The Assistant Superintendent for Student Support Services and Director of Special Education, K-8 will complete an annual walk-through of the building to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **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 January 12, 2018, submit a proposed floor plan demonstrating the space utilized for pull-out special education services has been relocated from a shared nurse's office to a classroom and is now given the same priority as general education programs in the allocation of instructional space in order to minimize the stigmatization of eligible students, and is at least equal in all physical respects to the average standards of general education facilities. Additionally this floor plan should demonstrate that the Early Learning Center (ELC), a substantially separate program, has been relocated to a space that is equal in all physical respects to the average standards of general education facilities and limits visual and auditory distractions.    By April 13, 2018, a representative from the Department will conduct an on-site visit to verify the re-location of classrooms at the Hillside Elementary School. | | |
| **Progress Report Due Date(s):**  01/12/2018  04/13/2018 | | |

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

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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 documents indicated that although the district provides all students, regardless of race, color, sex, gender identity, religion, national origin, sexual orientation, or disability, with equal access to general education programming, the nondiscrimination statements in the school committee policy and on the website are missing homelessness as a protected category. | | |
| **Description of Corrective Action:**  Include the protected category of homelessness in the policy and on the website. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent for Student Support Services | | **Expected Date of Completion:**  06/20/2018 |
| **Evidence of Completion of the Corrective Action:**  Revised policy  Copy of communication as evidence of revised policy disseminated to school community | | |
| **Description of Internal Monitoring Procedures:**  The district will annually review policies under the direction of the Policy Sub Committee of the School Committee and Building principals and central administration will monitor that the revised policy is implemented. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **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 January 12, 2018, submit evidence of the updated nondiscrimination policy as approved by the school committee, which includes all protected categories, including homelessness.  By January 12, 2018, submit evidence of dissemination of the updated nondiscrimination policy to the school community. | | |
| **Progress Report Due Date(s):**  01/12/2018 | | |

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

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| **Criterion & Topic:**  CR 9 Hiring and employment practices of prospective employers of students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that although the district requires employers recruiting at the school to sign a statement that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices, the statement does not specifically identify the following protected categories: race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. | | |
| **Description of Corrective Action:**  The statement for employers recruiting at the school will be revised to include the protected categories: race, color, national origin, sex, gender identity, handicap, religion, and sexual orientation | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent for Student Support Services  High School Principal | | **Expected Date of Completion:**  06/20/2018 |
| **Evidence of Completion of the Corrective Action:**  Revised statement  Copy of communication showing statement was disseminated to appropriate staff | | |
| **Description of Internal Monitoring Procedures:**  Central Administration and High School Principal will monitor statement complicance | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of 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 January 12, 2018, submit a sampling of signed and updated employer recruiting statements that ensure the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices, including the protected categories of race, color, national origin, sex, gender identity, handicap, religion and sexual orientation.  By January 12, 2018, submit evidence of dissemination of the updated employer recruiting statements to appropriate staff. | | |
| **Progress Report Due Date(s):**  01/12/2018 | | |

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

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| **Criterion & Topic:**  CR 18A School district employment practices | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that although district employment practices are generally free from discrimination, the school committee policy, "Equal Employment Opportunity," does not specify the required protected categories and the "Human Resources Search Process Protocol" is missing the protected category of disability. | | |
| **Description of Corrective Action:**  The school committee policy and Human Resources Process Protocol will be revised to include the protected category of disability. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent for Human Resources | | **Expected Date of Completion:**  06/20/2018 |
| **Evidence of Completion of the Corrective Action:**  Revised Employment policy and "Human Resources Process Protocol"  Copy of communication as evidence of revised policy disseminated to school community | | |
| **Description of Internal Monitoring Procedures:**  The district will annually review policies under the direction of the Policy Sub Committee of the School Committee and the Human Resources Process Protocol will be reviewed on a regular basis to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 18A School district employment practices | **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 January 12, 2018, submit evidence of the updated school district "Equal Employment Opportunity" policy and the "Human Resources Search Process Protocol" that include all protected categories. Specifically, the updated "Equal Employment Opportunity" policy will address all protected categories including race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. The "Human Resources Search Process Protocol" will address all protected categories, including disability.  By January 12, 2018, submit evidence of dissemination to all staff of the updated policy and process protocol. | | |
| **Progress Report Due Date(s):**  01/12/2018 | | |

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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:**  See SE 55. | | |
| **Description of Corrective Action:**  The location of the pull-out services for one of the special education liaisons will be moved to another location that increases confidentiality and limits auditory distractions.  The location of the Early Learning Center (ELC) will be moved to a larger classroom. | | |
| **Title/Role(s) of Responsible Persons:**  Assist Superintendent Support Services  Principal & AP ofl Hillside School  Dir SpEd | | **Expected Date of Completion:**  09/21/2018 |
| **Evidence of Completion of the Corrective Action:**  Site visit | | |
| **Description of Internal Monitoring Procedures:**  The Hillside Principal and Assistant Principal/Special Education Coordinator will assign classrooms space that meet this requirement and ensure student confidentiality.  The Assistant Superintendent for Student Support Services and Director of Special Education, K-8 will complete an annual walk-through of the building to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 23 Comparability of facilities | **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 January 12, 2018, submit a proposed floor plan demonstrating the space utilized for pull-out special education services has been relocated from a shared nurse's office to a classroom and is now given the same priority as general education programs in the allocation of instructional space in order to minimize the stigmatization of eligible students, and is at least equal in all physical respects to the average standards of general education facilities. Additionally this floor plan should demonstrate that the Early Learning Center (ELC), a substantially separate program, has been relocated to a space that is equal in all physical respects to the average standards of general education facilities and limits visual and auditory distractions.    By April 13, 2018, a representative from the Department will conduct an on-site visit to verify the re-location of classrooms at the Hillside Elementary School. | | |
| **Progress Report Due Date(s):**  01/12/2018  04/13/2018 | | |

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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:**  A review of documents indicated that although the district ensures 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, religion, and national origin, the school committee policy, "Instructional Materials" is missing the protected categories of gender identity and sexual orientation. | | |
| **Description of Corrective Action:**  Revise school committee policy to include the protected categories of gender identity and sexual orientation | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Student Learning | | **Expected Date of Completion:**  06/20/2018 |
| **Evidence of Completion of the Corrective Action:**  Revised school committee policy  Copy of communication as evidence of revised policy disseminated to school community | | |
| **Description of Internal Monitoring Procedures:**  The district will annually review policies under the direction of the Policy Sub Committee of the School Committee and Building principals and central administration will monitor that the revised policy is implemented. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **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 January 12, 2018, submit evidence of the updated school committee policy, "Instructional Materials" that addresses all protected categories, including gender identity and sexual orientation.  By January 12, 2018, submit evidence of dissemination of the updated school committee policy, "Instructional Materials" to all staff. | | |
| **Progress Report Due Date(s):**  01/12/2018 | | |

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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:**  A review of documents indicated that some students have been reclassified as Former English Learners (FELs) before they met the minimum exit criteria determined by the Department. The district's current reclassification practice and procedures are not in compliance with 603 CMR 14.02 that requires districts to establish exit criteria in accordance with the Department's guidelines. | | |
| **Description of Corrective Action:**  The Assistant Superintendent of Student Support Services and ELL Coordinator will work with an ELE Program Consultant to develop Program Exit and Readiness procedures.  The ELL Department will be trained on the newly developed procedures.  The procedure guide will be disseminated to school principals for use in their schools. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Student Support Services  ELL Coordinator | | **Expected Date of Completion:**  09/21/2018 |
| **Evidence of Completion of the Corrective Action:**  Program Exit and Readiness Procedures document  Agenda, attendance, and training materials | | |
| **Description of Internal Monitoring Procedures:**  Needham has a low incidence of ELs, allowing for close monitoring of each step of the reclassification process. The reclassification process will be overseen by the ELL teachers and monitored by the ELL Coordinator. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 6 Program Exit and Readiness | **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 January 12, 2018, submit evidence of the district's revised reclassification policies and procedures.  By January12, 2018, provide evidence of training, including training materials, agenda and attendance sheets, to all staff members involved in the reclassification process on updated reclassification policies and procedures.  By September 8, 2018, submit updated FEL Roster (available in the WBMS Document Library) to provide information for all the ELs in your district who have been reclassified in the last school year. | | |
| **Progress Report Due Date(s):**  01/12/2018  09/08/2018 | | |

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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:**  A review of records and staff interviews at Needham High School indicated that when parents with limited English skills request translations, progress reports and report cards are not consistently translated into their preferred language. | | |
| **Description of Corrective Action:**  The Assistant Superintendent for Student Support Services, Assistant Superintendent for Student Learning, ELL Coordinator, ELL Teacher, and High School Principal will meet to develop a process for timely translation of progress reports and report cards.  For parents with limited English skills who request translation, progress reports and report cards will be translated into their preferred language. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent for Student Support Services  ELL Coordinator  Principal | | **Expected Date of Completion:**  09/21/2018 |
| **Evidence of Completion of the Corrective Action:**  Meeting agenda  Process Guide  Translated progress reports and report cards | | |
| **Description of Internal Monitoring Procedures:**  The ELL Coordinator will review home language surveys on a regular basis and will maintain a data base of parents/guardians requiring language assistance including translation of documents. The ELL Coordinator will monitor the translation of progress reports and report cards at the high school to ensure compliance with this requirement. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 10 Parental Notification | **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 April 13, 2018, provide evidence of the district's updated plan to ensure parents are provided with progress reports and documents in their preferred language. Evidence should include how often ELE progress cards will be issued and oversight and monitoring system to ensure that parents receive them in their preferred language.  By September 8, 2018, submit samples of the progress reports the district sent to parents or legal guardians whose preferred language is not English to inform them of their child's progress in English language acquisition. | | |
| **Progress Report Due Date(s):**  04/13/2018  09/08/2018 | | |

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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:**  A review of documents indicated the district submitted its 2010 CPR report and "Profile of Needham's ELE Program" document as the district's ELE program evaluation. Neither of these documents qualify as acceptable based on the "Program Evaluation Rubric" the Department uses to review districts' ELE program evaluations. The Department concludes 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. | | |
| **Description of Corrective Action:**  A committee will be established to evaluate the ELE Program using the DESE Program Evaluation Tool. The Committee will meet in January and again in June to perform the program evaluation. From the evaluation meetings, an action plan will be developed and implemented that addresses the needs of the ELE Program. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent for Student Support Services  ELL Coordinator | | **Expected Date of Completion:**  09/21/2018 |
| **Evidence of Completion of the Corrective Action:**  Meeting agenda, meeting notes, attendance  Action Steps | | |
| **Description of Internal Monitoring Procedures:**  The ELL Coordinator will oversee the process of the program evaluation and implementation of the action plan items. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 17 Program Evaluation | **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 January 12, 2018 provide evidence of the established committee to evaluate the ELE Program. Evidence should include: 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, agendas and a timeline for the process.  By June 15, 2018, complete the program evaluation tool that is available at http://www.doe.mass.edu/ell/ProgramEvaluation.pdf. The district must complete all of the components of the attached form in order to evaluate the effectiveness of its ELE program in developing students English language skills and increasing their ability to participate meaningfully in the district's educational program.  By September 8, 2018, as a result of the ELE program evaluation, provide the strengths and areas of improvement the district has identified. Evidence should include a plan of action to make appropriate program adjustments or changes, 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. | | |
| **Progress Report Due Date(s):**  01/12/2018  06/15/2018  09/08/2018 | | |