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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: Oxford

CPR Onsite Year: 2017-2018

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 09/01/2018.

**Mandatory One-Year Compliance Date:** **09/01/2019**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 11 | School district response to parental request for independent educational evaluation | Partially Implemented |
| SE 39 | Procedures used to provide services to eligible students enrolled in private schools at private expense | Partially Implemented |
| SE 46 | Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 10C | Student Discipline | 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 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |
| ELE 3 | Initial Identification of ELs and FELs | Not Implemented |
| ELE 5 | Program Placement and Structure | Not Implemented |
| ELE 6 | Program Exit and Readiness | Not Implemented |
| ELE 7 | Parent Involvement | Partially Implemented |
| ELE 14 | Licensure Requirements | Partially Implemented |
| ELE 15 | Professional Development Requirements | Not Implemented |
| ELE 17 | Program Evaluation | Not Implemented |

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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 indicated that the district's procedures for independent educational evaluations (IEEs) funded by the district do not address the following: 1) justifying an individual assessment rate higher than normal rate; 2) completion of the IEE within 30 days; 3) assuring that the content of the IEE includes a summary of procedures, assessments, results, diagnostic impressions and recommendations; and 4) extending the right to a publicly funded independent educational evaluation (only if cost shared or funded for state wards or for students receiving free or reduced cost lunch) for sixteen months from the date of the evaluation with which the parent disagrees. The district's procedures also require a written parent request for an IEE, which is not consistent with the regulations. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years, including the Superintendent of Schools. As a direct result of the administrative turnover, there was a lack of procedures to ensure that all aspects of the special education process and procedures were updated. The Assistant Superintendent will revise the Special Education Process and Procedure Handbook, train all appropriate staff, and the handbook will be available online to be used as a reference for staff. The handbook will be reviewed yearly to ensure compliance with DESE regulations and revised as appropriate. Changes will be documented through a Tracking Log, and appropriate staff trained annually. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  10/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Special Education Process and Procedure Handbook will be revised to reflect the appropriate procedures regarding response to parental request for independent educational evaluations. Handbook to be placed online and training to be completed with appropriate special education staff. | | |
| **Description of Internal Monitoring Procedures:**  Yearly review the handbooks, review updated regulations as part of the district's plan by the Assistant Superintendent. | | |
| 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:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, submit a copy of the district's amended procedures for independent educational evaluations (IEEs) funded by the district that include: 1) justifying an individual assessment rate higher than normal rate; 2) completion of the IEE within 30 days; 3) assuring that the content of the IEE includes a summary of procedures, assessments, results, diagnostic impressions and recommendations; and 4) extending the right to a publicly funded independent educational evaluation (only if cost shared or funded for state wards or for students receiving free or reduced cost lunch) for sixteen months from the date of the evaluation with which the parent disagrees. The amended procedures also must eliminate the requirement for a written parent request for an IEE, which is not consistent with the regulations.  By January 7, 2019, submit evidence (meeting agenda, sign-in sheet) that special education staff has received training on the amended procedures. | | |
| **Progress Report Due Date(s):**  11/15/2018  01/07/2019 | | |

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| **Criterion & Topic:**  SE 39 Procedures used to provide services to eligible students enrolled in private schools at private expense | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district's procedures for the provision of services to eligible students enrolled in private schools at private expense, including home-schooled students, do not include a child find process; methods of ongoing timely and meaningful consultation with private school representatives and parents of parentally-placed private school children with disabilities; determination of proportionate share funds calculated; and how funds will be apportioned if federal funds are insufficient to serve all eligible students. Additionally, the school district procedures do not include the requirement to obtain written affirmation that is signed by representatives of participating private schools and parents of home-schooled students documenting that meaningful consultation has occurred. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years, including the Superintendent of Schools. As a direct result of the administrative turnover, there was a lack of procedures to ensure that all aspects of the special education process and procedures were updated. The Assistant Superintendent will revise the Special Education Process and Procedure Handbook, train all appropriate staff, and the handbook will be available online to be used as a reference for staff. The handbook will be reviewed yearly to ensure compliance with DESE regulations and revised as appropriate. Changes will be documented through a Tracking Log, and appropriate staff trained annually. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  10/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Special Education Process and Procedure Handbook will be revised to reflect the appropriate procedures for services to eligible students enrolled in private schools at private expense. Handbook to be placed online and training to be completed with appropriate special education staff. | | |
| **Description of Internal Monitoring Procedures:**  Yearly review the handbooks, review updated regulations as part of the district's plan by the Assistant Superintendent. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 39 Procedures used to provide services to eligible students enrolled in private schools at private expense | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, submit a copy of the district's amended procedures for the provision of services to eligible students enrolled in private schools at private expense, including home-schooled students, that include: a child find process; methods of ongoing timely and meaningful consultation with private school representatives and parents of parentally-placed private school children with disabilities; determination of proportionate share funds calculated; and how funds will be apportioned if federal funds are insufficient to serve all eligible students.  By November 15, 2018, submit copies of written affirmation that is signed by representatives of participating private schools and parents of home-schooled students documenting that meaningful consultation has occurred. | | |
| **Progress Report Due Date(s):**  11/15/2018 | | |

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| **Criterion & Topic:**  SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the district procedures for suspension of students with disabilities do not address the following: 1) steps that should be taken if the behavior was the result of the district's failure to implement the IEP; 2) completion of a functional behavior assessment or modification of an existing behavior intervention plan when the behavior is a manifestation of the disability;  3) provisions for placing a student into an interim alternative educational setting for up to 45 days; and 4) notifying the parents of the decision to take disciplinary action and providing written notice of procedural safeguards. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years, including the Superintendent of Schools. As a direct result of the administrative turnover, there was a lack of procedures to ensure that all aspects of the special education process and procedures were updated. The Assistant Superintendent will revise the Special Education Process and Procedure Handbook, train all appropriate staff, and the handbook will be available online to be used as a reference for staff. The handbook will be reviewed yearly to ensure compliance with DESE regulations and revised as appropriate. Changes will be documented through a Tracking Log, and appropriate staff trained annually. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  10/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Special Education Process and Procedure Handbook will be revised to reflect the procedures for suspension of students with disabilities. Handbook to be placed online and training to be completed with appropriate staff. | | |
| **Description of Internal Monitoring Procedures:**  Yearly review the handbooks, review updated regulations as part of the district's plan by the Assistant Superintendent. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, submit a copy of the district amended procedures for suspension of students with disabilities that include: 1) steps that should be taken if the behavior was the result of the district's failure to implement the IEP; 2) completion of a functional behavior assessment or modification of an existing behavior intervention plan when the behavior is a manifestation of the disability; 3) provisions for placing a student into an interim alternative educational setting for up to 45 days; and 4) notifying the parents of the decision to take disciplinary action and providing written notice of procedural safeguards.  By January 7, 2019, evidence (agenda, sign-in, materials) that special education staff and school principals have received training on the amended procedures. | | |
| **Progress Report Due Date(s):**  11/15/2018  01/07/2019 | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that Oxford High School, Oxford Middle School and the elementary school handbooks do not include: 1) complete policies and procedures for student discipline  (see CR 10C); 2) procedures for suspension of students with disabilities and students on a Section 504 Accommodation Plan; and 3) the protected category of gender identity in the non-discrimination statement. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years including in the Superintendent of Schools. As a direct result of the administrative turnover, there was a lack of procedures to ensure that all aspects of the handbooks were updated. The Administrative Leadership Team will revise the handbooks and codes of conduct to ensure that all policies and procedures for student discipline for all populations are updated to reflect DESE regulations. Additionally, the district's policies will be reviewed to ensure that the non-discriminatory statement includes gender identity. All staff will be trained, and the handbook will available to all populations online. The handbook will be reviewed yearly to ensure compliance with DESE regulations and revised as appropriate. Changes will be documented through a Tracking Log, and appropriate staff trained annually. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services  Building Principals | | **Expected Date of Completion:**  10/30/2018 |
| **Evidence of Completion of the Corrective Action:**  All school handbooks will be revised to reflect the appropriate procedures. Handbook to be placed online and training to be completed with all staff. | | |
| **Description of Internal Monitoring Procedures:**  Yearly review the handbooks, review updated regulations as part of the district's plan by the Assistant Superintendent. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, submit the web links to the Oxford High School, Oxford Middle School and the elementary school handbooks that include: 1) complete policies and procedures for student discipline (see CR 10C); 2) procedures for suspension of students with disabilities (see SE 46) and students on a Section 504 Accommodation Plan; and 3) the protected category of gender identity in the non-discrimination statement. | | |
| **Progress Report Due Date(s):**  11/15/2018  01/07/2019 | | |

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the district Bullying Prevention and Intervention Plan has not been updated consistent with the amendments to the Massachusetts anti-bullying law, which became effective July 1, 2013, to extend protections to students who are bullied by a member of the school staff, and does not make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. In addition, all school handbooks have not been updated to reflect the amendments to the anti-bullying law. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years including the Superintendent of Schools. As a direct result of the administrative turnover, there was a lack of procedures to ensure that all aspects of the district Bullying Prevention and Intervention Plan were updated and consistent with the amendments to the Massachusetts anti-bullying law and extended protections to students bullied by a school staff member. As a direct result, the student handbooks do not reflect that the protections to students who are bullied by a member of the school staff, and do not contain the relevant amendments to the anti-bullying law. The Assistant Superintendent will revise the Bullying Prevention and Intervention Plan to ensure full compliance. The building administrators will train all staff, and the handbook will be revised and placed online for full viewing with an addendum for the SY 2018-2019. The handbook will be reviewed yearly to ensure compliance with DESE regulations and revised as appropriate. Changes will be documented through a Tracking Log, and appropriate staff trained annually. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent of Schools  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  11/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Web site link to the updated Plan. All school handbooks will be revised to reflect the appropriate information. Handbook to be placed online and training to be completed with all staff. | | |
| **Description of Internal Monitoring Procedures:**  Yearly review the handbooks/district plans, review updated regulations as part of the district's plan by the Assistant Superintendent. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, please submit a web link to the district's updated Bullying Prevention and Intervention Plan that includes the amendments to the Massachusetts anti-bullying law, which became effective July 1, 2013, to extend protections to students who are bullied by a member of the school staff, and makes clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report.  By November 15, 2018 also submit web links to all school handbooks have been updated to reflect the amendments to the anti-bullying law.  By January 7, 2019 please submit evidence (agenda, sign-in, materials) that all staff have been trained on the updated Bullying Prevention and Intervention Plan. | | |
| **Progress Report Due Date(s):**  11/15/2018  01/07/2019 | | |

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the discipline policy and procedures do not include making provisions for a student's safety and transportation for an emergency removal of a student, and do not address the use of in-school suspension as an alternative to short-term suspension.  In addition, the district has not developed a Notice of Suspension and Hearing, and has not developed a system for the review of student suspension data. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years including the Superintendent of Schools. As a direct result of the administrative turnover, there was a lack of procedures to ensure that all aspects of the district policy and procedures were updated and consistent with the need for provisions for a student's safety and transportation for an emergency removal of a student, and the use of in-school suspension as an alternative to short-term suspension. As a direct result, the student handbooks do not reflect that the revised discipline policy. The Assistant Superintendent will revise the policies and procedures to ensure full compliance. The revised policies will be reviewed by the administrative leadership team and presented to the School Committee for approval. Additionally, the Central Office administration will work with the Building Principals to periodically review discipline data by special populations, to include a monthly report to administration. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent of Schools  Assistant Superintendent  Building Principals | | **Expected Date of Completion:**  11/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Revised policy and procedures documents, student handbooks, and description of the review system. | | |
| **Description of Internal Monitoring Procedures:**  Yearly review of handbooks, review updated regulations as part of the district's plan. Periodic review of discipline data by the Assistant Superintendent. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, submit a copy of the district's updated discipline policy and discipline procedures that include making provisions for a student's safety and transportation for an emergency removal of a student, and addresses the use of in-school suspension as an alternative to short-term suspension.  By November 15, 2018, submit a copy of the Notice of Suspension and Hearing  By November 15, 2018, submit a copy of the district's system for the review of student suspension data by special populations.  By January 7, 2019, submit evidence (agenda, sign-in, materials) that all staff has been informed of the updated discipline policy and procedures. | | |
| **Progress Report Due Date(s):**  11/15/2018  01/07/2019 | | |

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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 indicated that the notice sent to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion does not offer at least two dates and times for an exit interview between the superintendent (or designee) and the student and the parent/guardian to occur prior to the student permanently leaving school, and is sent after a student has been absent for 15 consecutive days, instead of ten days, as required. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation revealed that the high school has experienced a low incidence of students failing to receive a diploma. As a result, a written notice to students and their parents has not been implemented properly. Due to the low incidence of this issue, the requirements of the notice did not offer at least two dates and times for an exit interview between the superintendent (or designee) and the student and the parent/guardian to occur prior to the student permanently leaving school, and is sent after a student has been absent for 15 consecutive days, instead of ten days. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent  Building Administration, HS  HS Guidance Counselors | | **Expected Date of Completion:**  10/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Revised letter used to inform parents and students will include at least two dates and times for an exit interview between the superintendent (or designee) and the student and the parent/guardian to occur prior to the student permanently leaving school, and is sent after a student has been absent for 15 consecutive days, instead of ten days, as required. | | |
| **Description of Internal Monitoring Procedures:**  Internal review of records of students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion by the Assistant Superintendent to be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, submit a copy of the amended notice sent to students 16 or over sent within 5 days from the student?s tenth consecutive absence to the student and the parent/guardian that offers at least two dates and times for an exit interview between the superintendent (or designee) and the student and the parent/guardian to occur prior to the student permanently leaving school.  By January 7, 2019, provide a list of students with 10 or more consecutive absences since the beginning of the school year, and a copy of the notice sent to each student within 5 days from the student's tenth consecutive absence. | | |
| **Progress Report Due Date(s):**  11/15/2018  01/07/2019 | | |

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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 indicated that the district's physical restraint policy does not prohibit the use of prone restraint. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years, including the Superintendent of Schools. As a direct result of the administrative turnover, there was a lack of procedures to ensure that district policies were updated. The Assistant Superintendent has revised the Physical Restraint Policy and has included the prone restraint as a prohibited form of restraint. The updated policy will be presented to School Committee during October meeting, and after approved staff will be trained regarding the revision. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  10/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Revised Physical Restraint Policy. | | |
| **Description of Internal Monitoring Procedures:**  Yearly review the policy and procedures, review updated regulations as part of the district's plan. by Assistant Superintendent. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, submit a web link to the district's amended physical restraint policy that prohibits the use of prone restraint.  By November 15, 2018, submit evidence (agenda, sign-in, materials) that all staff has received training on the restraint prevention and behavior support policy and procedures. | | |
| **Progress Report Due Date(s):**  11/15/2018 | | |

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| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not consistently ensure that individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation and use appropriate activities, discussions and/or supplementary materials to provide balance and context for any such stereotypes depicted in such materials. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is due to the lack of Curriculum Director. The district has been without a Curriculum Director for many years. During this time period, the curricular review has lapsed. As a direct result of the lack of a Curriculum Director, there was a lack of oversight regarding the review of all educational materials. The review of materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation and use appropriate activities, discussions and/or supplementary materials to provide balance and context for any such stereotypes depicted in such materials will be completed annually. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  11/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Principals will annually address with all faculty the need to review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation and use appropriate activities, discussions and/or supplementary materials to provide balance and context for any such stereotypes depicted in such materials at the beginning of each school year. The District Curriculum Development and Revision Guidelines will be updated to include the review criteria for all educational materials. | | |
| **Description of Internal Monitoring Procedures:**  Assistant Superintendent to address annually with the Administrators at Leadership Team at the August Retreat, and review the handbooks and updated regulations yearly. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, submit a description of the materials and training that the district will use, including the District Curriculum Development and Revision Guidelines, to ensure that all individual teachers review all educational materials used in the classroom for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation and use appropriate activities, discussions and/or supplementary materials to provide balance and context for any such stereotypes depicted in such materials.  By January 7, 2019, provide evidence (agenda, sign-in, materials) that all staff has been trained in curriculum review and use of supplementary materials. | | |
| **Progress Report Due Date(s):**  11/15/2018  01/07/2019 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not evaluate all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities, and make such changes as are indicated by the evaluation. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to comply with this regulation is the lack of procedure to ensure that all aspects of its K-12 program are evaluated annually to ensure that all students regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. The district will develop a procedure to ensure that all aspects of its K-12 program are evaluated annually and develop a process to document that all aspects of its K-12 program are evaluated annually to ensure that all students have equal access to all programs, including athletics and other extracurricular activities. Trainings for administrative staff will be completed. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent of Schools  Assistant Superintendent  Building Principals | | **Expected Date of Completion:**  11/15/2018 |
| **Evidence of Completion of the Corrective Action:**  The Institutional Self-Evaluation procedure and process will be developed and all staff will be trained by the building administration. The procedure and process will be available online, and completed annually. | | |
| **Description of Internal Monitoring Procedures:**  Assistant Superintendent to address annually with the Administrators at Leadership Team and this team will review the data yearly at the August Retreat. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, please submit a description of the procedures the district will use, and a copy of any tool it develops (check list, questionnaire, etc.) to evaluate all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities, and make such changes as are indicated by the evaluation.  By January 7, 2019, please submit the results of the district's evaluation, conclusions reached, and resolution of any identified issues. | | |
| **Progress Report Due Date(s):**  11/15/2018  01/07/2019  06/28/2019 | | |

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

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| **Criterion & Topic:**  ELE 3 Initial Identification of ELs and FELs | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review indicated that the district does not use the state required language screening assessments, namely WIDA Screener 2.0. The district's current initial identification practices are not in compliance with 603 CMR 14.02(1) that requires districts to establish procedures in accordance with the Department guidelines. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years, including the Superintendent of Schools. As a direct result of the administrative turnover and the low incidence of ELs in the district, there was a lack of procedures to ensure that all aspects of the English Learner Handbook process and procedures were updated. The Assistant Superintendent will revise the handbook, train all appropriate staff, and the handbook will be available online to be used as a reference for staff. The handbook will be reviewed yearly to ensure compliance with regulations and revise as appropriate. It should be noted that the district implemented the required language screening assessment, WIDA Screener 2.0, as of August 2018. and the initial identification practices are in place. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  10/30/2018 |
| **Evidence of Completion of the Corrective Action:**  English Learner Handbook is in the process of being revised to reflect appropriate procedures regarding use of the state required language screening assessments, namely WIDA Screener 2.0. The district's current initial identification practices are not in compliance with 603 CMR 14.02(1) that requires districts to establish procedures in accordance with the Department guidelines The district implemented the required language screening assessment, WIDA Screener 2.0, as of August 2018. and the initial identification practices are in place. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent will complete a yearly review of the handbooks, review updated regulations as part of the district's plan. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 3 Initial Identification of ELs and FELs | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, the district will submit:  1) the revised handbook informing staff of the use of DESE approved screeners, and  2) sign-in sheets, training materials and agendas for trainings provided to staff members involved in the initial identification process. | | |
| **Progress Report Due Date(s):**  11/15/2018 | | |

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

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| **Criterion & Topic:**  ELE 5 Program Placement and Structure | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and staff interviews indicated that the district does not have an ESL curriculum or ESL curricular materials that guide the ESL instruction. Submitted documentation indicated that district curriculum cycles are for the general curriculum only. Therefore, there is no evidence showing whether the time dedicated to ESL services is used for English language development. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years, including the Superintendent of Schools. As a direct result of the administrative turnover and the low incidence of ELs in the district, there was a lack of oversight within the English Learner Department which consists of one staff person. The Castenada's Three Pronged Test form will be utilized and completed by the EL Team (Assistant Superintendent and ESL Teacher) during their regularly scheduled meetings as a means of evaluating the adequacy of the District's program for English Language Learners. The team will research ESL curriculum currently being used by other "like" Districts through networking make a recommendation for adoption/purchase of the curriculum that is determined to be the best "fit" for the EL population. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  12/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Completed Castenada's Three Pronged Tool form, and the adopted ESL curriculum will be discussed with the administrative team. The ESL curriculum to be implemented during the 2018-2019 school year. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent will complete a yearly review of the EL handbook, review updated regulations, and review the curriculum to ensure alignment with standards. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, the district will submit:  1) a plan for developing/adopting ESL curriculum, and  2) the timeline that shows executive milestones of the project, estimated completion, and implementation time frame.  Please note that the plan should include the content to be taught, address the instructional needs of the EL population at all levels, and ensure that ESL curriculum is aligned to WIDA and to the Massachusetts Curriculum Frameworks and based on the research, theory, and pedagogy of second language acquisition within the context of the Massachusetts Curriculum Frameworks. | | |
| **Progress Report Due Date(s):**  12/03/2018 | | |

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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:**  Document review indicated that the district's reclassification procedures have not been revised and do not refer to ACCESS for ELLs 2.0 nor indicate scores required for reclassification. The district's current reclassification procedures are not in compliance with 603 CMR 14.02 that requires districts to establish exit criteria in accordance with the Department guidelines. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years, including the Superintendent of Schools. As a direct result of the administrative turnover and the low incidence of ELs in the district, there was a lack of procedures to ensure that all aspects of the English Learner Handbook process and procedures were updated. The Assistant Superintendent revised the reclassification procedures to reflect the most recent ACCESS for ELLs 2.0 and scores required for reclassification. All appropriate staff will be trained, and the handbook will be available online to be used as a reference for staff. The handbook will be reviewed yearly to ensure compliance with regulations and revise as appropriate. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  10/30/2018 |
| **Evidence of Completion of the Corrective Action:**  English Learner Handbook is in the process of being revised to reflect appropriate procedures regarding the reclassification procedures that refer to ACCESS for ELLs 2.0 and the scores required for reclassification. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent will complete a yearly review of the handbook, and review updated regulations as part of the district's plan. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, the district will submit:  1) evidence of its revised reclassification procedures included in the revised handbook, and  2) evidence that staff have been trained regarding the revised reclassification procedures, including meeting agenda(s), sign-in sheets, and meeting materials. | | |
| **Progress Report Due Date(s):**  11/15/2018 | | |

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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 student records and document review indicated that the district does not always provide language assistance to parents whose preferred language is not English and, therefore, does not always meet the obligation to communicate effectively with parents to include them in matters pertaining to their children's education. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years, including the Superintendent of Schools. As a direct result of the administrative turnover and the low incidence of ELs in the district, there was a lack of procedures to ensure that all aspects of the English Learner Handbook process and procedures were updated. Due to the extremely low incidence, the need for translators has been minimal and therefore overlooked by the district. The Assistant Superintendent will locate and contract with translator/Interpreters in order to provide language assistance to parents upon request resulting in effective communication regarding matters pertaining to their children's education. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  12/01/2018 |
| **Evidence of Completion of the Corrective Action:**  The Assistant Superintendent will locate and contract with translator/Interpreters in order to provide language assistance to parents upon request. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent will develop and maintain an Interpreter/Translator logs will show increased language assistance provided to parents whose preferred language is not English, so that the district meets the obligation to include parents in matters pertaining to their children's education. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 7 Parent Involvement | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, the district will submit:  1) evidence of written policies and procedures for securing translation and interpretation services upon parent request, and  2) evidence of training provided to all staff regarding translation and interpretation policies and procedures, specifically sign-in sheets, agenda, training materials. | | |
| **Progress Report Due Date(s):**  12/03/2018 | | |

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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:**  Staff interviews and the relevant SEI endorsement data indicated that most core academic teachers assigned to provide sheltered English instruction to English learners hold the SEI Teacher Endorsement, but some do not. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the low incidence of ELs in the district. As a direct result, EL's are assigned to most core academic teachers who are SEI endorsed, but due to the lack of oversight regarding class scheduling the district is not in full compliance. All principals and assistant principals assigned to supervise or evaluate core academic teachers who provide sheltered English instruction to English learners will hold the SEI Teacher Endorsement or the SEI Administrator Endorsement. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  10/30/2018 |
| **Evidence of Completion of the Corrective Action:**  The district will continue to hire SEI endorsed core academic teachers, and to place EL students in all core academic classes with SEI Endorsed teachers. The Assistant Superintendent and building principals will monitor the placement of EL students within the classroom of SEI Teacher Endorsed teachers through the oversight of the identified students' schedule. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent will receive reports in September, January and March from the district data analyst showing all EL students and review schedules to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018:  1) Provide information on the support the district will provide to help the unendorsed educator(s) earn their endorsement and a timeline that shows the educators' efforts towards earning their SEI endorsement.  2) Submit the district's plan to ensure that ELs are assigned only to core academic teachers who hold the SEI endorsement.  3) Provide training to district administrators to ensure compliance with procedure and placement of students. Submit the training materials, sign-in sheets and agendas by the progress report due date.  4) Submit the completed SEI endorsement form available in the Document Library to provide information regarding the SEI endorsement status of the core academic teachers of ELs in the district. | | |
| **Progress Report Due Date(s):**  12/03/2018 | | |

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

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| **Criterion & Topic:**  ELE 15 Professional Development Requirements | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review indicated that a professional development plan does not exist to provide training in second language acquisition for staff to earn 15 Professional Development Points (PDPs) towards recertification as required under state statute 603 CMR 14.07. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is due to the lack of Curriculum Director. The district has been without a Curriculum Director for many years. During this time period, the curricular review has lapsed in all areas including professional development and the implementation of a comprehensive professional development plan. The district does provide all staff with information regarding PD available within the surrounding area. In August 2018, the Administrative Leadership Team started developing a professional development plan with a focus on meeting the needs of the district in the areas of differentiated instruction and second language acquisition professional development. The Leadership Team is in the process of developing a comprehensive plan for the district and providing in-house PD to meet the needs of the teaching staff | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent  Assistant Superintendent of Special Education & Student Services | | **Expected Date of Completion:**  11/15/2018 |
| **Evidence of Completion of the Corrective Action:**  The Administrative Leadership Team will develop a comprehensive Professional Development Plan that will include differentiated instruction and second language acquisition training/techniques for teachers as part of the ongoing annual planning and implementation process. | | |
| **Description of Internal Monitoring Procedures:**  The Superintendent/Assistant Superintendent will monitor the Professional Development Plan annually and revise as appropriate. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 15 Professional Development Requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018, the district will submit its comprehensive Professional Development Plan to include the required training in second language acquisition for staff to earn 15 Professional Development Points (PDPs) towards recertification, as required under state statute 603 CMR 14.07. | | |
| **Progress Report Due Date(s):**  11/15/2018 | | |

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

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| **Criterion & Topic:**  ELE 17 Program Evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Since the district did not submit its most recent program evaluation which was a required document for the review of this criterion, the Department concludes that the district does not have a comprehensive process to evaluate the effectiveness of its ELE programming in developing students' English language skills and increasing their ability to participate meaningfully in the district's educational program. | | |
| **Description of Corrective Action:**  The root cause of the district's failure to fully comply with this regulation is an oversight due to the numerous turnover in administrators during the past several years, including the Superintendent. As a direct result of the administrative turnover, there was a lack of procedures to ensure that all aspects of student services process and procedures were updated. The district will develop a process of ongoing evaluation of the effectiveness of its ELE Program utilizing a number of tools and data points, including: Castenda's Three Pronged test, ACCESS for ELL's reports, screening results, and outcomes of monitoring of students. The process will include a plan for the steps to be taken as a result of changes / adjustment that need to be made based on the outcomes of the evaluation. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent  Assistant Superintendent | | **Expected Date of Completion:**  11/15/2018 |
| **Evidence of Completion of the Corrective Action:**  The program evaluation process will include a plan for the steps to be taken as a result of changes/adjustment that need to be made based on the outcomes of the evaluation. A written report of findings and conclusions, including recommendations and action steps to be developed by the Assistant Superintendent and discussed with the Administrative Leadership Team. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent will review the annual program evaluation with the Administrative Leadership Team. The evaluation results will be used to enhance the quality of instruction in the district.. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 10/16/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 15, 2018:  1.) Complete the program evaluation tool that is available at http://www.doe.mass.edu/ell/ProgramEvaluation.pdf The district must complete all of the components of the attached form in order to evaluate the effectiveness of its ELE program in developing students' English language skills and increasing their ability to participate meaningfully in the district's educational program.  2.) Provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation.  3.) Provide a plan of action to make appropriate program adjustments or changes that are responsive to the outcomes of the program evaluation to improve the effectiveness of the program at promoting and supporting the rapid acquisition of English language proficiency by ELs as is required in G.L. c. 71A. | | |
| **Progress Report Due Date(s):**  11/15/2018 | | |