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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: Sabis International Charter (District)

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 05/20/2017.

**Mandatory One-Year Compliance Date:** **05/20/2018**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 3A | Special requirements for students on the autism spectrum | Partially Implemented |
| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 10 | End of school year evaluations | Partially Implemented |
| SE 11 | School district response to parental request for independent educational evaluation | Partially Implemented |
| SE 12 | Frequency of re-evaluation | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 32 | Parent advisory council for special education | Not Implemented |
| SE 34 | Continuum of alternative services and placements | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 10C | Student Discipline | 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 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 18 | Responsibilities of the school principal | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |
| CR 26A | Confidentiality and student records | Partially Implemented |
| ELE 3 | Initial Identification | Partially Implemented |
| ELE 4 | Waiver Procedures | Not Implemented |
| ELE 5 | Program Placement and Structure | Not Implemented |
| ELE 6 | Program Exit and Readiness | Partially Implemented |
| ELE 10 | Parental Notification | Partially Implemented |
| ELE 12 | Equal Access to Nonacademic and Extracurricular Programs | Partially Implemented |
| ELE 18 | Records of ELL students | Partially Implemented |

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

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| **Criterion & Topic:**  SE 3A Special requirements for students on the autism spectrum | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate when a student has a diagnosis of a disability on the autism spectrum, the school is not always documenting a Team's discussion of whether the student has needs resulting from an unusual response to sensory experiences or engagement in repetitive activities or stereotypical movements. | | |
| **Description of Corrective Action:**  The root cause of the problem lies in a lack of proper training for staff who are writing the IEPs. While these requirements are discussed, they are not always documented as having been discussed. The district is developing an internal tracking sheet to track the discussion and consideration of the 7 criteria, which will be included in the student file. Additionally, staff who chair meetings/write IEPs will be re-trained in the considerations that are specific to autistic students. | | |
| **Title/Role(s) of Responsible Persons:**  Melissa Mumby, Special Education Academic Coordinator | | **Expected Date of Completion:**  12/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. A training of all staff who are responsible for chairing meetings/writing IEPs will take place during the week of 8/21/17  2. A sign in sheet will be provided to show that staff members have attended  3. A copy of the power point presentation on IEP writing will be provided  4. A meeting will be scheduled the first week of September 2017 to discuss the needs specific to autistic students for K.O-C. and L.O. | | |
| **Description of Internal Monitoring Procedures:**  1. A checklist will be developed for students who are either on the autism spectrum, or may be identified as such. This checklist will include the 7 criteria, and these criteria will be checked off as they are discussed. The written record of this conversation and it's outcome will be included in the N1 for each of the 8 criteria.  2. A review of student records by the special education coordinator to ensure that the checklist is being filled out, and that the record accurately reflects the consideration of the 7 criteria. This will occur quarterly.  3. Meeting notes will be provided for evidence of meeting. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3A Special requirements for students on the autism spectrum | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit procedures and evidence of training (PowerPoint presentation, sign-in sheet with staff signature and role, checklist for students on the autism spectrum) provided to the special education teachers and Team Chairpersons to ensure when a student has a diagnosis of a disability on the autism spectrum, the Team documents discussion of special requirements for students on the autism spectrum, including whether the student has needs resulting from an unusual response to sensory experiences or engagement in repetitive activities or stereotypical movements, and includes the skills needed to address any identified issues in the IEP, by October 10, 2017.  For the students identified by the Department (KO-C and LO), submit the IEP, N1, and Meeting Summary or meeting notes for the Team meetings held, which give evidence that the Teams reconvened and considered  1) the verbal and nonverbal communication needs of the child;  2) the need to develop social interaction skills and proficiencies;  3) the needs resulting from the child's unusual responses to sensory experiences;  4) the needs resulting from resistance to environmental change or change in daily routines;  5) the needs resulting from engagement in repetitive activities and stereotyped movements;  6) the need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from autism spectrum disorder;  7) and other needs resulting from the child's disability that impact progress in the general curriculum, including social and emotional development,  and included supports and services in IEP goals or accommodations, if applicable, by October 10, 2017.  Conduct a review of records for students on the autism spectrum who have had a Team meeting after staff training, to ensure that discussion of all required topics is documented in the student record and addressed in the IEP as necessary. by February 28, 2018. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/10/2017  12/14/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that the charter school is not implementing procedures to obtain written consent from the student with decision-making authority, upon reaching the age of 18, to continue the student's special education program. | | |
| **Description of Corrective Action:**  The root cause for partially implementing the procedure to obtain written consent from the student making authority, upon reaching the age of 18, to continue the student's special educational program, was inconsistently provided to student for discussion and signature. | | |
| **Title/Role(s) of Responsible Persons:**  Jill Yvon- Special Education Academic Coordinator | | **Expected Date of Completion:**  12/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Sped. Assistant will have file with Age of majority form attached to the IEP file in preparation for the meeting.  2. Student will sign paperwork prior to the conclusion of the meeting.  3. The District will reach out to I.O. who graduated in June 2017 for signature.  4. An IEP Team meeting is scheduled for June 19, 2017 for D.H. Student will sign the Age of majority paperwork. | | |
| **Description of Internal Monitoring Procedures:**  1. In the event that the student does not attend the IEP meeting, the special department will seek out the student for signature.  2. A check-off sheet with student's turning 17 years and older will developed over the summer and utilized for upcoming IEP meetings to ensure implementation. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Clarification of finding: The concern is not whether the school has been documenting that at least one year prior to turning 18, it has informed students that the right to special education decision-making will transfer from the parent to the student, or signing Age of Majority Forms or paperwork. The finding addresses the requirement that each 18 year old student must sign consent to their IEP on their 18th birthday, if they have chosen to act on their own behalf or share decision-making. This should be documented on the Administrative Data Sheet of the IEP.  The school's plan does not include a staff training on revised procedures or a plan for ongoing monitoring to ensure that sole, shared, or delegated consent for the IEP of each student age 18 or older is documented on the IEP, and consent is secured when the student reaches age 18. | | |
| **Department Order of Corrective Action:**  Review the requirement to implement procedures to obtain consent from the student with decision-making authority to continue the student's special education program when the student reaches the age of 18. Please see Administrative Advisory SPED 2011-1 Age of Majority at http://www.doe.mass.edu/sped/advisories/11\_1.html, before developing district procedures and training staff.  Also provide a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible. | | |
| **Required Elements of Progress Report(s):**  Submit procedures and evidence of training (agenda, sign-in sheet with staff signature and role) provided to the special education teachers and Team Chairpersons to ensure each student age 18 or older has signed their IEP consistent with the student's stated preference for sole, shared, or delegated decision-making for their IEP by October 10, 2017.  Also submit a copy of the IEP Administrative Data Sheet and signed IEP for 18 y.o. student DH, which gives evidence that the IEP is signed consistent with the student's preference for decision-making as stated on the Administrative Data Sheet of the IEP by October 10, 2017.  Conduct a review of records for students age 18 and older to ensure that students age 18 and older have signed their IEP consistent with the student's preference for sole, shared, or delegated decision-making by February 28, 2018. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/10/2017  12/14/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate the charter school is not consistently holding a Team meeting within forty-five school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for not consistently holding a Team meeting within 45 school days after receipt of the parent's written consent to an initial evaluation or re-evaluation is due in part to the school's loss of its school psychologist. The school has attempted to contract out but was only recently able to secure a psychologist to perform some of the assessments. Additionally, in cases where the school is able to follow timeline, the school is not consistently showing that the parent failed to make the scheduled meeting, oftentimes creating a gap in when the meeting is supposed to take place, and when it actually takes place. | | |
| **Title/Role(s) of Responsible Persons:**  Melissa Mumby, Special Education Academic Coordinator | | **Expected Date of Completion:**  12/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. The school district will secure a contracted school psychologist for the beginning of the 2017-2018 school year, unless it hires a permanent psychologist before then. This will be evidenced through a contractual agreement and/or documentation that a school psychologist was hired.  2. The district will document all cancelled and rescheduled meetings to show that the district upheld its responsibility to provide a meeting within 45 school days. | | |
| **Description of Internal Monitoring Procedures:**  1. Reports will be pulled at the beginning of the school year from the IEP program for review by the special education coordinator to ensure compliance to timelines  2. A review of student records will ensure that all documentation is occurring. This will be done two times per year by the special education coordinator.  3. If a school psychologist is not hired permanently by the beginning of the year, an ad will continue to be placed until one is able to be hired. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school's plan does not include a staff training on revised procedures to ensure that Team chairpersons document a parent's request for delay of a scheduled initial or three year re-evaluation Team meeting. | | |
| **Department Order of Corrective Action:**  Train special education coordinators, special education teachers and administrative staff on documenting the reasons for delay of an IEP meeting when a Team meeting is not held within forty-five school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation. | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training (agenda, materials used, and sign-in sheet with staff signature and role) provided to special education coordinators, special education teachers and administrative staff on documenting the reasons for delay of an IEP when a Team meeting is not held within forty-five school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation by October 10, 2017.  Conduct a review of records for students across all grade levels with Team meetings held after training is provided, for evidence that each Team meeting is being held within forty-five school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, or that any delays are documented. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance by February 28, 2018.  \*Please note when conducting internal 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  SE 10 End of school year evaluations | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicates when signed consent for an evaluation is received between 30 and 45 school working days before the end of the school year, the charter school is not scheduling a Team meeting to allow for the provision of a proposed IEP, or written notice of the finding that the student is not eligible, within 14 days after the end of the school year. The charter school has scheduled these meetings for the beginning of the next school year. | | |
| **Description of Corrective Action:**  The district has determined that the root cause of not holding meetings within 14 days of the end of the school year is the result of insufficient training of staff in the laws and regulations surrounding the requirements of meeting timelines for evaluations requested at the end of the year. | | |
| **Title/Role(s) of Responsible Persons:**  Melissa Mumby, Special Education Academic Coordinator | | **Expected Date of Completion:**  09/15/2017 |
| **Evidence of Completion of the Corrective Action:**  1. A training for all staff who are responsible for chairing meetings/writing IEPs will take place during the week of 8/21/17.  2. A sign in sheet will be provided to show that staff members have attended.  3. A copy of the Power Point presentation on legal requirements will be provided. | | |
| **Description of Internal Monitoring Procedures:**  1. The special education coordinator will be responsible for receiving all consent to evaluate requests and logging them into a spreadsheet designed to track evaluations  2. The coordinator will create a meeting date for the Team (within the 14 days) as soon as the signed consent to evaluate is received. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 10 End of school year evaluations | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit procedures and evidence of training (PowerPoint presentation, sign-in sheet with staff signature and role) provided to the special education teachers and Team Chairpersons to ensure when signed consent for a special education evaluation is received between 30 and 45 school working days before the end of the school year, the charter school is completing evaluations and scheduling a Team meeting to allow for the provision of a proposed IEP, or written notice of the finding that the student is not eligible, within 14 days after the end of the school year by October 10, 2017. | | |
| **Progress Report Due Date(s):**  10/10/2017 | | |

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

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| **Criterion & Topic:**  SE 11 School district response to parental request for independent educational evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates the school's procedure is to provide for an independent education evaluation if a request is received within 16 months of the evaluation conducted by the charter school without specifying that this 16-month timeline only applies if the student is cost-shared or funded for state wards or is receiving free or reduced cost lunch. | | |
| **Description of Corrective Action:**  The district has determined that the root cause of not meeting this criterion is the result of a misunderstanding of how to determine these students within our district. All students in our district qualify for free lunch; however, clarification was given from the state that students can still be considered "low income" and it would be in the student record. In moving forward, the district will check the income status of the students before the initial/re-evaluation meetings occur so as to be informed before offering the independent evaluation at a cost to the district. | | |
| **Title/Role(s) of Responsible Persons:**  Melissa Mumby, Special Education Academic Coordinator | | **Expected Date of Completion:**  12/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. A training of all staff who are responsible for chairing meetings/writing IEPs will take place during the week of 8/21/17.  2. A sign in sheet will be provided to show that staff members have attended.  3. A copy of the power point presentation on legal requirements will be provided. | | |
| **Description of Internal Monitoring Procedures:**  1. Staff chairing meetings for initial evaluations/reevaluations will document that they have informed the parent of their write to a district funded IEE dependent upon income in low-income only cases.  2. A review of student records quarterly by the special education coordinator to ensure that documentation of notification is occurring. Documentation will be provided on the flowchart and in the N1. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 11 School district response to parental request for independent educational evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Corrected | |
| **Basis for Decision:**  The school's understanding of this criterion is correct. The school's procedure for responding to parental request for an independent educational evaluation (IEE) is to provide for an IEE within 16 months for all students receiving free or reduced lunch. This is applicable to all students enrolled.  No corrective action or progress reporting is required. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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

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| **Criterion & Topic:**  SE 12 Frequency of re-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate the charter school is not consistently conducting a  re-evaluation every three years to determine continued eligibility for special education services. Record review also demonstrated that there was no evidence documenting the parent and charter school had agreed the re-evaluation was unnecessary. | | |
| **Description of Corrective Action:**  The district has determined that the root cause of not consistently conducting a re-evaluation every three years to determine continued eligibility for special education services is due in part to the school's loss of its school psychologist. The school has attempted to contract out, but was only recently able to secure a psychologist to perform some of the assessments. The priority for the school has been getting the initial evaluations completed for students who may need services. The school has recently begun to hold three-year eligibility meetings and has been able to re-determine eligibility without re-testing the student in some cases where the parent and school agree that eligibility will continue without new assessment data. Additionally, the district has been lacking in a clear and concise method of tracking which students are up for their triennial testing. | | |
| **Title/Role(s) of Responsible Persons:**  Melissa Mumby, Special Education Academic Coordinator | | **Expected Date of Completion:**  12/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. The school district will secure a contracted school psychologist for the beginning of the 2017-2018 school year, unless it hires a permanent psychologist before then. This will be evidenced through a contractual agreement and/or documentation that a school psychologist was hired.  2. The district will develop an internal tracking system for increased accountability of staff responsible for meeting timelines. This will be evidenced through a spreadsheet documenting dates that consents are sent, dates parents sign consent and return to school, date that testing must occur by, and date that the meeting must be held by. | | |
| **Description of Internal Monitoring Procedures:**  1. Reports will be pulled at the beginning of the year from the IEP program for review by the special education coordinator to ensure compliance to timelines.  2. Spreadsheet data will be reviewed weekly by the special education coordinator to ensure compliance and to identify any problems that may arise before the district falls out of compliance.  3. If a school psychologist is not hired permanently by the beginning of the year, an ad will continue to be placed until one is able to be hired. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 12 Frequency of re-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 10, 2017, submit a copy of the spreadsheet for staff to use to track timelines, including the date that consent is sent, date parents sign consent and return to school, date that testing must occur by, and date that the meeting must be held by.  Conduct a review of records for students across all grade levels with re-evaluation meetings held after training is provided, for evidence that re-evaluation meetings are being held every three years unless it is documented that the parent and district agree that it is unnecessary. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance by February 28, 2018.  \*Please note when conducting internal 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  SE 13 Progress Reports and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate the school is not providing special education students who have graduated from high school or exceeded the age of eligibility with a summary of academic achievement, functional performance, and recommendations on how to assist the student in meeting post-secondary goals. | | |
| **Description of Corrective Action:**  The District has determined that the root cause for not implementing the summary of academic achievement, functional performance, and recommendations on how to assist the student in meeting post secondary goals is that, although discussions are occurring during the final IEP meeting, the summary was not included in the student file. | | |
| **Title/Role(s) of Responsible Persons:**  Jill Yvon | | **Expected Date of Completion:**  05/15/2018 |
| **Evidence of Completion of the Corrective Action:**  During all seniors final IEP Team meeting, the student summary will be discussed, completed and filed in student's file. | | |
| **Description of Internal Monitoring Procedures:**  The special education department will review sped files to ensure completion. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 13 Progress Reports and content | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school does not indicate that summary of academic achievement, functional performance, and recommendations will be completed for special education students that exceed the age of eligibility for special education, as well as for every special education student that is graduating. The school's plan does not include training staff on completing this form. | | |
| **Department Order of Corrective Action:**  The school must provide a template of the form that will be used to document a summary of academic achievement, functional performance, and recommendations for every special education student that graduates or exceeds the age of eligibility for special education and train staff on procedures to complete this form. | | |
| **Required Elements of Progress Report(s):**  Submit procedures and evidence of training (sign-in sheet with role and signature, Summary of Academic Achievement, Functional Performance, and Recommendations form) provided to the special education teachers and Team Chairpersons to ensure that special education staff complete this form for every special education student that graduates or reaches age 22 by October 10, 2017.  Conduct a review of special education records for students that have graduated or reached age 22 to ensure the Summary of Academic Achievement, Functional Performance, and Recommendations form is completed by February 28, 2018. Indicate the number of records reviewed; the number found compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicates the Team is not documenting the reasons why removal from the general education classroom is considered critical to the student's program. The Non-participation Justification statement in the IEP is a reiteration of services listed on the IEP Service Delivery Grid. It does not describe the basis for the Team's conclusion that the student cannot be educated in the general education classroom with the use of supplementary aids and services. | | |
| **Description of Corrective Action:**  The district has determined that the root cause of the failure to document the reasons why removal from the general education classroom is critical to the student's program is due to a lack of proper training for staff responsible for chairing meetings/writing IEPs. The district has begun to rectify this problem with newly developed IEPs, and will continue to train staff on rewriting this section to reflect the need for removal instead of merely restating which services are being provided to the student. | | |
| **Title/Role(s) of Responsible Persons:**  Melissa Mumby, Special Education Academic Coordinator | | **Expected Date of Completion:**  10/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. A training for all staff who are responsible for chairing meetings/writing IEPs will take place during the week of 8/21/17.  2. A sign-in sheet will be provided to show that staff members have attended.  3. A copy of the power point presentation on IEP writing will be provided. | | |
| **Description of Internal Monitoring Procedures:**  1. A review of each IEP by the special education coordinator will occur before it goes home for signature to ensure that this section is written correctly.  2. A review of student records by the special education coordinator will take place at the beginning of the school year to determine which IEPs must be fixed. A list of those IEPs will be documented and checked off as IEPs are corrected. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training (PowerPoint presentation, sign-in sheet with staff signature and role) provided to the special education teachers and Team Chairpersons to ensure that the Non-participation Justification statement in the IEP describes the basis for the Team's conclusion that the student cannot be educated in the general education classroom with the use of supplementary aids and services by October 10, 2017.  Conduct a review of records for students across all grade levels with Team meetings held after training is provided, for evidence that each Non-participation Justification statement describes why the student cannot be educated in the general education classroom by February 28, 2018. Indicate the number of records reviewed; the number found compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicates the content of the notice sent to parents with a proposed IEP and placement is not individualized for each student. Notices contained the same wording to describe the action the charter school proposed and the reason why the charter school proposed the action. Notices do not specify the evaluation procedures, tests, records or other reports that were used to develop the student's IEP or include a statement of other options the Team considered and rejected. | | |
| **Description of Corrective Action:**  The district has determined that the root cause of lacking individualization on the N1 is due to a lack of proper training for staff who are writing IEPs/chairing meetings. The district has begun to take action on this indicator. The special education coordinator is writing the N1s for all IEPs K-5 in order to ensure that all aspects of the proposal are documented, and all rejected options of the IEP are documented. | | |
| **Title/Role(s) of Responsible Persons:**  Melissa Mumby, Special Education Academic Coordinator | | **Expected Date of Completion:**  10/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. A training of all staff who are responsible for chairing meetings/writing IEPs will take place during the week of 8/21/17.  2. A sign in sheet will be provided to show that staff members have attended.  3. A copy of the power point presentation on IEP writing will be provided. | | |
| **Description of Internal Monitoring Procedures:**  1. A review of each N1 by the special education coordinator will occur before it goes home to ensure that each section has the proper documentation from the meeting and/or meeting notes.  2. A review of student records by the special education coordinator will place at the beginning of the school year to determine which N1s must be rewritten in the next meeting. A list of those IEPs will be documented and checked off as N1s are corrected. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training (agenda, PowerPoint presentation, materials used, sign-in sheet with staff signature and role) provided to special education teachers to ensure that the notice consistently includes the action the school district is proposing to take; why the district is proposing to act; a description of any other options that the district considered and the reasons why those options were rejected; a description of each evaluation procedure, test, record or report used as a basis for the proposed action; and other factors relevant to the district's decision by October 10, 2017.  Conduct a review of records for students across all grade levels with Team meetings held after training is provided, for evidence that the N1 consistently includes 1) the action the school district is proposing to take; 2) why the district is proposing to act; 3) a description of any other options that the district considered and the reasons why those options were rejected; 4) a description of each evaluation procedure, test, record or report used as a basis for the proposed action; or 5) other factors relevant to the district's decision. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance by February 28, 2018.  \*Please note when conducting internal 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review, parent surveys, and interviews indicate the charter school has not established a parent advisory council on special education. | | |
| **Description of Corrective Action:**  The District has determined that the root cause for not holding PAC meetings is that the SEAC's did not schedule any meetings for the 2016-2017 school year. | | |
| **Title/Role(s) of Responsible Persons:**  Jill Yvon | | **Expected Date of Completion:**  10/01/2017 |
| **Evidence of Completion of the Corrective Action:**  Training for staff that will coordinate the PAC will be held during August 21st professional development week.  The District will provide an attendance sheet.  An invitation for the first PAC meeting with the agenda describing topics of discussion will be provided.  Additional dates for PAC meetings will be provided. | | |
| **Description of Internal Monitoring Procedures:**  The District will monitor by reviewing attendance sheets. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school did not name a staff person to advise, and be a liaison to, the PAC. The school did not describe how the school will encourage parents to participate in the establishment of a PAC and support activities of the PAC. | | |
| **Department Order of Corrective Action:**  Please see the Guidance for Special Education Parent Advisory Councils, which can be found at http://www.doe.mass.edu/sped/pac/ when assisting parents to develop a PAC. Provide a detailed description of the internal oversight of PAC activities, including the role of the person responsible. | | |
| **Required Elements of Progress Report(s):**  Submit the name of the staff person responsible for working with the PAC by October 10, 2017.  Also submit a description of how the school will support parents to develop a PAC and the date scheduled for the workshop for parents on the rights of students and their parents and guardians under state and federal special education laws and provide evidence (PowerPoint presentation or agenda and sign-in sheet) that the requirement to have a special education PAC, and the purpose of the PAC, have been shared at the first PAC meeting, by October 10, 2017.  Submit a schedule for PAC meetings for the 2017-2018 school year and provide the names of the PAC officers and a copy of PAC by-laws by February 28, 2018.  Also submit a description of how the PAC has advised the school on matters that pertain to the education and safety of students with disabilities and met with school officials to participate in the planning, development, and evaluation of the school's special education programs by February 28, 2018. | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  SE 34 Continuum of alternative services and placements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review, student record review, and interviews indicate that in grades 6-12 the charter school provides students with pull-out special education services in a resource room setting for English language arts and mathematics. However, students in need of specialized instruction in other subjects, including social studies, science, and Spanish, do not have access to special education supports. Also, special education teachers are not providing instruction in the general education classroom when a student's IEP indicates direct specialized instruction will be delivered by a special education teacher in the classroom.  Additionally, there is a substantially separate program for grade K-2 students to address their developmental and behavioral needs; however, the charter school has not developed programs to meet the continuing needs of these students in grades 3-12, who may require such services.  See also CR 18. | | |
| **Description of Corrective Action:**  The district has determined that the root cause of failing to provide a continuum of services for all students is partially due to a lack of students who meet the profile for specialized programming. The district has developed a K-2 substantially separate program based on the needs of 3 students who all had the same need for this type of programming. Prior to that there were no students enrolled that had a profile requiring this type of service. As students are identified as needing additional specialized programming than what is currently offered, the district will respond by either developing this type of programming or contracting with professionals who can provide the additional supports.  Additionally, the district has not followed through on requiring teachers to provide push-in support when applicable. A review of schedules and IEP service grids will drive staffing placement for the coming year. The district's goal is to provide the least restrictive environment for all students, and in keeping with that goal more support needs to be provided within the general education program for all students, especially in non-core subjects (science, social studies, and Spanish). At the very least, consistent paraprofessional support will be available for students whose service grids indicate this level of service. | | |
| **Title/Role(s) of Responsible Persons:**  Melissa Mumby, Special Education Academic Coordinator | | **Expected Date of Completion:**  03/01/2018 |
| **Evidence of Completion of the Corrective Action:**  1. Schedules of students and teachers/aides showing the amount of time that services are being provided, including in non-core subjects.  2. Contractual agreements with outside providers who are hired to meet the service needs of specific students  3. Program description of substantially separate classroom | | |
| **Description of Internal Monitoring Procedures:**  As cases become increasingly complex and require additional programming that goes beyond the scope of what is currently offered, the special education coordinator will directly be responsible for programmatic changes that provided a continuum of support for the student (i.e. transition services, outside reading tutors, vocational assistance, etc).  For cases where students need less services or services in a less restrictive environment, the special education coordinator will monitor the placement of students, teachers, and paraprofessionals to ensure that all service grid requirements are met. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 34 Continuum of alternative services and placements | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school's plan does not include training for general education and special education teachers in analyzing and accommodating the diverse academic and behavioral needs of students in the general education classroom, and develop collaboration time for general education teachers, special education teachers and paraprofessionals to work together to support students in the general education classroom. (See comments at CR 18) | | |
| **Department Order of Corrective Action:**  Provide a description of special education programming available to students beginning in 2017-2018.  Provide training for general education and special education teachers in analyzing and accommodating the diverse academic and behavioral needs of students in the general education classroom, and develop collaboration time for general education teachers, special education teachers and paraprofessionals to work together to support students in the general education classroom. | | |
| **Required Elements of Progress Report(s):**  Provide a description of special education programming available to students for the 2017-2018 school year by October 10, 2017.  Also provide special education teachers' schedules listing student's served by class period, including in non-core subjects by October 10, 2017.  Provide a schedule of professional development planned for the school year to address training for general education and special education teachers in analyzing and accommodating the diverse academic and behavioral needs of students in the general education classroom, and develop collaboration time for general education teachers, special education teachers and paraprofessionals to work together to support students in the general education classroom by October 10, 2017.  The Department will conduct a review of records for students across all grade levels for IEPs developed since the beginning of the 2017-2018 school year for evidence that each student is receiving the services identified on the Service Delivery Grid of the student's IEP. Contact the Department to schedule a record review before February 28, 2018. | | |
| **Progress Report Due Date(s):**  10/10/2017  12/14/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that although the student handbook includes a statement that the charter school will provide a Spanish translation of the handbook upon parent request, the statement is written in English, and the charter school does not have a translated handbook available. The charter school is not translating important information into Spanish and Vietnamese, which are the major languages spoken by parents of enrolled students. School recruitment and promotional materials are also not translated into the major languages spoken by residents in the area with limited English skills. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for ?The charter school is not translating important information into Spanish and Vietnamese, which are the major languages spoken by parents of enrolled students. School recruitment and promotional materials are also not translated into the major languages spoken by residents in the area with limited English skills? is because we have only focused on our Spanish population in the past. | | |
| **Title/Role(s) of Responsible Persons:**  School Administrators  ELL Coordinator  Home Liasaon | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Updated all notices with a disclaimer of parental requests of different languages in the focus language  2. Robo call scripts indicating messages in Spanish and Vietnamese  3. Develop procedures for all notices to be in appropriate languages  4. Staff training on translation requirements | | |
| **Description of Internal Monitoring Procedures:**  1. The completion of updated procedures by 9/1/17  2. The completion of updated notices by 9/1/17  3. An agenda and sign in sheet will serve as documentation for staff training by 9/1/17 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2016  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school does not indicate that it will have Spanish and Vietnamese versions of the student handbook available or include a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible. | | |
| **Department Order of Corrective Action:**  Provide Spanish and Vietnamese versions of the student handbook, brochures advertising the school, admission procedures, and application for admission to the charter school.  Provide procedures for ensuring important school information is translated into low incidence languages upon request, or the process for providing oral interpretation for low incidence languages.  Describe the internal oversight and tracking system including periodic reviews and the role of the person responsible for ensuring important school information is translated. | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the student handbook, brochures advertising the school, admission procedures, and application for admission to the charter school that are in Spanish and Vietnamese, or a link to the school website where these are posted, by October 10, 2017.  Submit procedures for ensuring important school information is translated into low incidence languages upon request, or the process for providing oral interpretation for low incidence languages by October 10, 2017.  Also submit the English version and translations of the statement to inform parents how to request translation of a document that will be published in all important school documents by October 10, 2017.  Describe the internal oversight and tracking system including periodic reviews and the role of the person responsible for ensuring important school information is translated by October 10, 2017. | | |
| **Progress Report Due Date(s):**  10/10/2017  12/14/2017 | | |

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

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates the student handbook has been updated to make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. However, the Bullying Prevention and Intervention Plan posted on the charter school's website and in the employee handbook does not contain updated procedures for addressing the bullying of students by a school staff member. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for ?the Bullying Prevention and Intervention Plan posted on the charter school?s website and in the employee handbook does not contain updated procedures for addressing the bullying of student by a school staff member? is that it wasn?t updated onto the school?s website when the student handbook was updated and SABIS® Corporate hadn?t updated the employee handbook. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director  Student Management Coordinator | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Updated Bullying Prevention and Intervention Plan on the school?s website.  2. Revised Employee Handbook; with the addition of addressing the bullying of students by a school staff member. | | |
| **Description of Internal Monitoring Procedures:**  1. Upload the Bullying Prevention and Intervention Plan to the school?s website by 9/1/17  2. Completion of the revised Employee Handbook by 9/1/17 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school does not indicate it will train staff on updated procedures or how the school will ensure, on an ongoing basis, that the contents of the school's bullying intervention and prevention plan that is published in student handbooks, employee handbooks, and the website will be current. | | |
| **Department Order of Corrective Action:**  Train staff on updated bullying prevention and intervention procedures and provide a detailed description of the internal oversight system, including periodic reviews and the role of the person responsible, to ensure the content of the bullying prevention and intervention plan in student handbooks, employee handbooks, and on the website, is current. | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the section of the employee handbook, and a link to the Bullying Prevention and Intervention Plan on the school's website, that contain the relevant provisions addressing the bullying of students by a school staff member and clarifies that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report by October 10, 2017.  Submit evidence of training (agenda, PowerPoint presentation, sign-in sheet with staff signature and role) provided to all staff on the revised Bullying Prevention and Intervention Plan by October 10, 2017.  Also submit a description of the school's plan, which includes the person responsible, to ensure the contents of the bullying prevention and intervention plan are current in subsequent publications of the employee handbook and on the website by October 10, 2017. | | |
| **Progress Report Due Date(s):**  10/10/2017  12/14/2017 | | |

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

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates the charter school has not developed a School-Wide Education Services Plan or procedures for periodic review of discipline data by special populations. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for ?the charter school has not developed a School-Wide Education Services Plan or procedures for periodic review of discipline data by special populations? is because were not detailed enough when creating and submitting the documents. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Dire  SEACs  AQCs  Student Management Coordinator | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Updated procedures regarding the requirements of M.G.L.c.71, section 37H ¾ , M.G.L.c.76, section 21 and 603 CMR 53.00  2. Updated notices of suspension and hearing  3. Updated School-Wide Education Service Plan  4. Updated procedures for the periodic review of discipline data by special populations  5. Training appropriate staff on all of the above updates | | |
| **Description of Internal Monitoring Procedures:**  1. Updated procedures regarding the requirements of M.G.L.c.71, section 37H ¾ , M.G.L.c.76, section 21 and 603 CMR 53.00  2. Updated notices of suspension and hearing  3. Updated School-Wide Education Service Plan  4. Updated procedures for the periodic review of discipline data by special populations  5. Training appropriate staff on all of the above updates | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  For clarification, the districts policy and procedures for student discipline were found to be in compliance. The School-Wide Education Services Plan and the procedures for periodic review of discipline data by special populations were the only two items that were not provided. The school does not need to update discipline procedures or the notice of suspension and hearing. | | |
| **Department Order of Corrective Action:**  Please see the Advisory on Student Discipline under Chapter 222 of the Acts of 2012, which can be found at: http://www.doe.mass.edu/lawsregs/advisory/discipline/StudentDiscipline.html#27 and the section on Academic Progress in the Questions and Answers Student Discipline Laws and Regulations, which can be found at: http://www.doe.mass.edu/lawsregs/advisory/discipline/QA.html | | |
| **Required Elements of Progress Report(s):**  Submit a school-wide education services plan and procedures for periodic review of discipline data by special populations.  by October 10, 2017. | | |
| **Progress Report Due Date(s):**  10/10/2017  12/14/2017 | | |

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

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates that the statement of nondiscrimination in the employee handbook does not include the protected category of gender identity and it does not include contact information for the staff responsible for receiving and investigating allegations of discrimination or harassment. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for ?the statement of nondiscrimination in the employee handbook does not include the protected category of gender identity and it does not include contact information for the staff responsible for receiving and investigating allegations of discrimination or harassment? is because the employee handbook is be revised this year. | | |
| **Title/Role(s) of Responsible Persons:**  School Director  Civil Rights Coordinator  School Administrators | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Revised written employee handbook to include gender identity and contact information | | |
| **Description of Internal Monitoring Procedures:**  1. Completion of written employee handbook to include gender identity and contact information by 10/1/17 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school did not provide a description of the internal oversight system to ensure the content of future publications of the employee handbook will be current, and the person who will be responsible for this. | | |
| **Department Order of Corrective Action:**  Submit a description of internal oversight system, including person responsible, for reviewing the content of the employee handbook to ensure it is current. | | |
| **Required Elements of Progress Report(s):**  Submit a copy of revised sections of the employee handbook that include the statement of nondiscrimination that includes all required categories and contact information for the staff responsible for receiving and investigating allegations by October 10, 2017.  Submit a description of the internal oversight system to ensure future publications of the employee handbook contain current information, including the person responsible by October 10, 2017. | | |
| **Progress Report Due Date(s):**  10/10/2017  12/14/2017 | | |

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

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates the notice sent to parents of students age 16 or older with ten consecutive absences is not sent within five days of the tenth consecutive absence and is not addressed to the student. It does not offer two dates and times for an exit interview or indicate it will be translated, if necessary.  Also, the letter sent annually for two years to former high school students who did not earn their competency determination to encourage them to participate in available publicly funded post-high school academic support programs is not addressed to the student. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for ?the letter sent is not sent within five days of the tenth consecutive absence and is not addressed to the student. It does not offer two dates and times for an exit interview or indicate it will be translated, if necessary? & ?the letter send annually for two years to former high school students who did not earn their competency determination to encourage them to participate in available publically funded post-high school academic support programs is not addressed to students? is that the school hasn?t updated the notices/letters. | | |
| **Title/Role(s) of Responsible Persons:**  Academic Quality Controllers  Records Officer | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Revised letter to include 2 dates/times for an exit interview, option for it to be translated  2. Update procedure for the letter to be send annually for 2 years to those who did not errant their competency determination | | |
| **Description of Internal Monitoring Procedures:**  1. Updated letter to by utilized by 9/1/17  2. Updated procedure for the both types of letters by 9/1/17  3. An agenda and sign in sheet for appropriate staff training by 9/1/17 | | |
| 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:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school's plan does not include a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible. | | |
| **Department Order of Corrective Action:**  Please review the High School Exit Intervention Model Protocol found at http://www.doe.mass.edu/dropout/.  Provide a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible. | | |
| **Required Elements of Progress Report(s):**  Submit a template of the notice that will be sent to parents and the student age 16 or older that will be sent within five days of the tenth consecutive absence that offers two dates and times for an exit interview and indicates it will be translated, if necessary, by October 10, 2017.  Also submit a template of the notice addressed to the student that is sent annually for two years to former high school students who did not earn their competency determination encouraging them to participate in available publicly funded post-high school academic support programs by October 10, 2017.  Submit evidence of training (agenda and attendance list with staff signature/role) provided to Academic Quality Controllers, Records Officer and guidance staff on the requirements for sending notices to students with 10 consecutive absences, and annually to former students by October 10, 2017.  Also submit a detailed description of the internal oversight and tracking system to ensure the content of these notices are periodically reviewed and that they are sent as required, including the role of the person responsible by October 10, 2017.  Submit a list of former high school students who did not graduate or transfer to another school within the previous two years and the notice they were sent by February 28, 2018.  Submit a list of any student with ten consecutive absences since the beginning of the school year, if any, and the notice sent by February 28, 2018. | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate the charter school has not provided all staff with training, within the first month of the school year, on the school's restraint prevention and behavior support policy and requirements when restraint is used. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for "the charger school has not provided staff with training, within the first month of the school year, on the school's restraint prevention and behavior support policy and requirements when restraint is used" is that it wasn't scheduled for the 16-17 school year due to a scheduling error. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director  Student Management Coordinator  On-Site CPI Trainers | | **Expected Date of Completion:**  09/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Training of all SICS employees on the school's restraint prevention and behavior support policy and requirements when restraint is used-yearly withing the first month of the school year.  2. Training for the school's Crisis Team; yearly refreshers on the CPI model  3. Training for the school's staff regarding de-escalation techniques. | | |
| **Description of Internal Monitoring Procedures:**  1. An agenda and sign-in sheet for training all SICS employees on the school's prevention and behavior support policy and requirements by 9/1/17.  2. An agenda and sign-in sheet for the school's Crisis Team by 12/1/17.  3. An agenda and sign-in sheet for de-escalation techniques by 9/1/17. | | |
| 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:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training (agenda, materials used and sign-in sheet with staff signature and role) provided to all staff on the school's restraint prevention and behavior support policy and requirements when restraint is used by October 10, 2017. | | |
| **Progress Report Due Date(s):**  10/10/2017 | | |

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

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| **Criterion & Topic:**  CR 18 Responsibilities of the school principal | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates the charter school has developed a Curriculum Accommodation Plan that does not include a provision for remedial instruction, consultative services for teachers, services for English learners, teacher mentoring and collaboration, or parental involvement. General education teachers do not receive adequate support to be able to analyze and accommodate the diverse academic and behavioral needs of students in the general education classroom. There is not a structure for general education teachers and special education teachers to collaborate to support students in the general education classroom. Special education teachers are not providing instruction in the general education classroom when a student's IEP indicates direct specialized instruction will be delivered by a special education teacher in the classroom.  The charter school relies on the special education staff to remove the student from the general education classroom to differentiate instruction, and relies on the Student Management Team staff to remove the student from the general education classroom to address classroom behaviors. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for ?The charter school has developed a Curriculum Accommodation Plan that does not include a provision for remedial instruction, consultative services for teachers, services for ELLs, teacher mentoring and collaboration, or parental involvement? is because the school was utilizing a DCAP and MTSS that were separate documents, not covering specific areas mentioned. | | |
| **Title/Role(s) of Responsible Persons:**  AQCs  SEACs  School Director | | **Expected Date of Completion:**  01/01/2018 |
| **Evidence of Completion of the Corrective Action:**  1. Creation of a new MTSS Handbook  2. Staff training on the MTSS Handbook | | |
| **Description of Internal Monitoring Procedures:**  1. The creation of the new MTSS Handbook by 9/1/17  2. The completion of staff trainings by 9/1/17  3. An agenda and sign in sheet will serve as documentation for staff training by 9/1/17 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school does not indicate that it plans to revise the Curriculum Accommodation Plan to address how the school will provide remedial instruction, consultative services for teachers, services for English learners, teacher mentoring and collaboration, and parental involvement. The plan does not address changes the school will make to ensure students receive direct instruction from a special education teacher when a student's IEP indicates direct specialized instruction will be delivered by a special education teacher in the general education classroom. The school's plan does not address how it will reduce removal of students from the general education classroom to provide differentiated instruction from a special education teacher, and reduce reliance on the Student Management Team staff to remove the student from the general education classroom to address classroom behaviors. The school did not provide a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible. | | |
| **Department Order of Corrective Action:**  Revise the Curriculum Accommodation Plan to include a description of how the school will provide remedial instruction, consultative services for teachers, services for English learners, teacher mentoring and collaboration, and parental involvement. In addition, submit a description of 1) how the school will ensure students receive direct instruction from a special education teacher when a student's IEP indicates direct specialized instruction will be delivered by a special education teacher in the general education classroom; 2) how the school will reduce reliance on the special education staff to remove the students from the general education classroom to differentiate instruction, and 3) how the school will reduce reliance on the Student Management Team removal of the student from the general education classroom to address classroom behaviors. Also provide a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible. | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the revised Curriculum Accommodation Plan that describes how the school provides remedial instruction, consultative services for teachers, services for English learners, teacher mentoring and collaboration, and parental involvement by October 10, 2017.  In addition, submit a description of 1) how the school will ensure students receive direct instruction from a special education teacher when a student's IEP indicates direct specialized instruction will be delivered by a special education teacher in the general education classroom; 2) how the school will reduce reliance on the special education staff to remove the students from the general education classroom to differentiate instruction, and 3) how the school will reduce reliance on the Student Management Team removal of the student from the general education classroom to address classroom behaviors by October 10, 2017  Provide a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible, for monitoring the revision and training on the Curriculum Accommodation Plan by October 17, 2017.  Submit evidence of training (agenda, materials used, and sign-in sheet with staff signature and role) provided to all teaching and administrative staff on contents of the Curriculum Accommodation Plan by February 28, 2018. | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicates the charter school has not evaluated all aspects of its K-12 program annually to ensure all students have equal access to all academic, athletic and other extracurricular programs and activities regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for ?the charter school has not evaluated all aspects of its K-12 program annually to ensure all students have equal access to all academic, athletic, and other extracurricular programs and activities regardless of race, color, sex, gender identity, religion, national origin, limited English Language proficiency, sexual orientation, disability, or housing status? is that we did not include gender identity into the evaluation. | | |
| **Title/Role(s) of Responsible Persons:**  Academic Quality Controllers  School Director  School Leadership Team | | **Expected Date of Completion:**  10/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Update self-evaluation to include gender identity  2. Update procedures for the Institutional self-evaluation | | |
| **Description of Internal Monitoring Procedures:**  1. Completion of the written self-evaluation to include gender identity by 10/1/17  2. Review the procedures so that all aspects of the K-12 program are evaluated by 10/1/17 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the district's revised self-evaluation tool that includes all protected categories developed to evaluate equal access for all students to all programs, including athletics and other extracurricular activities by October 10, 2017.  Submit a copy of the results of the institutional self-evaluation, conclusions reached, and resolution of any identified issues by February 28, 2018. | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  CR 26A Confidentiality and student records | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicates the charter school is not maintaining a log of access in each student record to document when authorized persons have obtained access to the record. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for ?the charter school is not maintaining a log of access in each student record to document when authorized persons have obtained access to the record? is due to old procedures. | | |
| **Title/Role(s) of Responsible Persons:**  School Director  School Administrators  Student Records Clerk | | **Expected Date of Completion:**  10/01/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Revised written student access procedures  2. Staff training to go over confidentiality and student records  3. Create sign out forms for cumulative folders | | |
| **Description of Internal Monitoring Procedures:**  1. Completion of written student access procedures for all student records and cumulative by 10/1/17  2. An agenda and sign in sheet will serve as documentation for staff training by 10/1/17 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 26A Confidentiality and student records | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school's plan does not ensure a log of access will be maintained in each student record, including the cumulative record, special education record, health record, discipline record and any other collection of student records. The school did not provide a description of the district's internal oversight system of periodic review to ensure that procedures are followed and the person who will be responsible for oversight. | | |
| **Department Order of Corrective Action:**  Provide a description of the district's internal oversight system including periodic reviews and identify the person responsible for ensuring a log of access is maintained in each student record. | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training (revised procedures, sign-in sheet with staff signature and role) provided to all staff on revised procedures for documenting access to student records by October 10, 2017.  Also submit a description of ongoing monitoring, including who will be responsible by October 10, 2017.  Submit the results of a review of randomly selected student records for inclusion of a log of access by February 28, 2018. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |

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

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| **Criterion & Topic:**  ELE 3 Initial Identification | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the charter school has not established written initial identification policies and procedures in accordance with the Department guidelines to maintain the consistency of practices and identify students who may be English learners (ELs) in a timely, valid and reliable manner. Please see the Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners as found at HYPERLINK "http://www.doe.mass.edu/ell/guidance/default.html" http://www.doe.mass.edu/ell/guidance/default.html . | | |
| **Description of Corrective Action:**  The district has determined that the root cause for not having cohesive and approved initial identification policies and procedures is that it did not follow the 6 steps for identifying students who need English language support as outlined in the Guidance on Identification, Assessment, Placement and reclassification of English Learners. | | |
| **Title/Role(s) of Responsible Persons:**  ELE Coordinator | | **Expected Date of Completion:**  10/15/2017 |
| **Evidence of Completion of the Corrective Action:**  1. Revised written document mirroring the 6 steps in the guidance document.  2. Training of all academic staff about the policies and procedures put into place. This training will take place during  the in-school professional development during the week of 8/21/17.  3. Training staff to handle the registration of new students in January on how to administer the HLS. | | |
| **Description of Internal Monitoring Procedures:**  1. Completion of written policies and procedures for initial identification by 8/21/17  2. Review HLS of present and new students to ascertain that the policies were followed completing a spreadsheet as  documentation. This will be an ongoing task so that the spreadsheet includes students coming into the school  after the beginning of the school year.  3. An agenda and sign in sheet will serve as documentation for staff training. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 3 Initial Identification | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 10, 2017, 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.  By October 10, 2017, 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 in the submission meeting dates, minutes and sign-in sheets.  By October 10, 2017, 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 from June 2017 until the date of submission. | | |
| **Progress Report Due Date(s):**  10/10/2017 | | |

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

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| **Criterion & Topic:**  ELE 4 Waiver Procedures | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that although the Initial Notification Letter provides parents with waiver information, charter school staff members are not aware of the waiver process, nor are any written procedures in place as identified in G.L. c. 71A, § 5 under the pretext that the school does not have an alternate program. Please see the Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners as found at HYPERLINK "http://www.doe.mass.edu/ell/guidance/default.html" http://www.doe.mass.edu/ell/guidance/default.html . | | |
| **Description of Corrective Action:**  The district has determined that the root cause of the SABIS staff not being aware of the waiver process is that they have not received training on this topic and written procedures regarding the waiver process have not been written as yet. | | |
| **Title/Role(s) of Responsible Persons:**  ELE Coordinator | | **Expected Date of Completion:**  08/21/2017 |
| **Evidence of Completion of the Corrective Action:**  1. A written waiver procedure document will be completed by 8/21/17 reflecting the requirements of the waiver process in the Guidance on Identification, Assessment, Placement and Reclassification of English Language Learners.  2. Teachers will receive training during the in school professional development week of 8/21/17. | | |
| **Description of Internal Monitoring Procedures:**  1. Agenda from training session to be held during the week of 8/21/17.  2. Sign in sheet from this staff training. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 4 Waiver Procedures | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 10, 2017, submit the waiver procedures document and provide training to all ELE staff to ensure that they are knowledgeable about the waiver procedures. Submit the training materials, sign-in sheets and agendas. | | |
| **Progress Report Due Date(s):**  10/10/2017 | | |

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

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| **Criterion & Topic:**  ELE 5 Program Placement and Structure | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the charter school uses Hampton Brown books for ESL instruction. While purchased materials can be used as resources they cannot replace an ESL curriculum that districts are expected to develop in order to implement with fidelity the educational approach the school adopted for their ELE program and described in the Castañeda's Three-Pronged Test submitted to the Department. The school should note that an ESL curriculum is integral to an effective ELE program in which ELs become English proficient at a rapid pace  The documents submitted by the charter school and a review of 2016 ACCESS for ELLs and MCAS scores demonstrate that the school's ELE program is not effective in developing students' English language skills and requires appropriate program adjustments to improve the outcomes of the service delivery. Please see the district's English Learner Student Learning Targets in the Security Portal at HYPERLINK "https://gateway.edu.state.ma.us" https://gateway.edu.state.ma.us . | | |
| **Description of Corrective Action:**  The district has determined that the root cause for not having an ESL curriculum and has not developed an educational approach for their ELE program or a school plan for a curriculum consistent with such an approach was that the district relied on using the Hampton Brown Avenues as it?s instructional resource. | | |
| **Title/Role(s) of Responsible Persons:**  ELE Coordinator | | **Expected Date of Completion:**  01/02/2018 |
| **Evidence of Completion of the Corrective Action:**  1. Identify a district approach for ELE program implementation  2. Research various published and DESE accepted programs to determine their consistency with the districts approach to ELE.  3. Train stall in both the district approach to ELE and the specifics of the school curriculum  4. Implement the curriculum | | |
| **Description of Internal Monitoring Procedures:**  1. District will develop a written educational approach by October 1, 2017.  2. Select an accepted program that is consistent with the districts approach to ELE.  3. Staff training will be documented by a sign in sheet.  4. Implement curriculum by the start of term 2 (01/02/2018) | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 10, 2017:  1- Use the "Root Cause analysis, Corrective Action Plans and Progress Reports" document available in the Document Library to clarify why the district did not meet English Learner Student Learning Target numbers and what the district's corrective action will be to improve ELE program outcomes. Please be specific with all the adjustments or changes that will be required in order to provide better learning opportunities to ELs so that they can acquire English at a rapid pace as Chapter 71 A requires.  2- Revise the Castañeda test submitted for the self assessment to ensure that your answers to the questions on the test reflect the changes that the district will implement in order to improve ELE program outcomes as a result of the Root Cause analysis.  3- Provide training to all staff members involved in the education of ELs to ensure that they are knowledgeable about the program goals described in the revised Castañeda Test submitted by the district and the district's commitment to provide sheltered content instruction and ESL instruction to ELs at all proficiency levels. Submit the training materials, agendas and sign-in sheets by the due date of the progress report.  4- Provide the district's plan of action to implement SEI strategies in SEI classrooms and designing lesson plans with language objectives in mind.  5- Provide a detailed plan on how district administration will ensure that SEI strategies are implemented and language objectives are taught in SEI classrooms.  6- Provide the Department with information about the process of developing ESL curriculum as well as the timeline that shows the milestones of the project, the estimated date of completion as well as the implementation time frame. Please note that the plan should reflect the content to be taught and address the instructional needs of the EL population at all levels.  7- Provide information regarding the roles and responsibilities of the staff who are assigned to the ESL curriculum project and their qualifications. | | |
| **Progress Report Due Date(s):**  10/10/2017  12/14/2017 | | |

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

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| **Criterion & Topic:**  ELE 6 Program Exit and Readiness | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  According to state level data, the charter school reclassified two students whose composite ACCESS scores were below Level 5. ELs below this proficiency level continue to require appropriate support to participate meaningfully in all aspects of the school's general education program and therefore should not be considered for reclassification. Although the school's current reclassification policies are in compliance with 603 CMR 14.02, data indicates that reclassification policies are not being consistently followed. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for the school reclassifying 2 students whose composite ACCESS scores were below Level 5 was that the district did not follow the reclassification policies. | | |
| **Title/Role(s) of Responsible Persons:**  ELE Coordinator | | **Expected Date of Completion:**  08/21/2017 |
| **Evidence of Completion of the Corrective Action:**  The school is now aware that that students must continue and will benefit from continued ESL support even if there are other reasons for a student not being successful in a General Education classroom. No student will be exited from the ELE program until they can score minimally a 5 on the ACCESS test, passing scores on MCAS, successful scores on local assessments and written recommendations from classroom teachers. | | |
| **Description of Internal Monitoring Procedures:**  1. This topic will be included in the professional development training of all academic staff during the week of 8/21/17. Both agenda and staff sign in sheet will be used as documentation.  2. A spreadsheet will be developed for each ELL student with the results of state and local testing assessments.  3. Student monitoring forms will be completed and placed in the student?s cumulative file. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 10, 2017, submit the district's revised reclassification policies and procedures and 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.  By October 10, 2017, use the FEL Roster available in the Document Library to provide information for all the ELs in your district who have been reclassified in the last school year. | | |
| **Progress Report Due Date(s):**  10/10/2017 | | |

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

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| **Criterion & Topic:**  ELE 10 Parental Notification | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that the charter school does not send an annual notification letter to the parents or guardians of all ELs, including the parents or guardians who declined ELE services, to inform them about the students' program placement, parental rights and other ELE program related information as required in NCLB, Sec. 3302. | | |
| **Description of Corrective Action:**  The district has determined that the root cause that although yearly notifications were sent out for ELL students, the notification was not sent to parents who declined ELE services. | | |
| **Title/Role(s) of Responsible Persons:**  ELE Coordinator | | **Expected Date of Completion:**  08/21/2017 |
| **Evidence of Completion of the Corrective Action:**  1. The parent notification letter will be mailed to parents of newly assessed ELL students, returning ELL students and parents who declined ELE services in both English and translated into their native language. Copies will be kept in the student?s cumulative file. | | |
| **Description of Internal Monitoring Procedures:**  1. This topic and a copy of the letter will be included in the staff professional development training during the week of 8/21/17. The agenda will serve as documentation.  2. A spreadsheet of required file contents will be kept in each student?s cumulative file. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 10 Parental Notification | **Corrective Action Plan Status:** Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 10, 2017, provide training to ELE staff to ensure that they are all knowledgeable about the requirements regarding the parent notification letter and submit the training materials, sign-in sheets and agendas by the progress report due date. | | |
| **Progress Report Due Date(s):**  10/10/2017 | | |

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

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| **Criterion & Topic:**  ELE 12 Equal Access to Nonacademic and Extracurricular Programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate written notices about extracurricular activities and school events are regularly translated into Spanish, but not into languages of other EL students enrolled in the school. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for only having written notices sent out in Spanish and English is that historically Spanish was the predominant 2nd language of the students that attend SABIS. Since demographics have changed in both the sending district and therefore SABIS, written notices need to be translated into Vietnamese as well. | | |
| **Title/Role(s) of Responsible Persons:**  ELE Coordinator | | **Expected Date of Completion:**  08/28/2017 |
| **Evidence of Completion of the Corrective Action:**  1. All written notices about extracurricular activities and school events will be sent out in English, Spanish and Vietnamese. Additionally, these notices will be translated into the any other language for a parent that states on the HLS that another language other than Spanish and Vietnamese is needed to be translated. This will be done starting with the new school year and will be ongoing throughout the school year. | | |
| **Description of Internal Monitoring Procedures:**  1. A binder of all translated notices will be kept as documentation that this is being done. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 12 Equal Access to Nonacademic and Extracurricular Programs | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school's plan does not include staff training on procedures to request translations, or describe how the school will provide translations of low incidence languages. | | |
| **Department Order of Corrective Action:**  Train staff on procedures for requesting translation of notices of nonacademic and extracurricular activities and how the school will provide translation of low incidence languages. | | |
| **Required Elements of Progress Report(s):**  Submit procedures and evidence of training (materials and sign-in sheet with staff signature and role) provided to the teachers and administrators on the process for providing translation of notices of nonacademic and extracurricular activities including translations of low incidence languages by October 10, 2017.  Submit examples of notices of nonacademic or extracurricular programs and activities that were translated into Spanish, Vietnamese and other languages, if applicable, by February 28, 2018. | | |
| **Progress Report Due Date(s):**  10/10/2017 | | |

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

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| **Criterion & Topic:**  ELE 18 Records of ELL students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that for students whose parents have chosen to opt out of English learner education programs, the EL records do not include the annual parental notification letter and evidence of follow up monitoring. | | |
| **Description of Corrective Action:**  The district has determined that the root cause for the EL records for students whose parents have chosen to opt out not include the annual notification letter and evidence of follow up monitoring as outlined in the Guidance on Identification, Assessment, Placement and Reclassification of English Learners. | | |
| **Title/Role(s) of Responsible Persons:**  ELE Coordinator | | **Expected Date of Completion:**  08/21/2017 |
| **Evidence of Completion of the Corrective Action:**  1. The annual parent notification letter will be mailed to parents of students that were opted out of the ELE program. Copies will be kept in the student?s cumulative file.  2. Completion of the monitoring for students that were opted out. Copies will be kept in the student?s cumulative file | | |
| **Description of Internal Monitoring Procedures:**  1. This topic and a sample copy of the letter and monitoring form will be included in the staff professional development training during the week of 8/21/17. The agenda and sign in sheet will serve as documentation.  2. A spreadsheet of required file contents will be kept in each student?s cumulative folder. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 18 Records of ELL students | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 08/04/2017  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The school's plan does not include a method of ongoing monitoring of English learner (EL) student records to ensure they contain all required documents. | | |
| **Department Order of Corrective Action:**  The school must submit a plan to monitor EL student records on an ongoing basis to ensure they include documentation of monitoring the progress of opt out students and an annual parental notification letter sent to parents of opt out students. | | |
| **Required Elements of Progress Report(s):**  Submit a plan for ongoing internal monitoring of EL records to ensure they include the annual parental notification letter and evidence of follow up monitoring for students whose parents have chosen to opt them out of the ELE program. Identify the person responsible and indicate how often opt out student records will be reviewed by October 10, 2017.  Conduct a review of opt out students' EL records to ensure they contain the annual parental notification letter end evidence of follow up monitoring by February 28, 2018. Indicate the number of records reviewed; the number found compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  10/10/2017  02/28/2018 | | |