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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: Marblehead Community Charter Public (District)

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 09/14/2018.

**Mandatory One-Year Compliance Date:** **09/14/2019**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 2 | Required and optional assessments | Partially Implemented |
| SE 3 | Special requirements for determination of specific learning disability | Partially Implemented |
| SE 11 | School district response to parental request for independent educational evaluation | Partially Implemented |
| SE 32 | Parent advisory council for special education | 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 |
| SE 47 | Procedural requirements applied to students not yet determined to be eligible for special education | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| SE 56 | Special education programs and services are evaluated | Not 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 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Not Implemented |
| CR 24 | Curriculum review | Not 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 13 | Follow-up Support | Not Implemented |
| ELE 14 | Licensure Requirements | Not Implemented |
| ELE 15 | Professional Development Requirements | Not Implemented |
| ELE 18 | Records of ELs | Partially Implemented |

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

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that the district does not complete all required educational assessments, including the following: 1) a history of the student's progress in the general curriculum; and 2) an assessment completed by a teacher with current knowledge regarding the student's specific abilities in relation to learning standards of the Massachusetts Curriculum Frameworks, as well as teacher assessments that address attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults. | | |
| **Description of Corrective Action:**  Reviewed the MCCPS Teacher Assessment form, DESE's Educational Assessment Forms A & B, and the school’s SPED web-based management system (Frontline).  Reviewed current MCCPS Teacher Assessment and Evaluation components to ensure Ed Assessment discussion at Team meetings (Initial/Eligibility and 3 year reevaluation) contain current useful data reflecting student’s attention skills, participation behaviors, communication skills, memory, and social relations i.e. groups, peers, and adults.  Result of the review is to adopt/use (going forward) DESE's Educational Assessment Forms A & B which are found, complete/current, on the school’s SPED web-based management system (Frontline/eSPED).  Special Education Teams have begun to be trained (on going for quality insurance) in how to assess the students based on the criterion on DESE?s Educational Assessment Forms A & B. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services  Inclusion Teacher | | **Expected Date of Completion:**  12/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Student Success Team Notes (SST) that indicate when the training happened, what was discussed, and who was present.  Completed MCCPS Student File Quality Assurance Tool (Form). Stored in the student’s file.  Identified Students Meetings held within 30-day time frame, Educational Assessment Forms A & B were completed within the given timeframe. | | |
| **Description of Internal Monitoring Procedures:**  Trimester random reviews of student files to ensure DESE’s Educational Assessment Forms A & B are thoroughly completed and used to develop elements of the IEP.  Reviews completed by Administration or SPED staff using the MCCPS Student File Quality Assurance Tool (Form) | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit evidence of training of appropriate staff to ensure that when the charter school conducts an initial referral or re-evaluation, all required educational assessments are completed. An educational assessment by a representative of the school district, including a history of the student's educational progress in the general curriculum must be provided. Furthermore, an assessment by a teacher with current knowledge regarding: 1) the student's specific abilities in relation to learning standards of the Massachusetts Curriculum Frameworks and the district's general education curriculum; and 2) an assessment of the student's attention skills, participation behaviors, communication skills, memory, and social relations with groups, peers and adults must also be completed. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By March 29, 2019, submit the results of a review of student records to ensure that when the charter school conducts an initial referral or re-evaluation, all required educational assessments are completed. Include the number of records reviewed; number of records in compliance; for any records not in compliance, determine the root cause; and specific corrective actions taken to remedy the non-compliance.  \*Please note that when monitoring the charter school must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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

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| **Criterion & Topic:**  SE 3 Special requirements for determination of specific learning disability | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that when a student suspected of having a specific learning disability is evaluated, the Team does not consistently create a written determination as to whether or not he or she has a specific learning disability, which is signed by all members of the Team. | | |
| **Description of Corrective Action:**  Reviewed the MCCPS SLD forms, DESE’s Specific Learning Disability Forms, and the school’s SPED web-based management system (Frontline).  Reviewed current MCCPS SLD components to ensure the written determination as to whether or not a student has a specific learning disability and discussion at Team meetings (Initial/Eligibility and 3 year reevaluation) contain current useful data reflecting student’s qualifications for this diagnosis.  Result of the review is to consistently and effectively use (going forward) DESE’s Specific Learning Disability Forms which are found, complete/current, on the school’s SPED web-based management system (Frontline/eSPED).  Special Education Teams have begun to be trained (on going for quality insurance) in how to the SLD paperwork for assessment, data collection, verification of an SLD, and use in the development of specific elements of the IEP. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **Expected Date of Completion:**  12/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Completed MCCPS Student File Quality Assurance Tool (Form). Stored in the student’s file. | | |
| **Description of Internal Monitoring Procedures:**  Trimester random reviews of student files to ensure DESE’s Specific Learning Disability Forms are thoroughly completed and used to develop elements of the IEP.  Reviews completed by Administration or SPED staff using the MCCPS Student File Quality Assurance Tool (Form) | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3 Special requirements for determination of specific learning disability | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit evidence of training of appropriate staff to ensure that IEP Teams complete all four components used to determine a specific learning disability (SLD). Please review the following implementation guidance: http://www.doe.mass.edu/sped/iep/sld/default.html. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By March 29, 2019, submit the results of a review of records to ensure that all SLD requirements are completed. Include the number of records reviewed; number of records in compliance; for any records not in compliance, determine the root cause; and specific corrective actions taken to remedy the non-compliance.  \*Please note when conducting internal monitoring, the charter school must maintain the following documentation and make it available to the Department upon request: a) List of the student names and grade levels for the records reviewed; b) Date of the review; and c) Name of person(s) who conducted the review, their role(s), and signature(s). | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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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:**  A review of documents indicated that the charter school's written procedures for response to a parental request for an independent educational evaluation (IEE) do not include that if the Bureau of Special Education Appeals finds that the school district's evaluation was comprehensive and appropriate, then the school district shall not be obligated to pay for the independent educational evaluation requested by the parent. | | |
| **Description of Corrective Action:**  Reviewed the MCCPS SPED Policy and Procedures Manual written procedures for response to a parental request for an independent educational evaluation (IEE) and found that it does not contain the language that if the Bureau of Special Education Appeals finds that the school district’s evaluation was comprehensive and appropriate, then the district shall not be obligated to pay for the independent evaluation by the parent.  MCCPS will amend its SPED Policy and Procedures Manual independent educational evaluation policy by adding the language that if the Bureau of Special Education Appeals finds that the school district’s evaluation was comprehensive and appropriate, then the district shall not be obligated to pay for the independent evaluation by the parent?. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  12/30/2018 |
| **Evidence of Completion of the Corrective Action:**  Amended MCCPS SPED Policy and Procedures Manual IEE section with evidence of change/correction/addition of language. | | |
| **Description of Internal Monitoring Procedures:**  Changes will be reviewed/approved by Head of School.  Evidence of amended section will be submitted to DESE/CAP. | | |
| 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:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit the charter school's revised procedures for responding to a parental request for an independent educational evaluation (IEE) that include if the Bureau of Special Education Appeals finds that the school district's evaluation was comprehensive and appropriate, then the school district shall not be obligated to pay for the independent educational evaluation requested by the parent.  By March 29, 2019, upon Department approval of revised IEE procedures, submit evidence that appropriate staff was trained on the procedures. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature. | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Interviews and parent surveys indicated that the charter school has established a parent advisory council for special education (SEPAC). A review of documents and interviews indicated, however, that the SEPAC does not have established by-laws regarding officers and operational procedures. Interviews also indicated that the charter school does not conduct, in cooperation with the SEPAC, at least one workshop annually on the rights of students and their parents and guardians under the state and federal special education law.  In addition, the SEPAC does not advise the charter school on matters that pertain to the education and safety of students with disabilities or meet regularly with school officials to participate in the planning, development, and evaluation of the charter school's special education programs. | | |
| **Description of Corrective Action:**  After a review of the MCCPS bylaws it was determined that they need to be updated and reviewed by the new SEPAC which is being developed.  SEPAC Chairperson(s), Director of Student Services, and Head of school will meet to amend bylaws.  An Annual SEPAC was held (10/9/2018) and will be held going forward where the MA Parent’s Procedural Safeguards will be reviewed, discussed, and questions answered.  The SEPAC, at least the Chair(s) and the Director of Student Services, will meet at least on a Trimester schedule to discuss the SEPAC development, Special Education questions brought to the SEPAC Chair(s), and any other related topics. | | |
| **Title/Role(s) of Responsible Persons:**  SEPAC Chairperson  Director of Student Services | | **Expected Date of Completion:**  06/24/2019 |
| **Evidence of Completion of the Corrective Action:**  Updated SEPAC by-laws. Distributed and reviewed at a future SEPAC coffee.  Annual Review Meeting of Parents Procedural Safeguards: School Calendar, SEPAC meeting agenda, and attendance sheet.  SEPAC bylaws will be discussed at the SEPAC coffees, and will be posted/available of the MCCPS SEPAC webpage. | | |
| **Description of Internal Monitoring Procedures:**  Annual Review Meeting of Parents Procedural Safeguards: School Calendar, SEPAC meeting agenda, and attendance sheet.  Meeting Agenda and minutes of the SEPAC Trimester meeting with MCCPS Administration. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit a copy of the charter school's parent advisory council for special education (SEPAC) by-laws regarding officers and operational procedures.  By January 25, 2019, submit a descriptive summary of the charter school's plan to conduct, in cooperation with the SEPAC, at least one workshop annually on the rights of students and their parents and guardians under the state and federal special education law.  By January 25, 2019, submit a descriptive summary of the charter school's plan to allow for parent participation in the planning, development, and evaluation of the charter school's special education programs. The plan should include a timeline for meetings along with agenda items.  By March 29, 2019, submit evidence of a workshop on the rights of students and their parents and guardians conducted in cooperation with the SEPAC.  By March 29, 2019, submit evidence that the SEPAC is involved in the planning, development, and evaluation of special education programming with school officials. Evidence should include meeting agendas, attendance sheets, and any additional activities related to the planning, development, and evaluation of special education programming. | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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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 charter school's procedures for suspension of students with disabilities do not include the following requirements: 1) suspensions of longer than 10 consecutive days or a series of suspensions that are shorter than 10 consecutive days but constitute a pattern are considered to represent a change in placement; 2) regardless of the manifestation determination, the district may place the student in an interim alternative educational setting on the authority of a hearing officer if the officer orders the alternative placement after the district provides evidence that the student is "substantially likely" to injure him/herself or others; 3) provisions for an interim alternative educational setting to enable the student to continue in the general curriculum and continue receiving services identified on the IEP, including services to address the problem behavior; and 4) procedures to indicate that no later than the date of the start of any disciplinary action, the district notifies the parent of the decision and provides written notice of procedural safeguards. | | |
| **Description of Corrective Action:**  Reviewed the MCCPS SPED Policy and Procedures Manual written procedures pertaining to suspensions and verified the requirements in the finding are not present.  MCCPS will amend its SPED Policy and Procedures Manual suspension of students with disabilities to include the requirements 1) suspensions of longer than 10 consecutive days or a series of suspensions that are shorter than 10 consecutive days but constitute a pattern are considered to represent a change in placement; 2) regardless of the manifestation determination, the district may place the student in an interim alternative educational setting on the authority of a hearing officer if the officer orders the alternative placement after the district provides evidence that the student is "substantially likely" to injure him/herself or others; 3) provisions for an interim alternative educational setting to enable the student to continue in the general curriculum and continue receiving services identified on the IEP, including services to address the problem behavior; and 4) procedures to indicate that no later than the date of the start of any disciplinary action, the district notifies the parent of the decision and provides written notice of procedural safeguards. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services  Head of School | | **Expected Date of Completion:**  06/24/2019 |
| **Evidence of Completion of the Corrective Action:**  Revised section (suspension procedures of a student with disabilities) in the MCCPS SPED Policy and Procedures Manual.  Training of Administration Staff at ILT Meeting on the revised policy with it placed in the agenda, discussed in the meeting, and follow-up reviews as needed.  Training of SPED Staff at the Department Meeting on the revised policy with it placed in the agenda, discussed in the meeting, and follow-up reviews as needed | | |
| **Description of Internal Monitoring Procedures:**  ILT Agendas and notes. Staff attendance taken.  SPED Department Meeting Agenda/Notes/Attendance.  Yearly review of SPED Policy and Procedures/Revised indicated/and updates to the manual, by the Director of Student Services, as indicated by DESE. | | |
| 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:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit the revised procedures for the suspension of students with disabilities, that include the following requirements: 1) suspensions of longer than 10 consecutive days or a series of suspensions that are shorter than 10 consecutive days but constitute a pattern are considered to represent a change in placement; 2) regardless of the manifestation determination, the district may place the student in an interim alternative educational setting on the authority of a hearing officer if the officer orders the alternative placement after the district provides evidence that the student is "substantially likely" to injure him/herself or others; 3) provisions for an interim alternative educational setting to enable the student to continue in the general curriculum and continue receiving services identified on the IEP, including services to address the problem behavior; and 4) procedures to indicate that no later than the date of the start of any disciplinary action, the district notifies the parent of the decision and provides written notice of procedural safeguards.  By March 29, 2019, upon Department approval of revised procedures for suspension of students with disabilities, submit evidence that appropriate staff were trained on the procedures. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By May 3, 2019, submit the results of a review of discipline records across all grade levels (after training was provided) for evidence that the district's procedures of the suspension of students with disabilities are consistently implemented. Include the number of records reviewed; number of records in compliance; for any records not in compliance, determine the root cause; and specific corrective actions taken to remedy the non-compliance.  \* Please note when conducting internal monitoring the charter school must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019  05/03/2019 | | |

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| **Criterion & Topic:**  SE 47 Procedural requirements applied to students not yet determined to be eligible for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and parent interviews indicated that the charter school does not have procedural requirements applied to students not yet determined to be eligible for special education. | | |
| **Description of Corrective Action:**  Reviewed the MCCPS Policy and Procedures Manual and found it did not include the procedural requirements applied to students not yet determined to be eligible for special education.  MCCPS will amend its SPED Policy and Procedures Manual and develop the procedural requirements applied to students not yet determined to be eligible for special education based on the DESE SPED language/requirements. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services  Head of School | | **Expected Date of Completion:**  06/24/2019 |
| **Evidence of Completion of the Corrective Action:**  Create section (procedural requirements applied to students not yet determined to be eligible for special education) in the MCCPS SPED Policy and Procedures Manual.  Training of Administration Staff at ILT Meeting on this policy with it placed in the agenda, discussed in the meeting, and follow-up reviews as needed.  Training of SPED Staff at the Department Meeting on the revised policy with it placed in the agenda, discussed in the meeting, and follow-up reviews as needed. | | |
| **Description of Internal Monitoring Procedures:**  ILT Meeting Agenda/Attendance Sheet/Notes  SPED Department Meeting Agenda/Attendance Sheet/Notes | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 47 Procedural requirements applied to students not yet determined to be eligible for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit a copy of the charter school's newly developed procedural requirements applied to students not yet determined to be eligible for special education that include the following: 1) If, prior to disciplinary action, a district had knowledge that the student may be a student with a disability, then the district makes all protections available to the student until and unless the student is subsequently determined not to be eligible; 2) The district may be considered to have prior knowledge if: a) The parent had expressed concern in writing; or b) The parent had requested an evaluation; or c) District staff had expressed directly to the special education director or other supervisory personnel specific concerns about a pattern of behavior demonstrated by the student; 3) The district may not be considered to have had prior knowledge if the parent has not consented to evaluation of the student or has refused special education services, or if an evaluation of the student has resulted in a determination of ineligibility; 4) If the district had no reason to consider the student disabled, and the parent requests an evaluation subsequent to the disciplinary action, the district must have procedures consistent with federal requirements to conduct an expedited evaluation to determine eligibility; and 5) If the student is found eligible, then he/she receives all procedural protections subsequent to the finding of eligibility.  By March 29, 2019, upon Department approval of procedural requirements applied to students not yet determined to be eligible for special education, submit evidence that appropriate staff was trained on the procedures. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature. | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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| **Criterion & Topic:**  SE 54 Professional development | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that not all staff, including both special education and general education staff, are trained on the following: 1) state and federal special education requirements and related local special education policies and procedures; 2) analyzing and accommodating diverse learning styles of all students in order to achieve an objective of inclusion in the general education classroom of students with diverse learning styles; and 3) methods of collaboration among teachers, paraprofessionals and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. | | |
| **Description of Corrective Action:**  Reviewed MCCPS professional development past trainings and calendar. Determination is that MCCPS staff will be completing a training, at each grade level, and integrated arts staff, of the state and federal special education requirements and related special education policies and procedures, including the school’s.  Reviews of best methods/practice of analyzing and accommodating diverse learning styles of all students in order to achieve an objective of inclusion in the general education classroom; staff will be completing a training, at each grade level, and integrated arts staff on how to teach all students, including students with diverse learning styles. Appropriate materials/resources will be made available. | | |
| **Title/Role(s) of Responsible Persons:**  Head of School  Professional Development Coordinator  Director of Special Education | | **Expected Date of Completion:**  06/24/2019 |
| **Evidence of Completion of the Corrective Action:**  Training of Administration Staff at ILT Meeting on best practices with details placed in the agenda, discussed in the meeting, and follow-up as needed.  Training of SPED Staff at the Department Meeting on the best practices with details placed in the agenda, discussed in the training, and follow-up as needed.  Develop PLC?s, webinars, and external professional trainings are always offered. | | |
| **Description of Internal Monitoring Procedures:**  ILT Meeting Agenda/Attendance Sheet/Notes  SPED Department Meeting Agenda/Attendance Sheet/Notes  PLC documentation of Trainings/Attendance/Agenda/Materials/Resources  Professional Development Training Calendar | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit evidence that appropriate staff was trained on the following: 1) state and federal special education requirements and related local special education policies and procedures; 2) analyzing and accommodating diverse learning styles of all students in order to achieve an objective of inclusion in the general education classroom of students with diverse learning styles; and 3) methods of collaboration among teachers, paraprofessionals and teacher assistants to accommodate diverse learning styles of all students in the general education classroom. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By March 29, 2019, submit a description of the charter school's internal oversight and tracking system, along with the name/role of the designated person responsible for oversight that will ensure all appropriate staff receive all required trainings.  By May 3, 2019, submit a copy of the charter school's 2019-2020 Professional Development calendar that indicates all trainings in accordance with state and federal requirements. | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019  05/03/2019 | | |

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| **Criterion & Topic:**  SE 56 Special education programs and services are evaluated | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the charter school has not conducted any evaluations of special education programs or services over the last two years. | | |
| **Description of Corrective Action:**  MCCPS will develop and use a Student File Quality Assurance Review Tool (Form) in order to review student files.  Special Education Staff will be trained in how to conduct a comprehensive QAR (Quality Assurance Review) of student files.  Once per term, student files will be chosen randomly from across the grade levels and a QAR will be done.  The MCCPS Inclusion Program will be reviewed for quality through teacher evaluations, the question about programing on our School satisfaction survey, and teacher satisfaction survey. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  06/24/2019 |
| **Evidence of Completion of the Corrective Action:**  Quality Assurance Review Tool (Form) will be completed, reviewed at the appropriate grade level SST meeting and any corrections will be made within 10 school days of the review.  Documentation of the corrections will be made on the QAR form and that form will be stored in the student’s file. | | |
| **Description of Internal Monitoring Procedures:**  Quality Assurance Review Tool (Form)  (Parent/Teacher) Satisfaction Surveys  Teacher Evaluations | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 56 Special education programs and services are evaluated | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit copies of the newly developed procedures and tools used to evaluate the charter school's special education programs and services.  By May 3, 2019, submit a narrative summary of results of the self-evaluation. Include an action plan, containing a timeline for implementation of program adjustments or changes in response to the outcomes of the self-evaluation. | | |
| **Progress Report Due Date(s):**  01/25/2019  05/03/2019 | | |

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

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| **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 at the request of a parent or student whose primary language is not English, a student handbook or student code of conduct is not always translated into the primary language.  In addition, document review indicated the charter school does not have a code of conduct for staff. | | |
| **Description of Corrective Action:**  A master list will be created from the Home Language Surveys of all parents who wish to have documents translated into languages other than English. We will then have our handbook and code of conduct translated into those requested languages  A code of conduct for staff will be created based on the Code of Ethics approved by the NEA. It will be reviewed and accepted by school administration and inserted in our Faculty handbook. | | |
| **Title/Role(s) of Responsible Persons:**  AHOS: Bill Sullivan | | **Expected Date of Completion:**  12/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Links on the school webpage of translated documents  Code of conduct heading and language in Faculty Handbook | | |
| **Description of Internal Monitoring Procedures:**  Status will be updated during Admin meetings. List due 10/31. Translations due 12/1. Live links by 12/15  Code of Conduct will be presented to Administration y 11/1. Once accepted it will be added to the Faculty Handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit evidence that at the request of a parent or student whose primary language is not English, a student handbook or student code of conduct is translated into the primary language.  By January 25, 2019, submit newly developed policy and procedures to ensure that at the request of a parent or student whose primary language is not English, a student handbook or code of conduct is translated into the primary language.  By January 25, 2019, submit the charter school's newly developed code of conduct for staff in compliance with all state and federal requirements.  By March 29, 2019, upon Department approval of the newly developed code of conduct for staff, submit evidence of dissemination and training to all staff. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature. | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the charter school's Bullying Prevention and Intervention Plan has not been updated and is not consistent with the amendments to the Massachusetts anti-bullying law, which became effective July 1, 2013. Specifically, student handbooks do not make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report.  Additionally, a review of documents and interviews indicated that the charter school does not provide all school staff with professional development that includes developmentally appropriate strategies to prevent bullying incidents. | | |
| **Description of Corrective Action:**  New language will be adopted to reflect updates to the anti-bullying laws and added to our handbook  PD will be offered to all staff that includes developmentally appropriate strategies to prevent bullying incidents  Administer a Department of Elementary and Secondary-developed student survey to assess school climate and the prevalence, nature, and severity of bullying in our schools. | | |
| **Title/Role(s) of Responsible Persons:**  Bill Sullivan: Assistant Head of School | | **Expected Date of Completion:**  02/15/2019 |
| **Evidence of Completion of the Corrective Action:**  Updated handbook  PD agenda and staff sign-off sheet  Survey Results | | |
| **Description of Internal Monitoring Procedures:**  Listed on CPR CAP checklist of open items. Will be checked off when complete.  Handbook revisions will be submitted to administration of review and acceptance. Once they are complete they will be inserted into the handbook  PD will be created and put on upcoming staff agenda. training will be conducted and sign-off collected by presenter  Survey will be conducted and the findings will be evaluated by IMT. Actionable items will be incorporated into future PD and classroom trainings. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit the charter school's updated Bullying Prevention and Intervention Plan and student handbooks consistent with the amendments to the Massachusetts anti-bullying law, which extend protections to students who are bullied by a member of the school staff. School handbooks must make clear that a member of the school staff may be named the aggressor or perpetrator in a bullying report. Provide a link to the updated Bullying Prevention and Intervention Plan on the charter school's website.  By March 29, 2019, upon Department approval of the charter school's updated Bullying Prevention and Intervention Plan, provide evidence of the training for all staff that includes the following: 1) developmentally appropriate strategies to prevent bullying incidents; 2) developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents; 3) information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim and witnesses to the bullying; 4) research findings on bullying, including information about specific categories of students who have been shown to be particularly at risk for bullying in the school environment; and 5) information on the incidence and nature of cyber-bullying; and internet safety issues as they relate to cyber-bullying. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature. | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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

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| **Criterion & Topic:**  CR 10C Student Discipline | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that the charter school's student discipline policy regarding the procedures for the superintendent hearing does not specifically identify the requirement that all participants shall be informed before the hearing that an audio record will be made. | | |
| **Description of Corrective Action:**  Language will be added to procedures for superintendents hearings to reflect that it is our right to make audio recording of hearings, and that if we decide to do so all participants will be informed before the hearing. | | |
| **Title/Role(s) of Responsible Persons:**  Bill Sullivan: Assistant Head of School | | **Expected Date of Completion:**  12/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Updated discipline policy with updated language | | |
| **Description of Internal Monitoring Procedures:**  Listed on CPR CAP checklist of open items. Will be checked off when complete. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit a copy of the updated student discipline policy regarding the procedures for the superintendent hearing that includes the requirement that all participants shall be informed before the hearing that an audio record will be made.  By March 29, 2019, upon Department approval of the updated student discipline policy, submit evidence that all appropriate staff was trained on revisions regarding the procedures for the superintendent hearing. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature. | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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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:**  A review of documents and interviews indicated that the charter school has not developed and implemented written restraint prevention and behavior support policy and procedures consistent with regulations under 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. The school has, thereby, not provided staff with training on the new regulations, provided staff with a copy of the policy and procedures, or made the policy and procedures available to parents. A review of documents and staff interviews indicated that the charter school has identified program staff to serve as school-wide resources for the administration of restraint and provided school-wide resource staff with in-depth training on the use of physical restraint. | | |
| **Description of Corrective Action:**  Marblehead Charter School has developed and implemented written restraint prevention and behavior support policy and procedures consistent with regulations under 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. Mistakenly this update was not reflected in the Staff Handbook. The approved language will be added to the Staff Handbook. | | |
| **Title/Role(s) of Responsible Persons:**  Bill Sullivan: Assistant Head of School | | **Expected Date of Completion:**  12/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Updated Staff Handbook with approved policy. | | |
| **Description of Internal Monitoring Procedures:**  Listed on CPR CAP checklist of open items. Will be checked off when complete. | | |
| 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:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit a copy of the charter school's newly developed written policy on restraint prevention and behavior support policy and procedures consistent with regulations under 603CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention.  By March 29, 2019, upon Department approval of the written policy on restraint prevention and behavior support policy and procedures, provide evidence of training and dissemination to all staff, students and parents Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature. Evidence of dissemination to staff, students and parents will include school handbooks and a link to the policy posted on the charter school's website. | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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

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| **Criterion & Topic:**  CR 21 Staff training regarding civil rights responsibilities | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of documents and staff interviews indicated that the charter school does not provide in-service training for all school personnel at least annually regarding civil rights responsibilities, including the prevention of discrimination and harassment on the basis of students' race, color, sex, gender identity, religion, national origin and sexual orientation and the appropriate methods for responding to it in the school setting. | | |
| **Description of Corrective Action:**  Administration will update slidedeck and agenda of Marblehead Charter’s current Civil Rights Training and deliver annual training to staff. | | |
| **Title/Role(s) of Responsible Persons:**  Bill Sullivan: Assistant Head of School | | **Expected Date of Completion:**  02/15/2019 |
| **Evidence of Completion of the Corrective Action:**  Civil Rights Training PD agenda with staff sign-off sheet | | |
| **Description of Internal Monitoring Procedures:**  Listed on CPR CAP checklist of open items. This will be monitored regularly. deliverables will be checked off when complete.  PowerPoint and agenda will be developed by 11/15/18. Determination of who will speak to each slide will be made by 12/31/18. Training will be scheduled on the PD Calendar and delivered to full staff by 2/15/19 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By March 29, 2019, provide evidence of training for all school personnel regarding civil rights responsibilities, including the prevention of discrimination and harassment on the basis of students' race, color, sex, gender identity, religion, national origin and sexual orientation and the appropriate methods for responding to it in the school setting. | | |
| **Progress Report Due Date(s):**  03/29/2019 | | |

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

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| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of documents and interviews indicated that the charter school does not 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. | | |
| **Description of Corrective Action:**  Language will be added to the Staff Handbook about the teachers responsibility through their curricula, encourage respect for the human and civil rights of all individuals regardless of race, color, sex, gender identity, religion, national origin or sexual orientation.  Training and discussions will take place in an upcoming department meetings making sure that teachers know they must review all instructional and educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin or sexual orientation. Appropriate activities, discussions and/or supplementary materials shall be used to provide balance and context for any such stereotypes depicted in such materials. | | |
| **Title/Role(s) of Responsible Persons:**  Instructional Leadership Team | | **Expected Date of Completion:**  12/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Updated Staff Handbook  Confirmation from Humanities, Math & Science and Special Education Department Heads, that this is discussed and that they will look for evidence during classrooms observations | | |
| **Description of Internal Monitoring Procedures:**  Listed on CPR CAP checklist of open items. This will be monitored regularly. deliverables will be checked off when complete.  Updated language will be drafted by 12/1/18 and submitted for approval.  Update to Handbook made by 12/15/18.  Confirmation from Department Heads received by 12/15/18, | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The charter school did not include the development of internal oversight and tracking system with periodic reviews designed to ensure that individual teachers review all educational materials for stereotypes based on protected categories, and that they provide balance and context for any such stereotypes through appropriate activities, discussions, or supplementary materials. | | |
| **Department Order of Corrective Action:**  Provide a detailed description of the charter school's internal oversight and tracking system with periodic reviews designed to ensure that individual teachers review all educational materials for stereotypes based on protected categories, and that they provide balance and context for any such stereotypes through appropriate activities, discussions, or supplementary materials. Please include the name and role of the person or people designated to implement the system. | | |
| **Required Elements of Progress Report(s):**  By January 25, 2019, submit a detailed description of the charter school's newly developed procedures and samples of the tools used to ensure 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.  By January 25, 2019, provide a detailed description of the charter school's internal oversight and tracking system with periodic reviews, along with the name(s) and role(s) of the person(s) designated to implement the system.  By March 29, 2019, upon Department approval of procedures and tools, provide evidence of training to all teachers on the newly developed procedures and tools. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature. | | |
| **Progress Report Due Date(s):**  01/25/2019  03/29/2019 | | |

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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:**  A review of documents and interviews indicated that the charter school does not annually evaluate all aspects of its 4-8 programming 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:**  Instructional Leadership Team will add to its agenda meetings to look at data to insure that all groups have equal access to all programs.  After looking at the data a summative report will be created.  Report will then be evaluated and a corrective action plan will be developed and implemented to address any instances where we have not ensured 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. | | |
| **Title/Role(s) of Responsible Persons:**  BIll Sullivan: Assistant Head of School | | **Expected Date of Completion:**  04/15/2019 |
| **Evidence of Completion of the Corrective Action:**  Summative Report of the Data  Corrective Action Plan | | |
| **Description of Internal Monitoring Procedures:**  Listed on CPR CAP checklist of open items. This will be monitored regularly. deliverables will be checked off when complete.  First meeting to be held by 2/15/19  Data review and Summative Report completed by 3/15/19  Corrective Action Plan approved and implementation initiated by 4/15/19 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By March 29, 2019, provide a detailed description of the charter school's newly developed procedures and samples of the tools designed for the purpose of conducting an institutional self-evaluation to evaluate all aspects of the charter school's 4-8 programming 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 academics, athletics and other extracurricular activities.  By May 3, 2019, submit the results of the charter school's institutional self-evaluation utilizing these newly developed procedures; include recommendations and action steps, if necessary, for any improvements needed based upon evaluation results. | | |
| **Progress Report Due Date(s):**  03/29/2019  05/03/2019 | | |

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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:**  A review of documents indicated that the charter school did not complete the required documentation to inform the Department of the charter school's initial identification policy and procedures. Therefore, it is not clear whether the charter school uses qualified staff and appropriate procedures and assessments to identify students who are English learners (Els) and to assess their level of English proficiency in reading, writing, speaking, and listening. The Department determines that the charter school is not in compliance with 603 CMR 14.02(1) that requires districts and charter schools to establish procedures in accordance with the Department's guidelines. | | |
| **Description of Corrective Action:**  The school will complete the required documentation to inform the Department of the school’s EL policy and procedure, including the steps for initial identification. | | |
| **Title/Role(s) of Responsible Persons:**  ELL Coordinator | | **Expected Date of Completion:**  03/31/2019 |
| **Evidence of Completion of the Corrective Action:**  The policy and procedures will be posted to the school’s website at https://marbleheadcharter.org/parents-students/familydocs/. | | |
| **Description of Internal Monitoring Procedures:**  The task will be listed on CPR CAP checklist of open items until completed. The policy and procedures will be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 3 Initial Identification of ELs and FELs | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1. Please complete the "Initial Identification Procedures for ELs and FELs" form available in the Document Library to provide a description of the charter school's initial identification procedures showing that:  a- the charter school administers a HLS to all newly enrolling students;  b- the charter school screens the English language proficiency of a student using a WIDA screener when the answer to any of the questions on the HLS is a language other than English;  c- the charter school determines whether or not the student is an EL or FEL and makes initial placement decisions using screening test results and cut scores provided by the Department;  d- the charter school notifies the parent/guardian of language assessment results and initial placement no later than 30 days after the beginning of the school year or within two weeks if the student enrolls in the charter school during the school year;  e- the charter school informs the parents of their right to opt out or to secure an SEI program waiver with the parent notification form sent to the parents upon initial placement of the student in the district's ELE program;  f- the charter school codes the student determined to be EL in all future SIMS reports submitted to the Department.  2. Please provide information regarding the training opportunities provided to the staff involved in the initial identification process to keep them informed about the policy and procedures. Please include meeting dates, minutes and sign-in sheets.  3. Please complete the form "Initial Identification Testing Data" located in the Document Library to provide the names and scores of all the students who have been screened for the SY 2017-18 . | | |
| **Progress Report Due Date(s):**  01/25/2019 | | |

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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:**  When determining whether a school district's ELE program complies with federal and state laws and regulations, the Department applies the three-pronged test established by the United States Court of Appeals for the Fifth Circuit in Castañeda v. Pickard. "OELAAA Form 5: Integration of Castañeda's Three-Pronged Test into ELE Program Review Process" is a tool developed by the Department for this purpose and is used to evaluate the adequacy of a district's program for ELs. Since the documentation submitted by the district included a blank copy of the form, there is no indication that ELE services provided by the district reflect a sound educational approach recognized as a legitimate educational strategy to teach EL students English language skills. | | |
| **Description of Corrective Action:**  The adequacy of the school’s ELE program will be evaluated annually using the DESE?s OELAAA Form 5: Integration of Castañeda’s Three-Pronged Test. | | |
| **Title/Role(s) of Responsible Persons:**  ELL Coordinator | | **Expected Date of Completion:**  03/31/2019 |
| **Evidence of Completion of the Corrective Action:**  The completed Program Evaluation will be maintained on file in the office of the Assistant Head of School. | | |
| **Description of Internal Monitoring Procedures:**  The task will be listed on CPR CAP checklist of open items until completed. This task will be added to the administration’s calendar of responsibilities. The calendar will be reviewed regularly by the admin team. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1. Please complete the Castañeda test available in the Document Library by the progress report due date. Please ensure that your answers to the questions on the test reflect the charter school's implementation.  2. Please provide training to all staff members involved in the education of ELs to ensure that they are knowledgeable about the program goals described in Castañeda Test submitted by the charter school and the charter school's commitment to provide sheltered content instruction and ESL instruction to ELs at all proficiency levels. Submit the training materials, agendas and sign-in sheets by the due date of the progress report.  3. Please submit evidence of systematic English language development occurring during the time dedicated to ESL such as unit plans and/or lesson plans that ESL teachers use for ESL instruction.  4. Please explain how the charter school will monitor the progress towards compliance and submit the charter school's monitoring system to ensure that English language development occurs during the time dedicated to ESL. | | |
| **Progress Report Due Date(s):**  01/25/2019 | | |

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

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| **Criterion & Topic:**  ELE 6 Program Exit and Readiness | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of documents indicated that the charter school's reclassification procedures do not refer to DESE's current cut scores required for reclassification. The charter school's current reclassification procedures are not in compliance with 603 CMR 14.02 that requires charter schools to establish exit criteria in accordance with the Department's guidelines. | | |
| **Description of Corrective Action:**  The school will revise its reclassification procedures and exit criteria to comply with the DESE’s guidelines. | | |
| **Title/Role(s) of Responsible Persons:**  ELL Coordinator | | **Expected Date of Completion:**  03/31/2019 |
| **Evidence of Completion of the Corrective Action:**  The revised procedures and criteria will be posted to the school’s website. | | |
| **Description of Internal Monitoring Procedures:**  Listed on CPR CAP checklist of open items. The procedures and criteria will be checked regularly as part of the annual policy review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 6 Program Exit and Readiness | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1-Submit the charter school's revised reclassification policies and procedures.  2- Provide training to all staff members involved in the reclassification process to ensure that they are all knowledgeable about the changes and submit the training materials, sign-in sheets and agendas. | | |
| **Progress Report Due Date(s):**  01/25/2019 | | |

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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:**  Staff interviews indicated that the charter school has a bilingual family liaison and coordinates translation and interpretation through an agency. However, submitted documentation does not indicate that the charter school always provides 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:**  A list of parents requiring translation services will be generated using the Home Language Surveys. The list will be shared with the staff. When translation services are provided, the method and purpose will be communicated to the Assistant Head of School.  The policy related to translation services will revised to ensure that parents have access to the information and support they need to be fully informed of their child’s progress. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Head of School | | **Expected Date of Completion:**  01/01/2019 |
| **Evidence of Completion of the Corrective Action:**  The list of parents who need translation services will be shared with the staff.  The revised policy will be included in the Student/Parent Handbook and posted to the school’s website here: https://marbleheadcharter.org/parents-students/familydocs/ | | |
| **Description of Internal Monitoring Procedures:**  Listed on CPR CAP checklist of open items. The list of parents and the policy will be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 7 Parent Involvement | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Please submit the following:  1-The charter school's written key procedures and processes to follow in securing a translator or an interpreter.  2- Processes the charter school uses to identify limited English proficient parents.    3- A description of steps the charter school takes to provide effective language assistance to parents whose preferred language is not English.    4- Evidence of translated documents for SY 2017-18. | | |
| **Progress Report Due Date(s):**  03/29/2019 | | |

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

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| **Criterion & Topic:**  ELE 13 Follow-up Support | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of documents indicated that the charter school does not have policies and procedures to monitor students who are Former English learners (FELs) and, therefore, is not in compliance with Title VI and ESEA that require charter schools to have policies and procedures to monitor FELs for four years and to provide support as needed. | | |
| **Description of Corrective Action:**  The policy and practices will be revised to ensure compliance. | | |
| **Title/Role(s) of Responsible Persons:**  ELL Coordinator | | **Expected Date of Completion:**  03/31/2019 |
| **Evidence of Completion of the Corrective Action:**  The revised policy will be included in the Student/Parent Handbook and posted to the school’s website here: https://marbleheadcharter.org/parents-students/familydocs/ | | |
| **Description of Internal Monitoring Procedures:**  Listed on CPR CAP checklist of open items. The policy will be assessed annually for compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 13 Follow-up Support | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1-Please submit a plan explaining how the charter school will monitor the progress of FELs to ensure that they make adequate progress and the level of support that will be available for them provided that they need such support to have access to the curricula taught in the school.    2-Provide training to all ELE staff to ensure that they are all knowledgeable about the process and submit the training materials, sign-in sheets and agendas by the progress report due date.  3-Submit any evidence showing that the charter school started to monitor students who have been reclassified as FELs. | | |
| **Progress Report Due Date(s):**  01/25/2019 | | |

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

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| **Criterion & Topic:**  ELE 14 Licensure Requirements | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of documents indicated that the charter school does not have any teacher assigned to provide ESL instruction who has an English as a Second Language license. As a result, English learners participate in sheltered English classrooms with no access to a qualified ESL teacher for systematic language acquisition classes.  A review of state-based data also indicated that administrators assigned to supervise or evaluate core academic teachers who provide sheltered English instruction to English learners do not hold the SEI Teacher Endorsement or the SEI Administrator Endorsement. | | |
| **Description of Corrective Action:**  1. A part-time ESL instructor will be employed by the school or the school will be granted a waiver.  2.The one administrator had completed the SEI course but had not applied for the Endorsement. The Endorsement has been acquired and is document on his license.  3. ESL teacher hired or a waiver will be awarded by August 15, 2019  4.Admin Endorsement by 10-3-19 | | |
| **Title/Role(s) of Responsible Persons:**  Head of School | | **Expected Date of Completion:**  08/15/2019 |
| **Evidence of Completion of the Corrective Action:**  Staff list on the website https://marbleheadcharter.org/staff/  Endorsement received 10-3-18; copy of Endorsement in personnel file | | |
| **Description of Internal Monitoring Procedures:**  Current licensing for all administrators will be reviewed annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Disapproved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The corrective action for this criterion does not propose a remedy to solve the noncompliance in the SY 2018-19. | | |
| **Department Order of Corrective Action:**  Please see below. | | |
| **Required Elements of Progress Report(s):**  1-Please explain in detail how ELs in the charter school receive ESL instruction.  2- Please submit the license or waiver information of the current ESL teacher(s).  3- If the school does not have an ESL teacher, provide a copy of any job posting and application information.  4- Please submit the SEI endorsement information for the administrator who recently earned SEI endorsement. | | |
| **Progress Report Due Date(s):**  01/25/2019 | | |

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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:**  A review of documents indicated that the charter school has not developed a professional development plan to provide educators with training in second language acquisition techniques in accordance with 603 CMR 44.06(1)(a) that requires educators to earn 15 Professional Development Points (PDPs) related to SEI or ESL for re-certification. | | |
| **Description of Corrective Action:**  Options for staff to earn the PDPs necessary for licensure will be disseminated. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Curriculum, Instruction, and Technology | | **Expected Date of Completion:**  01/30/2019 |
| **Evidence of Completion of the Corrective Action:**  The options will be documented in the school’s Professional Development Calendar. | | |
| **Description of Internal Monitoring Procedures:**  Annually options relative to this requirement will be included in the school’s PD calendar. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 15 Professional Development Requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Please submit the charters school's professional development plan to provide educators with training in second language acquisition techniques in accordance with 603 CMR 44.06(1)(a) that requires educators to earn 15 Professional Development Points (PDPs) related to SEI or ESL for re-certification. | | |
| **Progress Report Due Date(s):**  01/25/2019 | | |

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

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| **Criterion & Topic:**  ELE 18 Records of ELs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and statements from the charter school indicated that the charter school does not consistently keep all required documents in EL student records. | | |
| **Description of Corrective Action:**  The files of all ELs will be reviewed to ensure compliance. Missing elements will be corrected. | | |
| **Title/Role(s) of Responsible Persons:**  ELL Coordinator | | **Expected Date of Completion:**  06/30/2019 |
| **Evidence of Completion of the Corrective Action:**  Log of steps completed to bring all files into compliance.  A checklist of required documents will be affixed to each EL file. | | |
| **Description of Internal Monitoring Procedures:**  An annual audit of each EL file will be conducted. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 18 Records of ELs | **Corrective Action Plan Status:** Approved  **Status Date:** 11/27/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  1- Please provide information regarding the training opportunities provided to the staff involved in record keeping process to keep them informed about the revised policy and procedures. Please include meeting dates, minutes and sign-in sheets.  2- Conduct an internal audit of EL records using the ELE Folder Checklist available on DESE website and submit a narrative with findings of the audit and corrective actions if there is any. | | |
| **Progress Report Due Date(s):**  01/25/2019 | | |