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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: Southern Worcester County Regional Vocational Technical

CPR Onsite Year: 2016-2017

Program Area: Special Education

All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report dated 09/22/2017.

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

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 3 | Special requirements for determination of specific learning disability | 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 | 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 14 | Counseling and counseling materials free from bias and stereotypes | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |
| ELE 1 | Annual English Language Proficiency Assessment | Not Implemented |
| ELE 3 | Initial Identification | Not Implemented |
| ELE 5 | Program Placement and Structure | Partially Implemented |
| ELE 6 | Program Exit and Readiness | Not Implemented |
| ELE 7 | Parent Involvement | Partially Implemented |
| ELE 10 | Parental Notification | Partially Implemented |
| ELE 13 | Follow-up Support | Not Implemented |
| ELE 14 | Licensure Requirements | Partially Implemented |
| ELE 17 | Program Evaluation | Partially Implemented |

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| **Criterion & Topic:** SE 3 Special requirements for determination of specific learning disability | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and staff interviews indicated that when a student suspected of having a specific learning disability is evaluated, the Team creates a written determination as to whether or not he or she has a specific learning disability; however, it is not signed by all members of the Team. |
| **Description of Corrective Action:** The Team creates a written determination as to whether or not he or she has a specific learning disability; however, it is not signed by all members of the Team. The team has made an agenda for revaluation/ initial meetings in which # 7 on the agenda clearly states to complete the SLD Forms. An agenda has been created and given to all team chairs to follow. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine Pupil Service Director | **Expected Date of Completion:**10/12/2017 |
| **Evidence of Completion of the Corrective Action:**SLD Signature Pages are being completed and the Agenda. |
| **Description of Internal Monitoring Procedures:** Pupil Services Director will monitor all files 2x a year to ensure the SLD Form is signed. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 3 Special requirements for determination of specific learning disability | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, submit evidence of training provided to ensure that when a student suspected of having a specific learning disability (SLD) is evaluated, the Team creates a written determination as to whether or not he or she has a specific learning disability, and it is signed by all members of the Team. By April 15, 2018, conduct an internal review of records for students suspected of having an SLD, who had initial or re-evaluation meetings conducted following the implementation of all corrective actions. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance.\*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). |
| **Progress Report Due Date(s):** 01/15/201804/16/2018 |

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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:** A review of student records indicated that the school's Notice of Proposed School District Action (N1) accompanying a proposed evaluation does not consistently include a description of rejected options considered by the IEP Team; a description of the evaluation procedures, tests, records or reports used as a basis for the proposed action; and other factors relevant to the school district's decision. |
| **Description of Corrective Action:** The Special Education Department was not including a description of rejected options on the N1 when proposing the three year re-evaluations. Since the CPR Review the procedure has changed. The N1 now states rejected options considered by the team. |
| **Title/Role(s) of Responsible Persons:**Nancy AlpinePupil Services Director | **Expected Date of Completion:**10/12/2017 |
| **Evidence of Completion of the Corrective Action:**Examples of N1s for three year re-evaluations. |
| **Description of Internal Monitoring Procedures:** The Pupil Services Director will do an internal review of records throughout the school year. |
| 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:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** The district submitted District submitted Notice of Proposed School District Action (N1) forms completed following a training for relevant staff. The N1 forms uploaded to "Additional Documents" contained all required elements, including a description of rejected options considered by the IEP Team; a description of the evaluation procedures, tests, records or reports used as a basis for the proposed action; and other factors relevant to the school district's decision. By January 15, 2018, conduct an internal review of approximately 10 records for evidence that the district's Notice of Proposed School District Action (N1) accompanying a proposed evaluation consistently includes a description of rejected options considered by the IEP Team; a description of the evaluation procedures, tests, records or reports used as a basis for the proposed action; and other factors relevant to the school district's decision. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance.\*Please note when conducting internal monitoring the 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):** 01/15/2018 |

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| **Criterion & Topic:** SE 32 Parent advisory council for special education | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff and parent advisory council (PAC) interviews indicated that PAC duties do not include evaluation of the school district's special education programs. |
| **Description of Corrective Action:** The district currently sends a survey to all parents of students on IEPs and 504s. There has not been input by the SEPAC. The district will share 2016/2017 surveys with the SEPAC and ask for their input on programs and their evaluation interests.The district will also ask for their input for the 2017/2018 survey regarding programs/classes they would like evaluated. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine Pupil Service Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**The survey and results. SEPAC meeting notes regarding new survey and their input. |
| **Description of Internal Monitoring Procedures:** The District will collect the survey and review the results with the SEPAC members. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, submit SEPAC agendas and meeting notes indicating PAC involvement in the evaluation of the school district's special education programs. |
| **Progress Report Due Date(s):** 01/15/2018 |

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| **Criterion & Topic:** CR 7 Information to be translated into languages other than English | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that school recruitment and promotional materials disseminated to residents in the area served by the school are not translated into the major languages spoken by residents with limited English skills. |
| **Description of Corrective Action:** Translate all school recruitment and promotional materials into major languages spoken by residents. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine Pupil Service Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Completed document translations. Filed documentation of all translated materials. |
| **Description of Internal Monitoring Procedures:** The Pupil Service Director will monitor along with the Admissions Committee all forms going out to towns for recruitment and promotions. The monitoring will ensure all documents are translated into major languages spoken by residents of all district members. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, submit procedures developed to ensure school recruitment and promotional materials disseminated to residents in the area served by the school are translated into the major languages spoken by residents with limited English skills. In addition, provide evidence of staff training on these procedures. Include agenda(s), materials presented, and sign-in sheets indicating the title/role of staff.By January 15, 2018, provide samples of school recruitment and promotional materials translated into the major languages spoken by residents with limited English skills. |
| **Progress Report Due Date(s):** 01/15/2018 |

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| **Criterion & Topic:** CR 10B Bullying Intervention and Prevention | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that the school handbook does not make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. |
| **Description of Corrective Action:** Re-write the portion of the school handbook to read a member of the school staff may be named the "aggressor or "perpetrator. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine Pupil Service Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**All handbooks and website include the up-to-date language. The web-site is currently up-to-date . The 2018-2019 school handbook will be updated. |
| **Description of Internal Monitoring Procedures:** Comprehensive yearly review of policy, communication and handbooks will be completed by the Dean of Students. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** The district submitted a proposal made to the school committee under "Additional Documents" in WBMS. The district proposes to add language to the student handbook that makes clear a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. The district noted that once approved, the 2017-18 student handbook will be updated.By January 15, 2018, submit an update regarding the school committee approval of the proposed addition to the school handbook.By April 16, 2018, submit a copy of the revised student handbook. In addition, provide evidence of dissemination of revised student handbook to the school community. |
| **Progress Report Due Date(s):** 01/15/201804/16/2018 |

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| **Criterion & Topic:** CR 10C Student Discipline | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district does not provide the student and parent a written notice of suspension and hearing under M.G.L. c. 71, § 37H¾ before imposing a suspension as a consequence for a disciplinary offense. |
| **Description of Corrective Action:** A review of documents and staff interviews indicated that the district does not provide the student and parent a written notice of suspension and hearing under M.G.L. c. 71, § 37H¾ before imposing a suspension as a consequence for a disciplinary offense. This is accurate. The district is now handing the letter to the student at the time of suspension. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine Pupil Service Director | **Expected Date of Completion:**10/12/2017 |
| **Evidence of Completion of the Corrective Action:**A letter addressed to the student. |
| **Description of Internal Monitoring Procedures:** Dean of Students will monitor all suspension files twice a year. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10C Student Discipline | **Corrective Action Plan Status:** Partially Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district's description indicated that the written notice of suspension and hearing is provided to the student at the time of suspension and not before imposing a suspension as a consequence for a disciplinary offense. |
| **Department Order of Corrective Action:**Develop procedures to ensure that the district provides the student and parent a written notice of suspension and hearing under M.G.L. c. 71, § 37H¾ before imposing a suspension as a consequence for a disciplinary offense. |
| **Required Elements of Progress Report(s):** By January 15, 2018, submit district procedures for the provision of a written notice of suspension and hearing under M.G.L. c. 71, § 37H¾ to the student and parent before imposing a suspension as a consequence for a disciplinary offense. By April 16, 2018, conduct an internal review of approximately 10 records, for evidence that written notice of suspension and hearing under M.G.L. c. 71, § 37H¾ was provided to the student and parent before imposing a suspension as a consequence for a disciplinary offense. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance. \*Please note when conducting internal monitoring the 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, their role(s) and signature(s). |
| **Progress Report Due Date(s):** 01/15/201804/16/2018 |

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| **Criterion & Topic:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that written materials and other media used to publicize the school do not include notice that the school does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion, or sexual orientation. |
| **Description of Corrective Action:** A review of documents indicated that written materials and other media used to publicize the school do not include notice that the school does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion, or sexual orientation. The district will go through all written materials and media used to publicize the school will include notice that the school does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion, or sexual orientation. |
| **Title/Role(s) of Responsible Persons:**Nancy AlpinePupil Services Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Examples of written materials to publicize the school that has the notice of non-discrimination printed on them. |
| **Description of Internal Monitoring Procedures:** Pupil Services Director will read all new materials being used to publicize the school to ensure the non-discrimination statement appears on the publication. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, submit written materials and other media used to publicize the school that include a notice that the school does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion, or sexual orientation. |
| **Progress Report Due Date(s):** 01/15/2018 |

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| **Criterion & Topic:** CR 14 Counseling and counseling materials free from bias and stereotypes | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that school policy does not ensure that counseling and counseling materials are free from bias and stereotypes on the basis of gender identity or homelessness. |
| **Description of Corrective Action:** Review and update all district policies and communications to ensure counseling and counseling materials are free from bias and stereotypes on the basis of gender identity and homelessness. |
| **Title/Role(s) of Responsible Persons:**Nancy AlpinePupil Services Director | **Expected Date of Completion:**01/15/2018 |
| **Evidence of Completion of the Corrective Action:**The guidance department will meet and go through all materials to ensure gender identity and homelessness are on all district policy documents. All forms will be changed and submitted to the DESE. |
| **Description of Internal Monitoring Procedures:** Guidance Director and the Pupil Services director will monitor all policies throughout the school to ensure all forms are not bias and free of stereotypes. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 14 Counseling and counseling materials free from bias and stereotypes | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, submit revised policy ensuring that counseling and counseling materials are free from bias and stereotypes on the basis of gender identity or homelessness. Additionally, submit evidence of training on the revised policy to relevant staff. Include the agenda, materials used, training date, signed attendance sheets indicating the title/role of staff and the name and title of the presenter. |
| **Progress Report Due Date(s):** 01/15/2018 |

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| **Criterion & Topic:** CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion is sent only to the parent/guardian and does not include the student. The notice does not indicate that the interview shall occur within 10 days of the notice or that the time and the date for the exit interview may be extended at the request of the parent/guardian but for no longer than 14 days. Furthermore, the notice does not state that the superintendent or designee may proceed with an exit interview without a parent/guardian if the superintendent or designee makes a good faith effort to include the parent/guardian. |
| **Description of Corrective Action:** The guidance office along with the Pupil Service Director will develop a new letter to students and parents. The letter will indicate an interview shall occur within 10 days of the notice or that the time and the date for the exit interview may be extended at the request of the parent/guardian but for no longer than 14 days. The notice will also state that the superintendent or designee may proceed with an exit interview without a parent/guardian if the superintendent or designee makes a good faith effort to include the parent/guardian. |
| **Title/Role(s) of Responsible Persons:**Nancy AlpinePupil Services Director | **Expected Date of Completion:**12/01/2017 |
| **Evidence of Completion of the Corrective Action:**Meeting Notes/Sign-in sheet. Completed Letter-Notice To Students |
| **Description of Internal Monitoring Procedures:** Pupil Service Director will monitor progress monthly or until the notice is complete. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Please review the following document: High School Exit Intervention Model Protocol at http://www.doe.mass.edu/dropout/2014-05ExitProtocol.pdf#search=%22High%22 By January 15, 2018, submit a copy of the procedures and notice developed for students age 16 or over with ten consecutive absences.By January 15, 2018, submit evidence of training to appropriate staff, including principal, guidance counselors, and district administrators, on the procedures. Evidence of training should include agenda(s), materials presented, sign-in sheets indicating the title/role of staff, and the name/title of the presenter. By April 16, 2018, submit a list of students with 10 or more consecutive absences since the beginning of the 2017-18 school year and the notices sent by the district to these students, if any, and their parents within five days of the student's tenth consecutive absence. |
| **Progress Report Due Date(s):** 01/15/201804/16/2018 |

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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:** A review of documents indicated that the district has not developed and implemented written restraint prevention and behavior support policy and procedures consistent with 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. |
| **Description of Corrective Action:** The district has developed a written restraint policy and is in the process of implementing the policy along with the behavior support policy and procedures consistent with 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine/ Pupil Services Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Training/Sign in sheetsList of trained teachers |
| **Description of Internal Monitoring Procedures:** The district will monitor at the beginning of every school year to ensure all staff is trained. They will also monitor new hires and ensure they are trained within the first thirty days of hire. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Partially Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** While the district noted in its description that it developed a written restraint policy, this policy was not included in materials submitted for the CAP in additional information via WBMS. |
| **Department Order of Corrective Action:**Submit the written restraint prevention and behavior support policy and procedures. |
| **Required Elements of Progress Report(s):** By January 15, 2018, submit the written restraint prevention and behavior support policy and procedures consistent with 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. By April 16, 2018, submit evidence that district staff have been provided with the written restraint prevention and behavior support policy and procedures consistent with 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. |
| **Progress Report Due Date(s):** 01/15/201804/16/2018 |

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| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district does not annually conduct an institutional self-evaluation to ensure that all students have equal access to all programs, including athletics and other extracurricular activities. |
| **Description of Corrective Action:** The district has not done an annual institutional self-evaluation to ensure that all students have equal access to all programs at Bay Path. The district will create a survey through Survey Monkey and distribute it through e-mail to parents, staff, and students. The survey will cover classes, extra curricular activities, athletics and school climate. Surveys will include accessibility to programs regardless of race, color, sex, religion, national origin, LEP status, sexual orientation, gender identity, disability, or housing status. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine/ Pupil Services Director | **Expected Date of Completion:**06/01/2018 |
| **Evidence of Completion of the Corrective Action:**Completed surveys and data charts to analyse the survey questions. |
| **Description of Internal Monitoring Procedures:** The survey will be monitored by the administration . The data will be used to change , enhance or keep the programs the same. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, provide a copy of the district's procedures and tools developed for the annual evaluation of the program that ensures all students have equal access to all programs, including athletics and other extracurricular activities.By April 16, 2018, submit a copy of the institutional self-evaluation, conclusions reached, and resolution of any identified issues. |
| **Progress Report Due Date(s):** 01/15/201804/16/2018 |

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| **Criterion & Topic:** ELE 1 Annual English Language Proficiency Assessment | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents, staff interviews and student data indicated that the district coded the English learners (ELs) who enrolled in the district as non-ELs in Student Information Management System (SIMS) and failed to assess the English proficiency of these students. |
| **Description of Corrective Action:** The district recently hired a full-time ESL Coordinator/Teacher. On-going training will begin the month October which includes professional development inside the school and outside at various locations. The school will fulfill the requirements necessary to serve the ELL population in our district. This will fulfill criterion numbers #1,3,5,6,7,10,13,17. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine Pupil Services Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Progress Reports to the state through the CAP. Training/Sign-In Sheets |
| **Description of Internal Monitoring Procedures:** Pupil Service Director and the ELL Coordinator will be doing Bi-Weekly Monitoring. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 1 Annual English Language Proficiency Assessment | **Corrective Action Plan Status:** Approved **Status Date:** 11/17/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Please see ELE 3. |
| **Progress Report Due Date(s):** 01/15/2018 |

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| **Criterion & Topic:** ELE 3 Initial Identification | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district has not established initial identification policies and procedures in accordance with the Department guidelines to identify students who may be English learners and to assess their level of English proficiency upon enrollment in the school district. Furthermore, the district failed to acknowledge EL status of the students who have already been identified as ELs in their previous schools and submitted to the Department inaccurate data by coding them as non-ELs. |
| **Description of Corrective Action:** The district recently hired a full-time ESL Coordinator/Teacher. On-going training will begin the month October which includes professional development inside the school and outside at various locations. The school will fulfill the requirements necessary to serve the ELL population in our district. This will fulfill criterion numbers #1,3,5,6,7,10,13,17. |
| **Title/Role(s) of Responsible Persons:**Nancy AlpinePupil Services Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Progress reports to the DESE through the CAP |
| **Description of Internal Monitoring Procedures:** The ELL Coordinator and Pupil Services Director will monitor progress by-weekly. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 3 Initial Identification | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, 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. In addition, please provide information regarding the training opportunities provided to the staff involved in the initial identification process to keep them informed about the revised policy and procedures. Please include meeting dates, minutes, and sign-in sheets. Furthermore, please complete the form "Initial Identification Testing Data" located in the WBMS Document Library to provide the names and scores of all the students who have been screened for the SY 2017-18. |
| **Progress Report Due Date(s):** 01/15/2018 |

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

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| **Criterion & Topic:** ELE 5 Program Placement and Structure | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district does not have policies and procedures to identify ELs and then use the data to plan and implement educational programs for students at different instructional levels as is required in G.L. c. 71A. |
| **Description of Corrective Action:** The district recently hired a full-time ESL Coordinator/Teacher. On-going training will begin the month October which includes professional development inside the school and outside at various locations. The school will fulfill the requirements necessary to serve the ELL population in our district. This will fulfill criterion numbers #1,3,5,6,7,10,13,17. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine/ Pupil Services Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Progress reports to the DESE through the CAP. Training/Sign-In Sheets |
| **Description of Internal Monitoring Procedures:** The Pupil Service Director and the ELL Coordinator will do bi-weekly monitoring. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018: 1) develop an ELE program and complete the Castañeda test available in the Document Library to inform the Department of the services that are available for ELs in the district; 2) provide training to all staff members involved in the education of ELs to ensure that they are knowledgeable about the program goals described in 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; 3)submit evidence of systematic English language development occurring during the time dedicated to ESL such as unit plans and/or lesson plans that ESL teachers use for ESL instruction; 4) provide a detailed plan on how the school administration will ensure that SEI strategies are implemented and language objectives are taught in SEI classrooms; and 5) complete the EL Roster document available in the WBMS Document Library to document ESL instructional time provided to ELs in the district. |
| **Progress Report Due Date(s):** 01/15/2018 |

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

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| **Criterion & Topic:** ELE 6 Program Exit and Readiness | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents, staff interviews and student data indicated that the district did not identify students who might have met the minimum exit criteria provided in the "Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners" and reclassify them as Former English Learners (FELs). |
| **Description of Corrective Action:** The district recently hired a full-time ESL Coordinator/Teacher. On-going training will begin the month October which includes professional development inside the school and outside at various locations. The school will fulfill the requirements necessary to serve the ELL population in our district. This will fulfill criterion numbers #1,3,5,6,7,10,13,17. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine/Pupil Services Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Progress reports to the DESE through the CAP Training/Sign-in Sheets |
| **Description of Internal Monitoring Procedures:** Pupil Services Director and the ELL Coordinator will monitor bi-weekly progress. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, please submit the district's reclassification policies and procedures. By January 15, 2018, provide training to all staff members involved in the reclassification process to ensure that they are all knowledgeable about the reclassification policies and procedures. Submit the training materials, sign-in sheets, and agendas. |
| **Progress Report Due Date(s):** 01/15/2018 |

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

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| **Criterion & Topic:** ELE 7 Parent Involvement | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district failed to identify students who are ELs and therefore failed to include parents or guardians of ELs in matters pertaining to their children's education and ELE programs. |
| **Description of Corrective Action:** The district recently hired a full-time ESL Coordinator/Teacher. On-going training will begin the month October which includes professional development inside the school and outside at various locations. The school will fulfill the requirements necessary to serve the ELL population in our district. This will fulfill criterion numbers #1,3,5,6,7,10,13,17. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine/ Pupil Services Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Progress reports to the DESE through the CAP.Training/sign-in-sheets |
| **Description of Internal Monitoring Procedures:** The Pupil Services Director and the ELL Coordinator will monitor progress bi-weekly. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 7 Parent Involvement | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, please submit the district's written key procedures and processes to follow in securing a translator or an interpreter; the processes the school district uses to identify limited English proficient parents; and a description of steps the school district takes to provide effective language assistance to parents whose preferred language is not English. |
| **Progress Report Due Date(s):** 01/15/2018 |

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

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| **Criterion & Topic:** ELE 10 Parental Notification | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district did not send a notice upon identification of the students as ELs, and annually thereafter, to inform them of the students' EL status, the services they are eligible for and parental rights of ELs. |
| **Description of Corrective Action:** The district recently hired a full-time ESL Coordinator/Teacher. On-going training will begin the month October which includes professional development inside the school and outside at various locations. The school will fulfill the requirements necessary to serve the ELL population in our district. This will fulfill criterion numbers #1,3,5,6,7,10,13,17. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine/Pupil Service Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Progress reports to the DESE through the CAP/Training/ sign-in sheets |
| **Description of Internal Monitoring Procedures:** The Pupil Services Director and the ELL Director will monitor progress bi-weekly. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 10 Parental Notification | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, please submit the following: 1) a copy of the parent notification letter the district will use; 2) samples of the parent notification letters sent to students' parents or guardians in their preferred language; 3) samples of the progress reports/report cards the district sent or will send to parents or legal guardians to inform them of their child's progress in English language acquisition; and 4) the district's plan about how often ELE progress reports/report cards will be issued and how the district will monitor the process to ensure that parents receive them in their preferred language.By January 15, 2018, provide training to ELE staff to ensure that they are all knowledgeable about the requirements regarding the parent notification letter. Submit the training materials, sign-in sheets, and agendas. |
| **Progress Report Due Date(s):** 01/15/2018 |

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

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| **Criterion & Topic:** ELE 13 Follow-up Support | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district failed to identify students who enrolled in the district as FELs and did not monitor such students to ensure that they make adequate progress and provide them with support, if needed. |
| **Description of Corrective Action:** The district recently hired a full-time ESL Coordinator/Teacher. On-going training will begin the month October which includes professional development inside the school and outside at various locations. The school will fulfill the requirements necessary to serve the ELL population in our district. This will fulfill criterion numbers #1,3,5,6,7,10,13,17. |
| **Title/Role(s) of Responsible Persons:**Nancy Alpine/Pupil Services Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Progress Reports to the DESE./Training/Sign-in sheets |
| **Description of Internal Monitoring Procedures:** The Pupil Services Director and the ELL Coordinator will monitor bi-weeky. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 13 Follow-up Support | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, please submit a plan explaining how the school will monitor the progress of FELs to ensure that they make adequate progress and the level of support that will be available for them provided that they need such support to remedy any academic deficits they incurred as a result of participation in the ELE program and to have access to the curricula taught in the district. By January 15, 2018, provide training to all ELE staff to ensure that they are all knowledgeable about the process. Submit the training materials, sign-in sheets, and agendas.By January 15, 2018, submit evidence demonstrating that the district monitors students who have been reclassified as FELs. |
| **Progress Report Due Date(s):** 01/15/2018 |

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

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| **Criterion & Topic:** ELE 14 Licensure Requirements | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district does not have a licensed ESL teacher assigned to provide ESL instruction to students who are eligible for ELE services. |
| **Description of Corrective Action:** The district hired a licensed ESL Teacher on 10/12/17. |
| **Title/Role(s) of Responsible Persons:**Nancy AlpinePupil Services Director | **Expected Date of Completion:**10/18/2018 |
| **Evidence of Completion of the Corrective Action:**Hired Employee |
| **Description of Internal Monitoring Procedures:** Pupil Services Director |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By January 15, 2018, provide evidence of the licensure of the current ESL teacher(s). |
| **Progress Report Due Date(s):** 01/15/2018 |

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

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| **Criterion & Topic:** ELE 17 Program Evaluation | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** See ELE 5. |
| **Description of Corrective Action:** The district recently hired a full-time ESL Coordinator/Teacher. On-going training will begin the month October which includes professional development inside the school and outside at various locations. The school will fulfill the requirements necessary to serve the ELL population in our district. This will fulfill criterion numbers #1,3,5,6,7,10,13,17. |
| **Title/Role(s) of Responsible Persons:**Nancy AlpinePupil Services Director | **Expected Date of Completion:**09/22/2018 |
| **Evidence of Completion of the Corrective Action:**Progress Reports to the DESE. Trainings/Sign-in sheets |
| **Description of Internal Monitoring Procedures:** Pupil Service Directors and ELL coordinator will monitor progress bi-weekly. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 11/21/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By April 16, 2018, submit the district's plan and include: 1) anticipated frequency of periodic evaluations of the ELE program; 2) names and the assignments of the staff members who will be involved in the district's program evaluation; and 3) qualitative and quantitative data that will be analyzed. |
| **Progress Report Due Date(s):** 04/16/2018 |