|  |
| --- |
| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION****Program Quality Assurance Services** |

##### COORDINATED PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Weston

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 01/26/2018.

**Mandatory One-Year Compliance Date:** **01/26/2019**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | 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 | Partially Implemented |
| ELE 14 | Licensure Requirements | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and staff interviews indicated that the district documents a student's choice to share or delegate their rights, and implements procedures to obtain consent to a new or revised IEP from the student with decision-making authority. However, records and interviews indicate that the district does not affirmatively obtain consent from the student with decision-making rights once he or she turns age 18 to continue the student's special education program. |
| **Description of Corrective Action:** Weston Public Schools will develop a procedure for obtaining consent to a new or revised IEP from the student with decision making authority. Once the procedure is created, the Director and Assistant Director of Student Services will conduct trainings for the high school special education teachers, guidance counselors, team chair, Dept. Head for Special Education and the Out of District Coordinator. Upon completion of the training, the Director of Student Services will conduct an internal document review to ensure procedure is being followed. |
| **Title/Role(s) of Responsible Persons:**Jennifer Truslow/Director of Student Services | **Expected Date of Completion:**06/30/2018 |
| **Evidence of Completion of the Corrective Action:**Procedure documentTraining documents: Agenda, sign in sheetsCompliance review document |
| **Description of Internal Monitoring Procedures:** Upon completion of training and compliance review, the Director of Student Services will continue to monitor compliance by reviewing records of 18 year olds twice per year (December and May). |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By May 2, 2018 submit the procedures for obtaining consent to continue the special education program from the student with decision-making rights once he or she turns age 18, and evidence of training on the procedures for high school special education and guidance staff including the agenda, training materials, signed attendance sheets, and the name/role of presenter. Please see the Department's guidance on age of majority at http://www.doe.mass.edu/sped/advisories/11\_1.html. By June 30, 2018 submit the results of an internal review of approximately five (5) records of students who turned 18 subsequent to implementation of all corrective actions for evidence the district gained the student's consent to continue their special education program and placement, or documentation of the student's choice to delegate decision-making rights.Provide a detailed summary of the internal review including the number of records reviewed, and the number showing that the district obtained the student's consent or documented the student's choice to delegate their rights. If non-compliance is identified, report the specific actions taken to correct it and report the root cause(s) of the ongoing non-compliance as well as a plan to remedy it.\*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):** 05/02/201806/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 13 Progress Reports and content | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and staff interviews indicated that when a student's eligibility terminates because the student has graduated or exceeded the age of eligibility, the district does not consistently provide a summary of achievement and functional performance or recommendations on how to assist the student in meeting his or her postsecondary goals. |
| **Description of Corrective Action:** Weston Public Schools will develop a procedure and a document for providing a summary of achievement and functional performance or recommendations to assist students in meeting his/her post-secondary goals when eligibility terminates. Once the procedure is created, the Director of Student Services will conduct a training with high school special education teachers, guidance counselors, and Out of District Coordinator on procedure and document. Upon completion of the training, the Director of Student Services will conduct an internal review of in-district and out of district students graduating or aging out. |
| **Title/Role(s) of Responsible Persons:**Jennifer Truslow, Director of Student Services | **Expected Date of Completion:**06/30/2018 |
| **Evidence of Completion of the Corrective Action:**Procedure and summary document/ExemplarTraining documents: sign in sheets, agenda, procedure and document Review of Records |
| **Description of Internal Monitoring Procedures:** Upon completion of training and compliance review, the Director of Student Services will continue to monitor compliance twice per year (December and June). |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 13 Progress Reports and content | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By May 2, 2018 submit procedures for providing a summary of achievement and functional performance or recommendations on how to assist the student who is graduating or aging out of special education in meeting his or her postsecondary goals, and evidence of training on the procedures for high school special education staff including the agenda, training materials, signed attendance sheets, and the name/role of presenter.By June 30, 2018 submit the results of an internal review of approximately five (5) records of students who graduated or aged out of special education services subsequent to implementation of all corrective actions for evidence the district provided a summary of achievement and functional performance or recommendations on how to assist the student who is graduating or aging out of special education in meeting his or her postsecondary goals.Provide a detailed summary of the internal review including the number of records reviewed, and the number showing that the district provided a summary of achievement and functional performance or recommendations on how to assist the student who is graduating or aging out of special education in meeting his or her postsecondary goals. If non-compliance is identified, report the specific actions taken to correct it and report the root cause(s) of the ongoing non-compliance as well as a plan to remedy it.\*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):** 05/02/201806/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 18B Determination of placement; provision of IEP to parent | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that parents consistently leave with summary notes at the conclusion of the IEP Team meeting, which include a completed IEP service delivery grid describing the types and amounts of special education and related services proposed by the district and a statement of the major goal areas associated with these services. However, the district provides the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice beyond two calendar weeks of the Team meeting. |
| **Description of Corrective Action:** Weston Public Schools will develop a system for ensuring that IEPs are provided to parents within two calendar weeks of the Team Meeting. The Director of Student Services will conduct a Root Cause Analysis, to determine reasons why IEPs not going out within 10 days, by April 30, 2018. Based on findings, procedures will be developed. Training of team chairs, special education teachers, aides and related service providers will be conducted. |
| **Title/Role(s) of Responsible Persons:**Jennifer Truslow, Director of Student Services | **Expected Date of Completion:**09/30/2018 |
| **Evidence of Completion of the Corrective Action:**Procedure documentTraining documents: sign in sheet, agendaCompliance document from record review |
| **Description of Internal Monitoring Procedures:** Upon completion of training and compliance review, the Director of Student Services will continue to monitor compliance with record reviews in November, February and June. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By May 2, 2018 submit procedures for ensuring that IEPs are provided to parents within two (2) calendar weeks of the Team meeting, and evidence of training on the procedures including the agenda, training materials, signed attendance sheets, and the name/role of presenter.By June 30, 2018 submit the results of an internal review of approximately ten (10) records of students with IEP development subsequent to implementation of all corrective actions for evidence the district provided the IEP and placement within two (2) calendar weeks of the Team meeting.Provide a detailed summary of the internal review including the number of records reviewed, and the number showing that the district provided and placement within two (2) calendar weeks of the Team meeting. If non-compliance is identified, report the specific actions taken to correct it and report the root cause(s) of the ongoing non-compliance as well as a plan to remedy it.\*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):** 05/02/201806/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** SE 20 Least restrictive program selected | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that IEP Teams do not consistently state why removal from the general education classroom is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. |
| **Description of Corrective Action:** Weston Public Schools will develop a procedure for ensuring that IEP teams consistently state why removal from the general education classroom is considered critical to student success and why it could not be achieved satisfactorily in the least restrictive environment. Once the procedure is created, team chairs will participate in a district-developed training to ensure understanding of procedure. Upon completion of training, the Director of Student Services will conduct an internal document review to ensure compliance. |
| **Title/Role(s) of Responsible Persons:**Jennifer Truslow, Director of Student Services | **Expected Date of Completion:**06/30/2018 |
| **Evidence of Completion of the Corrective Action:**Procedure documentTraining materials: Agenda, sign in sheetsCompliance document |
| **Description of Internal Monitoring Procedures:** Upon completion of training and compliance review, the Director of Student Services will continue to monitor compliancewith record reviews in November, February and June. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By May 2, 2018 submit evidence of training on procedures for ensuring that IEP Teams consistently state why removal from the general education classroom is considered critical to student success and why it could not be achieved satisfactorily in the least restrictive environment, and evidence of training on the procedures including the agenda, training materials, signed attendance sheets, and the name/role of presenter.By June 30, 2018 submit the results of an internal review of approximately ten (10) student records with IEP development subsequent to implementation of all corrective actions, and whose IEP includes grid C services, for evidence that IEP Teams consistently state why removal from the general education classroom is considered critical to student success and why it could not be achieved satisfactorily in the least restrictive environment.Provide a detailed summary of the internal review including the number of records reviewed, and the number showing that IEP Teams stated why removal from the general education classroom is considered critical to student success and why it could not be achieved satisfactorily in the least restrictive environment. If non-compliance is identified, report the specific actions taken to correct it and report the root cause(s) of the ongoing non-compliance as well as a plan to remedy it.\*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):** 05/02/201806/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 10A Student handbooks and codes of conduct | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and interviews indicated that, although the district has established student discipline policies and procedures to meet the requirements of 603 CMR 53.00, as created under M.G.L. c. 71, § 37H¾, and efforts have been made to update school handbooks, the code of conduct provided to elementary and middle school students and their parents in their respective school handbooks has not been updated to include all requirements of the regulations. Specifically, the code of conduct does not include all procedural safeguards for the discipline of students with disabilities and students not yet determined to be eligible for special education, the responsibility for the district to provide the student with an opportunity to make academic progress during the period of suspension or expulsion, and the principal notice to the superintendent of the written determination and explaining the reasons for imposing an out-of-school suspension before the short-term suspension of a student in grades K to 3 takes effect. Furthermore, the elementary and middle school handbooks state that if a student moves to another district during a period of suspension or expulsion, the new district of residence is not under any obligation to admit the student to its schools or provide educational services to the student, which is in violation of M.G.L. c. 71, § 37H and M.G.L. c. 71, § 37H ½. |
| **Description of Corrective Action:** Weston Public Schools will revise the elementary and middle school handbooks, in particular, the Code of Conduct in order to align them to the current regulations. Once the updates have been made, the building principals will post the revised handbooks to their respective website pages and notify families through our newsletter/mail function within the website, through our email distribution lists to families, and via their school-based monthly newsletters. As part of these notifications, translations will be available. |
| **Title/Role(s) of Responsible Persons:**Pamela Bator, Asst. Superintendent | **Expected Date of Completion:**04/30/2018 |
| **Evidence of Completion of the Corrective Action:**Updated handbooks (with a website link to where posted)Copy of newsletter/email provided to families |
| **Description of Internal Monitoring Procedures:** In addition to being reviewed by individual school councils, school handbooks will be reviewed annually to ensure consistency, accuracy, and currency by the building principals and the Assistant Superintendent. This annual review will become part of the summer retreat for all administrators. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By May 2, 2018 submit revised elementary and middle school codes of conduct demonstrating that they meet the requirements of 603 CMR 53.00, specifically including the following:1. procedural safeguards for the discipline of students with disabilities and students not yet determined to be eligible for special education;2. the responsibility for the district to provide the student with an opportunity to make academic progress during the period of suspension or expulsion;3. the requirement of the principal to provide notice to the superintendent of the written determination and explain the reasons for imposing an out-of-school suspension before the short-term suspension of a student in grades K to 3 takes effect; and4. the requirement to admit a student to its schools or provide educational services to a student who moves into the district during a period of suspension or expulsion from another district.Also provide evidence, such as a notice on the school website or an email sent to staff, families, and students, that the school community has been notified of the revisions to the code of conduct. |
| **Progress Report Due Date(s):** 05/02/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 10B Bullying Intervention and Prevention | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that although the district's Bullying Prevention and Intervention Plan has been updated in accordance with the regulations, staff training materials do not include staff in the definition of "aggressor" or include provisions addressing the bullying of students by a school staff member. |
| **Description of Corrective Action:** Weston Public Schools will develop an updated set of district-wide set of staff training materials to include staff in the definition of "aggressor" and to include provisions addressing the bullying of students by a school staff member. Once these materials have been developed (which includes an updated platform for the materials as we are moving from Moodle to Google Classroom), all staff will be informed of the specific update (cited above) as soon as the trainings have been created. All staff will complete the entire training (including the updated material) on an annual basis. |
| **Title/Role(s) of Responsible Persons:**Pamela Bator, Asst. Superintendent | **Expected Date of Completion:**09/30/2018 |
| **Evidence of Completion of the Corrective Action:**The updated material will be shared with all staff as soon as it has been developed. The communication to staff about the update is one piece of evidence that can be shared by 4/30/18. The entire training module which is shared annually with all staff, once created on Google Classroom is another piece of evidence that can be shared by 9/30/18. |
| **Description of Internal Monitoring Procedures:** The training for all staff on Bullying Intervention and Prevention occurs annually. Every summer, prior to the start of the school year, the modules used for training purposes will be reviewed by the Director of Student Services and the Assistant Superintendent for any needed updating. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By May 2, 2018 submit training materials on the district's bullying prevention and intervention plan revised to include staff in the definition of aggressor and including provisions for addressing the bullying of students by a school staff member, and provide evidence that staff have been notified of the revisions.By September 30, 2018 submit evidence that all teaching and non-teaching staff have been trained on the bullying plan with the revised materials, and include signed attendance sheets, training materials, and the name and role of presenter(s). |
| **Progress Report Due Date(s):** 05/02/201809/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 10C Student Discipline | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district has not developed a School-wide Education Service Plan. |
| **Description of Corrective Action:** Weston Public Schools will develop a district-wide and school-wide Education Service Plan (ESP) in order to provide students with options for access to education. Once the ESP is created, administrators and other educators who might be involved in supporting the student who needs the ESP will participate in district-developed training on the options provided. |
| **Title/Role(s) of Responsible Persons:**Pamela Bator, Asst. Superintendent | **Expected Date of Completion:**06/30/2018 |
| **Evidence of Completion of the Corrective Action:**The Education Service PlanAgenda and materials from training |
| **Description of Internal Monitoring Procedures:** Upon completion of training, principals will continue to monitor compliance annually. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10C Student Discipline | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By May 2, 2018 submit the school-wide education service plan to enable students who have been suspended for more than ten (10) days to continue to make academic progress while suspended. |
| **Progress Report Due Date(s):** 05/02/201806/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated the district's written notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion, and to their parents/guardians, does not offer the parent/guardian the option to request an extension of up to 14 days for the exit interview. In addition, the district's annual notice to former students who have not yet earned their competency determination is sent only to the student's parents, pertains only to students who have not received a passing score on all MCAS tests, and does not provide information about publicly funded post-high school academic support programs available to the student. |
| **Description of Corrective Action:** Weston Public Schools and Weston High School (Asst. Principal in conjunction with the Guidance Department) will amend the written notice to students 16 years of age or over (and to their parents) leaving school without a high school diploma, certificate of attainment, or certificate of completion to offer the parent/guardian the option to request an extension of up to 14 days for the exit interview. Weston Public Schools and Weston High School (Asst. Principal in conjunction with the Guidance Department) will amend the annual notice to former students to send it to all former students and their parents/guardians who have not yet earned their competency determination (not solely based on MCAS tests), and provide information about publicly funded pot-high school academic support programs available. |
| **Title/Role(s) of Responsible Persons:**Pamela Bator, Asst. Superintendent | **Expected Date of Completion:**04/30/2018 |
| **Evidence of Completion of the Corrective Action:**Written notice, as amendedAnnual notice to former students, as amended |
| **Description of Internal Monitoring Procedures:** Upon updating these notifications and processes, the principal will continue to monitor compliance annually. Compliance will include collection of data as to the students who have left school and the documents shared with students and parents/guardians. The principal will share compliance findings with the Asst. Superintendent, 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:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By May 2, 2018 submit the revised written notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion, and to their parents/guardians, revised to offer the option to request an extension of up to 14 days for the exit interview.By May 2, 2018 submit the revised annual notice to be sent to all former students who have not yet earned their competency determination and are not enrolled elsewhere providing information about publicly funded post-high school academic support programs available to the student. |
| **Progress Report Due Date(s):** 05/02/2018 |

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

|  |  |
| --- | --- |
| **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 and staff interviews indicated that although the district updated its restraint policy in 2017 in accordance with 603 CMR 46.00, which took effect January 1, 2016, the revised policy does not include the requirement to obtain the principal's approval to extend a restraint to more than twenty (20) minutes. In addition, materials for school-wide staff training do not incorporate the changes resulting from the amended regulations including the district's prevention and behavior support policy, methods of prevention and alternatives to restraint. The materials also include the option for a parent to waive restraint and reporting requirements when written into the IEP, which is not permitted under the amended regulations. |
| **Description of Corrective Action:** Weston Public Schools will update the School Committee Policy to include the requirement to obtain the principal's approval to extend a restraint to more than twenty (20) minutes to fully comply with the most recent regulations.In addition, staff training materials will be updated to reflect the most recent changes to the regulations, including deescalation for those who are not involved in restraint. The option cited in the current training will be omitted to comply with the amended regulations. |
| **Title/Role(s) of Responsible Persons:**Pamela Bator, Asst. Superintendent | **Expected Date of Completion:**09/30/2018 |
| **Evidence of Completion of the Corrective Action:**School Committee Policy, updated with 20 minutes specifically cited.Updated training modules (amended as per current regulations). |
| **Description of Internal Monitoring Procedures:** An annual review of the training materials will be conducted by the Assistant Superintendent and the Director of Student Services to determine relevancy and regulatory accuracy of the materials presented. |
| 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:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By May 2, 2018 submit the restraint policy revised to include the requirement to obtain the principal's approval to extend a restraint to more than twenty (20) minutes.By May 2, 2018 submit evidence, such as a link to a notice on the district website, demonstrating that staff, students, and families have been notified of the revisions.By September 30, 2018 submit evidence that all staff have received training on the district's revised restraint policy, prevention and behavior support policy, methods of prevention, and alternatives to restraint, and deleting the option for parents to waive restraint and reporting requirements when written into the IEP. Include training materials, signed attendance sheets, and the name and role of presenter(s). |
| **Progress Report Due Date(s):** 05/02/201809/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 24 Curriculum review | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that although culturally competent pedagogy is a district-wide priority, evidenced in part by the requirement that all teachers successfully complete an anti-bias course in order to obtain professional status, the development of a partnership with the Anti-Defamation League and other anti-bias organizations, and the use of an implicit and explicit bias lens in its review of new language arts and social studies curricula, the district has not developed procedures for individual teachers 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. |
| **Description of Corrective Action:** Weston Public Schools will research, develop, adapt or adopt a set of procedures for individual teachers to review all educational materials for bias (as stated above). Through the research and adoption process, educators will become resident resources for other educators in using the ultimate process. For example, should the district decide to adopt the rubric from Washington (http://www.k12.wa.us/Equity/pubdocs/WashingtonModelsfortheEvaluationofBias.pdf), the teachers on the committee will create a set of trainings that will be used throughout the district. |
| **Title/Role(s) of Responsible Persons:**Pamela Bator, Asst. Superintendent | **Expected Date of Completion:**09/30/2018 |
| **Evidence of Completion of the Corrective Action:**Agendas of meetings to review, develop, adopt, adapt "evaluation of bias" rubric and proceduresStaff training materials and agendasDeveloped/Adopted/Adapted procedures |
| **Description of Internal Monitoring Procedures:** In collaboration with principals, the Assistant Superintendent will monitor compliance (of the use of the guide for selecting materials that are free from bias) through annual trainings/updates and by requiring that grade levels and departments use the rubric in discussions at least once per year as small group practice. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Please see the Tiered Focused Monitoring Technical Assistance Toolkit for CR 24 & 25 document, located in the WBMS Document Library under Public School Programmatic Guidance, for suggested rubrics and procedures.By June 30, 2018 submit procedures for individual teachers to review 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..By September 30, 2018 submit evidence of teacher training on the procedures including signed attendance sheets, training materials, and the name and role of presenter(s). |
| **Progress Report Due Date(s):** 06/30/201809/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district annually assesses METCO student enrollment in honors and advanced placement (AP) courses, college acceptance rates, MCAS scores, and participation in extracurricular activities, and the high school reports AP participation rates disaggregated by sex. However, a review of documents indicated that the district does not review AP data by subgroups other than sex, enrollment in non-AP courses, or evaluate its K-8 program 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. |
| **Description of Corrective Action:** Weston Public Schools gathers data on participation in numerous ways; however, there are data sets that are not shared with regularity. Therefore, as a district, the administrative council (principals, district administrators) will identify the programs that are not measured in terms of access, determine a way to gather these data, and report out by building and by district. In doing so, the administrative council will be able to look for barriers to access and remove any that are found.Spring: Administrative Council will identify programs and collect data, PK-12Summer: Administrative Council will conduct a Root Cause Analysis and define Action Steps needed, should barriers be identified |
| **Title/Role(s) of Responsible Persons:**Pamela Bator, Asst. Superintendent | **Expected Date of Completion:**09/30/2018 |
| **Evidence of Completion of the Corrective Action:**Summary of program data, analysis and definition of next steps if needed. |
| **Description of Internal Monitoring Procedures:** Principals will collect data on an annual basis. Every summer, the Administrative Council will look at the data to determine barriers to access, identify trends over time, and determine next steps. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Please see the Tiered Focused Monitoring Technical Assistance Toolkit for CR 24 & 25 document, located in the WBMS Document Library under Public School Programmatic Guidance, for suggested tools and resources for implementation.By May 2, 2018 submit the district's plan for implementation, including timeline and key staff responsible, for an institutional self-evaluation to ensure the district provides equal access to all programming across all grades PreK-12.By June 30, 2018 submit the evaluation tools and preliminary results of the self-evaluation with evidence documenting the implementation of the plan to evaluate policies and programming access.By September 30, 2018 submit a brief narrative summary on the outcomes of the institutional self-evaluation and changes the district is implementing to address any barriers to equal access. |
| **Progress Report Due Date(s):** 05/02/201806/30/201809/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** ELE 14 Licensure Requirements | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews and the relevant SEI endorsement data indicated that not all core academic teachers assigned to provide sheltered English instruction to English learners hold the SEI Teacher Endorsement. Similarly, not all principals, assistant principals, and supervisors/directors assigned to supervise or evaluate core academic teachers who provide sheltered English instruction to English learners hold the SEI Teacher Endorsement or the SEI Administrator Endorsement. |
| **Description of Corrective Action:** Weston Public Schools will develop a plan for enrolling staff in SEI training, in order to ensure that all core teachers and administrators have the endorsement. Once procedure is created, building principals and district administrators will be trained to ensure compliance with procedure and placement of students. Upon completion of training, the Director of Student Services will conduct an internal review of teacher/administrator SEI endorsements. |
| **Title/Role(s) of Responsible Persons:**Jennifer Truslow, Director of Student Services | **Expected Date of Completion:**09/30/2018 |
| **Evidence of Completion of the Corrective Action:**Updated Roster of staff with the endorsementRoster of staff currently participating in trainingThose not yet endorsed will be trained in licensure requirements and provided with course informationSign in/agendas from twice yearly Administrative Council meetings to review scheduling and endorsements |
| **Description of Internal Monitoring Procedures:** Upon completion of administrative council meetings, trainings and compliance reviews, the Director of Student Services and the Assistant Superintendent will continue to monitor compliance with file reviews in December and June. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** 1- By May 2, 2018, provide information on the support the district will provide to help unendorsed educators earn their SEI endorsement and a timeline that shows the educators' efforts towards earning their SEI endorsement.2- By June 30, 2018, 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.3- By September 30, 2018, 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):** 05/02/201806/30/201809/30/2018 |

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

|  |  |
| --- | --- |
| **Criterion & Topic:** ELE 17 Program Evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents indicated that the district does not have a comprehensive process to evaluate the effectiveness of its ELE programming in developing students' English language skills and increasing their ability to participate meaningfully in the educational program. |
| **Description of Corrective Action:** Using the ELE Program Evaluation tool (Appendix N form), the Weston Public Schools will conduct a district-wide program evaluation of our ELE program. The Director of Student Services and Assistant Director of Student Services will meet with ELE teachers throughout the year in order to gather and analyze ELE program data, set goals and develop an action plan. - March meeting: identify additional team members, choose data - April meeting: continue to gather data- May meeting: analyze data (full team)- Three summer days: set goals, develop action plan and monitoring planACCESS data will be used as part of this review (arrives late May) |
| **Title/Role(s) of Responsible Persons:**Jennifer Truslow, Director of Student Services | **Expected Date of Completion:**09/30/2018 |
| **Evidence of Completion of the Corrective Action:**Completed Appendix N Program Evaluation formData collectionSign in/Agendas from ELE meetingsGoals and action plan documents |
| **Description of Internal Monitoring Procedures:** Upon completion of Program Evaluation, the Administrative Council will evaluate the effectiveness of its ELE programming with twice yearly reviews of data. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 03/09/2018 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** 1. Please complete the program evaluation tool that is available at http://www.doe.mass.edu/ell/ProgramEvaluation.pdf The district must complete all of the components of the attached form in order to evaluate the effectiveness of its ELE program.2. Please provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation. 3. Please provide a plan of action to make appropriate program adjustments or changes that are responsive to the outcomes of the program evaluation to improve the effectiveness of the program |
| **Progress Report Due Date(s):** 06/30/2018 |