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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: Narragansett

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 08/21/2018.

**Mandatory One-Year Compliance Date:** **08/21/2019**

**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 4 | Reports of assessment results | Partially Implemented |
| SE 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 39 | Procedures used to provide services to eligible students enrolled in private schools at private expense | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Not Implemented |
| CR 10 | Anti-Hazing Reports | 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 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 18 | Responsibilities of the school principal | Partially Implemented |
| CR 24 | Curriculum review | Not Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |
| ELE 5 | Program Placement and Structure | Partially Implemented |
| ELE 14 | Licensure Requirements | Partially Implemented |
| ELE 17 | Program Evaluation | Not Implemented |

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicated that IEP Teams do not consistently complete required educational assessments consented-to by the student's parent, including a history of the student's educational progress in the general curriculum and teacher assessments that address attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults. | | |
| **Description of Corrective Action:**  Before the beginning of the school year during our second orientation day on 08/24/2018 we provided technical assistance to our general education staff reviewing the importance of their involvement and compliance with completing Educational Assessments A & B. Training included a sign in sheet with agenda items, and a follow up information sheet was shared through Google docs with a description of Educ Assessments A & B. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos Ed.D., Dir Pupil Personnel Services and building Principals | | **Expected Date of Completion:**  12/01/2018 |
| **Evidence of Completion of the Corrective Action:**  A sign-in sheet(s) was filled out by GE teachers that had agenda items relevant to addressing Educational Assessments. A follow up to general education teachers (Terms and Acronyms used in Special Education) was also distributed to General Education teachers shortly after the meeting. | | |
| **Description of Internal Monitoring Procedures:**  We will review and track that completed Educ Assessments A & B are coming into the IEP meetings completed. We will collect a sample, a minimum of 20 reviews for compliance, document our findings, which will include root causes of noncompliance and steps to correct areas of noncompliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's description and evidence of completion of corrective action addressed providing technical assistance and training to district general education staff. However, special education staff may also complete these assessments. | | |
| **Department Order of Corrective Action:**  The district's training on the procedures for completing educational assessments consented-to by the student's parent, including a history of the student's educational progress in the general curriculum and teacher assessments that address attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults must include special education staff. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, for those students whose records were identified by the Department, provide 1) evidence of the completion of the Education Assessment A and B, 2) the review of both assessments with the parent, and 3) a copy of the IEP or amendment, if the IEP is amended as a result of this review.  By December 3, 2018, submit evidence of training (agenda, materials used and attendance list with staff signature/role) provided to general education and special education staff on the district procedures to ensure required educational assessments consented-to by the student's parent, including a history of the student's educational progress in the general curriculum and teacher assessments that address attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults are consistently completed.  By March 4, 2019, conduct a review of records for students across all grade levels with Team meetings held after training is provided, for evidence that required educational assessments consented-to by the student's parent, including a history of the student's educational progress in the general curriculum and teacher assessments that address attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults are completed. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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

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| **Criterion & Topic:**  SE 4 Reports of assessment results | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicated that the assessment reports conducted by related service providers and special education teachers do not consistently summarize the diagnostic impressions or define in detail and in educationally relevant and common terms the explicit means of meeting the students' needs. | | |
| **Description of Corrective Action:**  By the end of September, the Dir of PPS will have held Special Education Department meetings for related services providers and review the expectations for report writing and summarizing diagnostic impressions in reports using common terms and language, and avoiding the use of phrases such as , "Will be determined in the IEP meeting." etc. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS | | **Expected Date of Completion:**  10/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Sign-in sheets with agenda and supporting documentation of training. Results of reviews of a sample of at least 20 reports provided by both related service providers and specialists. | | |
| **Description of Internal Monitoring Procedures:**  The district proposes to review summaries/conclusions/diagnostic impressions sections of reports provided by related service providers and specialists to see if summaries/diagnostic impressions, etc. are being addressed in each document. The district proposes a review of 20 reports to address the CAP, and then periodic meetings thereafter. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 4 Reports of assessment results | **Corrective Action Plan Status:** Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 13, 2018, submit evidence of training (agenda, materials used and attendance list with staff signature/role) provided to related service providers and special education teachers on the district procedures to ensure to ensure completed assessments summarize in writing the evaluators' diagnostic impressions and define in detail and educationally relevant and common terms the explicit means of meeting the students' needs.  By March 18, 2019, conduct a review of records for students across all grade levels with Team meetings held after training is provided, for evidence that assessments conducted by related service providers and special education teachers summarize in writing their diagnostic impressions and define in detail and in educationally relevant and common terms the explicit means of meeting the students' needs. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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| **Criterion & Topic:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicated that the district does not consistently provide the parent a proposed IEP and proposed placement within forty-five school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation. | | |
| **Description of Corrective Action:**  The district will engage in professional development for Special Education staff in September that will include compliance on 45-day timelines for initial evaluations. Following this training, the district will review documents and collect data to obtain a sample of at least 20 records to determine if 100% compliance is being achieved and examine the root cause of any student/initials that are out of compliance as data is collected. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS | | **Expected Date of Completion:**  12/01/2018 |
| **Evidence of Completion of the Corrective Action:**  The evidence will include a tracking log that will list record dates that consent was received, meeting dates, and dates that the IEP was sent to the parent(s)/guardian. before the end of the 45-day timeline. The log will also contain a section for root causes and corrective actions. | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Department secretary will keep a log to monitor compliance with SE #9. this log will be reviewed by the Director of Pupil Personnel Services who will follow up with staff on any issues of non-compliance to determine the root cause as they arise. Information regarding root causes will be documented in the tracking log, which will be made available as part of the CAP. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's description and evidence of completion of corrective action addresses the 45 day timeline for initial evaluations but this requirement also applies to re-evaluations. | | |
| **Department Order of Corrective Action:**  The district must provide professional development for special education staff on district procedures to ensure that the parent is provided a proposed IEP and proposed placement within forty-five school working days after receipt of the parent's written consent to a re-evaluation as well as initial. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, submit evidence of training (agenda, materials used and attendance list with staff signature/role) provided to special education staff on the district procedures to ensure the parent is provided a proposed IEP and proposed placement within forty-five school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation.  By March 4, 2019, conduct a review of student records across all grade levels with Team meetings held after training is provided, for evidence that the parent was provided a proposed IEP and proposed placement within forty-five school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicated that all elements of the IEP are not consistently updated when IEP Teams reconvene to review students' IEPs. These elements, including the student's age and descriptions of services that are no longer being provided, are copied and pasted from one year to the next.  In addition, student record review and interviews indicated that IEP Teams do not consistently address in the IEP the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students with a disability on the autism spectrum, for students with a disability that affects social skills development, or when a student's disability makes him or her vulnerable to bullying, harassment, or teasing. | | |
| **Description of Corrective Action:**  To address the problem of staff not updating all sections of the IEP and cutting and pasting from previous years, the district is taking steps to expand on previous efforts to limit the amount of cutting and pasting that can be done in the proposed next IEP as it is developed in eSped. To explain this further, the district took action to limit the amount of cutting and pasting that was observed in the documents by limiting how much information could be carried over when a document was duplicated in the eSped program.  In addressing the bullying prevention efforts, it is the district's goal to make bullying statements in the IEP more individualized. To aid the district in this, the department has redrafted the Team Summary form to include questions that are specific to bullying that will be incorporated into the IEP. The Team Summary has been updated and implemented at this time. Training will be conducted on 9/24 to review this with staff further. IEPs and specifically bullying statements will be reviewed as they come in after 10/01/2018 with data collected on each IEP reviewed. The sample for review will include a minimum of 25 IEPs and be a mix of initial, re-evaluations, and annuals. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS and building Principals | | **Expected Date of Completion:**  12/01/2018 |
| **Evidence of Completion of the Corrective Action:**  In the review process, we will obtain a minimum of 25 consecutive records that demonstrate that the Team Summary questions relevant to bullying are being addressed, and that the responses to these questions are incorporated into the proposed IEP.  The department will also keep a log of record review comparing the previous IEP to new IEPs to assure that old information is either deleted or updated. | | |
| **Description of Internal Monitoring Procedures:**  Review of IEPs as they are processed to the building principals and into the office for final approval and distribution. These efforts will support a more systematic approach to reviewing the IEP. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, for the two students whose records were identified by the Department, reconvene the Teams to consider, specifically address and document in the IEP the skills and proficiencies need to avoid and respond to bullying. Submit a copy of the meeting invitation (N3), Team attendance sheet (N3A), a summary of the discussion regarding bullying and a revised or amended IEP agreed on by the Team.  By December 3, 2018, for the two students whose records were identified by the Department, reconvene the Teams to address all elements of the IEP and update. Submit a copy of the meeting invitation (N3), Team attendance sheet (N3A) and a revised or amended IEP agreed on by the Team.  By December 3, 2018, submit evidence of training (agenda, materials used and attendance list with staff signature/role) provided to special education staff on the district procedures to 1) ensure all elements of the IEP are updated when IEP Teams reconvene to review students' IEPs and 2) Teams consistently address in the IEP the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students with a disability on the autism spectrum, for students with a disability that affects social skills development, or when a student's disability makes him or her vulnerable to bullying, harassment, or teasing.  By March 4, 2019, conduct a review of records for students across all grade levels with Team meetings held after training is provided, for evidence 1) all elements of the IEP are updated and 2) the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students with a disability on the autism spectrum, for students with a disability that affects social skills development, or when a student's disability makes him or her vulnerable to bullying, harassment, or teasing are addressed in the IEP. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicated that the district does not consistently provide the parent with the proposed IEP and proposed placement along with the required notice within two calendar weeks when the parent receives a summary at the conclusion of the Team meeting. | | |
| **Description of Corrective Action:**  The district proposes to provide training to staff relevant to the compliance and completion of the IEP within two calendar weeks following the IEP Team Meeting. The district will engage in ongoing tracking of this information and identify root causes of noncompliance as part of the corrective action effort. Data collection will look to identify where the incidents are occurring or any other patterns that may aid us in addressing the issue more effectively. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS | | **Expected Date of Completion:**  03/01/2019 |
| **Evidence of Completion of the Corrective Action:**  The district will engage in ongoing compliance and tracking, but will submit evidence in the form of a log that will track a minimum of 25 records. The district will have available a log of IEP processing timelines that will track the following, end date of the current IEP, the meeting date, any rescheduled meeting dates, and when the IEP was received in the central office for processing to the parent. After training, we will look at our compliance numbers to gauge if training effectively addressed the issue successfully. | | |
| **Description of Internal Monitoring Procedures:**  The district will have available a log of IEP processing timelines that will track the following, end date of the current IEP, the meeting date, any rescheduled meeting dates, and when the IEP was received in the central office for processing to the parent. This data will be reviewed on a monthly basis. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, submit evidence of training (agenda, materials used and attendance list with staff signature/role) provided to relevant special education staff on the district procedures to ensure the parent is provided with the proposed IEP and proposed placement along with the required notice within two calendar weeks when the parent receives a summary at the conclusion of the Team meeting.  By March 4, 2019, conduct a review of records for students across all grade levels with Team meetings held after training is provided, for evidence that the parent is provided with the proposed IEP and proposed placement along with the required notice within two calendar weeks when the parent receives a summary at the conclusion of the Team meeting. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review indicated that the Notice of Proposed School District Action (N1) does not consistently describe the actions as a result of the student's IEP Team meeting. Specifically, N1s do not always include: 1) the action the school district is proposing to take; 2) why the district is proposing to act; or 3) a description of each evaluation procedure, test, record or report used as a basis for the proposed action. | | |
| **Description of Corrective Action:**  The district proposes to review N1 documents as they are submitted to the department for distribution to parents. Prior to this and by the end of September, staff will receive training on completing and effectively documenting on the N1 document. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS and building Principals | | **Expected Date of Completion:**  01/01/2019 |
| **Evidence of Completion of the Corrective Action:**  A sample of 25 N1s that show greater detail in addressing all six elements of the proposed action with emphasis on #s 1-3. More specifically, we will be looking to improve documentation in showing the path that lead the district to act, why of how that decision was made, and any supporting documentation or input that was used to support that decision. | | |
| **Description of Internal Monitoring Procedures:**  N1s will be reviewed by administrators at the building and central office level for detail and completeness. A log will be kept of those N1 documents that are reviewed. this effort should develop a more consistent, systematic review of N1 documents. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | **Corrective Action Plan Status:** Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, submit evidence of training (agenda, materials used and dated attendance list with staff signature/role) provided to special education staff on the district procedures to ensure that the Notice of Proposed School District Action (N1) describes the actions as a result of the student's IEP Team meeting, including 1) the action the school district is proposing to take; 2) why the district is proposing to act; and 3) a description of each evaluation procedure, test, record or report used as a basis for the proposed action.    By March 4, 2019, conduct a review of records for students across all grade levels with Team meetings held after training is provided, for evidence the Notice of Proposed School District Action (N1) describes the actions as a result of the student's IEP Team meeting, including 1) the action the school district is proposing to take; 2) why the district is proposing to act; and 3) a description of each evaluation procedure, test, record or report used as a basis for the proposed act. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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| **Criterion & Topic:**  SE 39 Procedures used to provide services to eligible students enrolled in private schools at private expense | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district's procedures for the provision of services to eligible students enrolled in private schools at private expense do not include methods of ongoing, timely and meaningful consultation with private school representatives and parents of parentally-placed private school children with disabilities and do not to include the determination of proportionate share funds calculated, and how funds will be apportioned if federal funds are insufficient to serve all eligible students. Additionally, the school district procedures do not include the requirement to obtain written affirmation that is signed by representatives of participating private schools documenting that meaningful consultation has occurred. | | |
| **Description of Corrective Action:**  The district proposes that the corrective action for this item will include revisiting existing services for students from private schools and addressing ongoing consultation to the private school staff and parents. Documentation will include a review of available student records, introduction of private school consultation log, training for staff (completed by the end of September), and a log of any new students referred and documentation of implemented service plans. At this time the district calculates the proportionate share amount, by pre-planning coverage for known students in the budgetary process. Review of SIMS data this fall will help to address proposed budgetary amounts for providing services to home schooled or private school students with disabilities for the following year. Over the summer, proportionate share amounts are calculated during the writing of the 240 grant as well as looking over available information/caseloads prior to the end of the previous school year. This effort will also include contacting private schools to discuss writing of service plans for any student that does not have one, and arrange a consultation schedule and written affirmation documents. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS | | **Expected Date of Completion:**  03/01/2019 |
| **Evidence of Completion of the Corrective Action:**  The district will conduct a review in late October of available child find data to aid in determining planning for the following year grant writing for the 240 and 262 grants. Another review will identify any students currently receiving services and supports from the district that are in attendance in a private school and address any issues of noncompliance (i.e. written affirmation of consultation, consultation schedules, and development of service plans. It should be noted that any students that currently receive services from the special education department receive those services under an active IEP that is reported on through progress reporting in-line with what their typical peers receive, and reviewed annually. | | |
| **Description of Internal Monitoring Procedures:**  The department will construct a tracking log on a yearly basis by late fall and review before the end of the current school year in preparation for proportionate share and grant writing for the following year. This log will include the name of the student, the school of attendance, the service provided, confirmation that a service plan, consultation schedule, and affirmation statement have been created or obtained. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 39 Procedures used to provide services to eligible students enrolled in private schools at private expense | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's description and evidence of completion of corrective action do not address updating the district's procedures for the provision of services to eligible students enrolled in private schools at private expense. | | |
| **Department Order of Corrective Action:**  The district must updates its procedures for the provision of services to eligible students enrolled in private schools at private expense to include methods of ongoing, timely and meaningful consultation with private school representatives and parents of parentally-placed private school children with disabilities; the determination of proportionate share funds calculated, and how funds will be apportioned if federal funds are insufficient to serve all eligible students and the requirement to obtain written affirmation that is signed by representatives of participating private schools documenting that meaningful consultation has occurred. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, submit a copy of the revised procedures for the provision of services to eligible students enrolled in private schools at private expense to include methods of ongoing, timely and meaningful consultation with private school representatives and parents of parentally-placed private school children with disabilities; the determination of proportionate share funds calculated, and how funds will be apportioned if federal funds are insufficient to serve all eligible students and the requirement to obtain written affirmation that is signed by representatives of participating private schools documenting that meaningful consultation has occurred. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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| **Criterion & Topic:**  CR 9 Hiring and employment practices of prospective employers of students | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district does not require employers recruiting at the school to sign a statement that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices that specifically includes the following protected categories: race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. | | |
| **Description of Corrective Action:**  The district has developed a non-discrimination statement that employers will be expected to sign that contains language relevant to the protected categories. | | |
| **Title/Role(s) of Responsible Persons:**  Mandy Vasil, HS Principal | | **Expected Date of Completion:**  03/01/2019 |
| **Evidence of Completion of the Corrective Action:**  Sample of the form and tracking log of any businesses where the document was distributed and signed will be submitted. | | |
| **Description of Internal Monitoring Procedures:**  Internal tracking log to who the form was distributed to and the date signed for each student involved in employment recruiting. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's description and evidence of completion of corrective action do not address training guidance and any additional relevant staff on the procedures developed to ensure that employers recruiting at the school sign a statement that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices that specifically includes the following protected categories: race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. | | |
| **Department Order of Corrective Action:**  The district must train guidance and any additional relevant staff on the procedures developed to ensure that employers recruiting at the school sign a statement that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices that specifically includes the following protected categories: race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, provide evidence of training (agenda, materials used and dated attendance list with staff signature/role) on the procedures developed to ensure that employers recruiting at the school sign a statement that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices that specifically includes the following protected categories: race, color, national origin, sex, gender identity, handicap, religion and sexual orientation.  By December 3, 2018, provide a copy of the signed statement from an employer stating their compliance with applicable federal and state laws prohibiting discrimination in hiring or employment practices that specifically includes the following protected categories: race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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

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| **Criterion & Topic:**  CR 10 Anti-Hazing Reports | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the middle school secures an acknowledgment of receipt of the anti-hazing law and the school's anti-hazing disciplinary policy for students participating in sports teams, but not for students participating in other student groups or organizations. | | |
| **Description of Corrective Action:**  The middle school administration will distribute and collect from teacher advisors and coaches the Statement of Acknowledgement relevant to anti-hazing for groups, teams, and organizations in September with an expected completion date (all forms returned) before 10/15/2018. | | |
| **Title/Role(s) of Responsible Persons:**  Mary LaFrennierre, MS Principal | | **Expected Date of Completion:**  10/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Returned/completed forms for participants in sports and non-sports oriented groups and organizations. | | |
| **Description of Internal Monitoring Procedures:**  Forms will be distributed through the school's administrative offices to adult leaders overseeing any student sport, group, or organization, and reviewed to assure that the document is distributed to all student based activities. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10 Anti-Hazing Reports | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's description and evidence of completion of corrective action do not address an internal oversight and tracking system to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  The middle school must develop an internal oversight and tracking system and identify a person(s) responsible to ensure that the middle school secures an acknowledgment of receipt of the anti-hazing law and the school's disciplinary policy for students participating in other student groups or organizations as well as for students participating in sports teams. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, provide the middle school's internal oversight and tracking system with person(s) responsible to ensure that the middle school secures an acknowledgment of receipt of the anti-hazing law and the school's disciplinary policy for students participating in other student groups or organizations as well as for students participating in sports teams.  By December 3, 2018, provide copies of the signed acknowledgements from designated officers of student groups, teams and organizations from the middle school. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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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:**  Document review and interviews indicated that the student handbooks and codes of conduct for all district schools do not contain: 1) procedures for the discipline of students with disabilities, students with Section 504 Accommodation Plans and students not yet determined eligible for special education; 2) procedures assuring due process in disciplinary proceedings (see CR 10C); or  3) procedures for accepting, investigating and resolving complaints alleging discrimination or harassment and the disciplinary measures that the school may impose if it is determined either has occurred.  Additionally, the high school's faculty handbook does not include a code of conduct for teachers. | | |
| **Description of Corrective Action:**  The district has begun the process of recrafting the student handbooks into one district handbook with individual sections for each school. Ongoing collaboration of this project is being engaged in administrative meetings and on-line. The district projects that after revisions and reviews, a final version of the new handbook will be available and ready for distribution by 12/01/2018. | | |
| **Title/Role(s) of Responsible Persons:**  Building administration (Principals) and central office administrators (Suprt, CAO, Dir PPS). | | **Expected Date of Completion:**  12/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Completed district student handbook. | | |
| **Description of Internal Monitoring Procedures:**  The student handbook will continue to be reviewed by building principals and central office administrators prior to the end of the school year to update the information and ready the document for distribution the following year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  A review of the district student and family handbook on the district website confirms that it now contains 1) procedures for discipline of students with Section 504 Accommodation Plans (p46); 2) procedures for assuring due process in disciplinary hearings (p196-206) (also see CR10C) and 2) procedures for accepting, investigating and resolving complaints alleging discrimination or harassment and the disciplinary measures that the school may impose if it is determined either has occurred (p51-57). However, the procedures for the discipline of students with disabilities does not include 1) notifying the parent of the decision to suspend, and 2) lacks information for students not yet determined eligible for special education. Also, the district's description and evidence of completion of corrective action do not address including a code of conduct for teachers in the high school faculty handbook. | | |
| **Department Order of Corrective Action:**  The district must revise its procedures for students with disabilities to include 1) notifying the parent of the decision to suspend, and 3) including information for students not yet determined eligible for special education. The district must also develop a code of conduct for teachers to include in the high school's faculty handbook. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, update the district student and family handbook on the district's website to contain procedures for the discipline of students with disabilities and students not yet determined eligible for special education that include required content.  By December 3, 2018, submit the high school's faculty handbook that includes a code of conduct for teachers. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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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:**  Document review and interviews indicated that the district's Bullying Prevention and Intervention Plan does not clarify that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. The student handbooks and codes of conduct at the elementary and high school levels do not extend protections to students who are bullied by a member of the school staff. In addition, the faculty handbook at the high school does not contain the relevant provisions addressing the bullying of students by a school staff member. | | |
| **Description of Corrective Action:**  The school committee is in the process of reviewing and revising the Bullying Prevention and Intervention Plan and policy to include the recommended language identifying aggressors and perpetrators. At this time, the policy is scheduled to be considered for a second reading in late September. Once fully approved by the school committee, it is expected that the bullying prevention and intervention plan will be posted to the district's web site and reviewed with staff. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent and School Committee, building Principals (Vasil, LaFrenniere, Soltysik, Jillson) | | **Expected Date of Completion:**  11/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Updated policy and intervention plan. Staff meeting agendas. | | |
| **Description of Internal Monitoring Procedures:**  The School Committee along with the central office will review policies yearly and converse on trends in revisions or changes in relevant law as they arise. Administrators will review the updated policies and distribute the new information to staff during staff meetings. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  A review of the district student and family handbook confirms that it now extends protections to students who are bullied by a member of the school staff. However, the district's description or evidence of completion of corrective action does not address revising the faculty handbook at the high school to contain the relevant provisions addressing the bullying of students by a school staff member. | | |
| **Department Order of Corrective Action:**  The district must revise the faculty handbook at the high school to contain the relevant provisions addressing the bullying of students by a school staff member. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, submit 1) the revised Bullying Prevention and Intervention Plan and 2) evidence of training (agenda and dated attendance list with staff signature/role) provided to staff on updated Plan.  By December 3, 2018, submit the section of the employee handbook that contains relevant sections of the amended Plan relating to the duties of staff. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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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:**  Document review and interviews indicated that the district has not developed student discipline policies and procedures that include all required content. These policies and procedures must include: 1) procedures for emergency removal; 2) procedures for principal hearings for both short and long-term suspension; 3) procedures for in-school suspension; 4) procedures for superintendent hearing; and 5) alternatives to suspension. In addition, the notice of hearing and suspension does not indicate the disciplinary offense, the basis for the charge, the potential consequence and the right of the student and parent to interpreter services. | | |
| **Description of Corrective Action:**  The district has engaged in the process of updating the Student Discipline policy. It is expected that after revisions and a scheduled second reading scheduled for the end of September, the policy will be approved before 10/01/2018. If fully approved during the second reading, it will be listed on the web site as the new policy and reviewed with staff. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent and school committee, building Principals | | **Expected Date of Completion:**  11/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Revised Student Discipline policy that contains corrected/added content. Staff meeting agendas. | | |
| **Description of Internal Monitoring Procedures:**  The School Committee along with the central office will review policies yearly and converse on trends in revisions or changes in relevant law as they arise. Once completed, the information will be disseminated to faculty and other staff in staff meetings. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's description and evidence of completion of corrective action do not address revising the notice of hearing and suspension to indicate the disciplinary offense, the basis for the charge, the potential consequence and the right of the student and parent to interpreter services. | | |
| **Department Order of Corrective Action:**  The district must revise the notice of hearing and suspension to indicate the disciplinary offense, the basis for the charge, the potential consequence and the right of the student and parent to interpreter services. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, provide a copy of the district's revised discipline policy and procedures that contains all required content including: 1) procedures for emergency removal; 2) procedures for principal hearings for both short and long-term suspension; 3) procedures for in-school suspension; 4) procedures for superintendent hearing; and 5) alternatives to suspension. In addition, the notice of hearing and suspension does not indicate the disciplinary offense, the basis for the charge, the potential consequence and the right of the student and parent to interpreter services.  By December 3, 2018, provide a copy of the revised notice of hearing and suspension that indicates the disciplinary offense, the basis for the charge, the potential consequence and the right of the student and parent to interpreter services. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district's notification of nondiscrimination does not include the name, office address and phone number of the person(s) designated to coordinate compliance under Title IX and Section 504. | | |
| **Description of Corrective Action:**  The district is looking to add contact information for the Title IX and 504 Coordinators into the combined, district student handbook, and will also have the information on the district's web site. Currently the information is included in mandatory training for staff that takes place in August and September. | | |
| **Title/Role(s) of Responsible Persons:**  Building principals and central office administrators (Supr, CAO, and Dir PPS) | | **Expected Date of Completion:**  11/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Completed, district student handbook. Worksheet of completed on-line trainings. Sample of on-line information. | | |
| **Description of Internal Monitoring Procedures:**  The student handbook and web based information will be reviewed yearly and updated prior to the beginning of the next school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date:** 10/15/2018  **Correction Status:** Corrected | |
| **Basis for Decision:**  A review of the district student and family handbook on the district website now indicates the name, office address and phone number of the persons designated to coordinate compliance under Title IX and Section 504 (p 56-57). | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district has not developed a written notice to provide to students and their parents within five days of the student's tenth consecutive absence. This notice must: 1) offer at least two dates and times for an exit interview with the superintendent (or designee) before the student permanently leaves school; 2) be provided to the student and the parent/guardian of the student in English and the primary language of the parent or guardian (to the extent practicable); 3) include contact information for scheduling the exit interview; 4) indicate that all parties shall agree to the date and time; 5) explain that the exit interview will occur within 10 days of the notice; and 6) indicate that the date and time of the exit interview may be extended an additional 14 days at the request of the parent or guardian.  Additionally, the district has not developed a written notice to be provided annually to former students who have not yet earned their competency determination and have not transferred to another school to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs. | | |
| **Description of Corrective Action:**  The district is in the process of drafting a revised letter that will go out to students that addresses the 6 points identified in CR #16. It is the intent of the district to review students who have dropped in the past two years and send a written notice to those students who have not earned their competency, and to make them aware of publicly funded options and programs available to them. This letter is under development at this time. The proposal for corrective action would include completing final versions of these letters by 11/01/2018, sending letters out to former students who have left school over the past two years, and to utilize the new letters to notify students with ten consecutive absences. | | |
| **Title/Role(s) of Responsible Persons:**  Mandy Vasil (HS Principal) | | **Expected Date of Completion:**  05/01/2019 |
| **Evidence of Completion of the Corrective Action:**  Sample letters sent out to students who have ten consecutive days of absences will be used as partial evidence of compliance and corrective action. Also, a log of annual letters sent out to former students that left after 16 years old will be submitted as evidence of compliance for CR #16. During the course of the year, data will be collected relevant to students who have left school and have gone through the notification process. Because of the expectation that this may be a small number for the district, it is proposed that the expected completion date of 05/01/2019 will provide a reasonable sample for the current school year. | | |
| **Description of Internal Monitoring Procedures:**  Tracking log for students leaving school and for those that have left and are sent out letters to their last known addresses for a two year period. Ongoing tracking for students reaching ten days of absences this year. These efforts would be to create a systematic oversight of a more defined process. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's description and evidence of completion of corrective action do not address developing procedures to ensure written notice is provided to students and their parents within five days of the student's tenth consecutive absence. | | |
| **Department Order of Corrective Action:**  The district must develop procedures to ensure written notice is provided to students and their parents within five days of the student's tenth consecutive absence. | | |
| **Required Elements of Progress Report(s):**  Review the following documents: High School Exit Intervention Model Protocol at http://www.doe.mass.edu/dropout/2014-05ExitProtocol.pdf, and Information for School Districts about Required Notices Regarding Students who Leave High School Without Graduating at http://www.doe.mass.edu/news/news.aspx?id=3051  By December 3, 2018, provide a copy of the procedures developed to ensure a written notice is provided to students and their parents within five days of the student's tenth consecutive absence.  By December 3, 2018, provide a copy of the notice provided to students and their parents within five days of the student's tenth consecutive absence that includes 1) offer at least two dates and times for an exit interview with the superintendent (or designee) before the student permanently leaves school; 2) be provided to the student and the parent/guardian of the student in English and the primary language of the parent or guardian (to the extent practicable); 3) include contact information for scheduling the exit interview; 4) indicate that all parties shall agree to the date and time; 5) explain that the exit interview will occur within 10 days of the notice; and 6) indicate that the date and time of the exit interview may be extended an additional 14 days at the request of the parent or guardian.  By December 3, 2018, provide a copy of the notice sent by the district to former students who have not yet earned their competency determination and have not transferred to another school to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs. | | |
| **Progress Report Due Date(s):**  12/03/2018 | | |

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

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| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district has not updated the written restraint prevention and behavior support policy and procedures consistent with new regulatory requirements that went into effect January 1, 2016, to include: 1) methods for preventing student violence, self-injurious behavior and suicide; 2) methods for engaging parents in discussions about restraint prevention and use; 3) a description and explanation of the program's alternatives to physical restraint; 4) the method of physical restraint in emergency situations; 5) a statement prohibiting: medication restraint, mechanical restraint, prone restraint unless permitted pursuant to 603 CMR 46.03(1)(b), seclusion or the use of restraint inconsistent with 603 CMR 46.03; 6) a description of the school's training requirements, reporting requirements and follow-up procedures; 7) a procedure for receiving and investigating complaints; 8) a procedure for implementing reporting requirements; 9) a procedure for making both oral and written notice to the parent; or 10) a procedure for the use of time out. | | |
| **Description of Corrective Action:**  The district has engaged in the process of updating the Physical Restraint policy and procedures to address elements #1-10. It is expected that a scheduled second reading will be done by the end of September, and that the policy will be approved before 10/01/2018. If fully approved during the second reading, it will be listed on the web site as the new restrain policy and procedure and reviewed with staff. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent and School Committee, Building Principals | | **Expected Date of Completion:**  11/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Completed and revised policy. Staff meeting agendas. | | |
| **Description of Internal Monitoring Procedures:**  The School Committee along with the central office will review policies yearly and converse on trends in revisions or changes in relevant law as they arise. Once the new policy is available, it will be reviewed with staff during staff meetings. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, provide a copy of the updated written restraint prevention and behavior support policy and procedures that include: 1) methods for preventing student violence, self-injurious behavior and suicide; 2) methods for engaging parents in discussions about restraint prevention and use; 3) a description and explanation of the program's alternatives to physical restraint; 4) the method of physical restraint in emergency situations; 5) a statement prohibiting: medication restraint, mechanical restraint, prone restraint unless permitted pursuant to 603 CMR 46.03(1)(b), seclusion or the use of restraint inconsistent with 603 CMR 46.03; 6) a description of the school's training requirements, reporting requirements and follow-up procedures; 7) a procedure for receiving and investigating complaints; 8) a procedure for implementing reporting requirements; 9) a procedure for making both oral and written notice to the parent; or 10) a procedure for the use of time out.  By December 3, 2018, submit evidence of training (dated attendance list with staff signature/role) provided to all staff on the updated restraint prevention and behavior support procedures. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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

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| **Criterion & Topic:**  CR 18 Responsibilities of the school principal | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the district has developed a district curriculum accommodation plan (DCAP). However, interviews indicated that staff have not been trained on the implementation of the DCAP. Document review also indicated that the DCAP does not include services to address the needs of children whose behavior may interfere with learning.  Interviews also demonstrated that at all levels, staff describe a Study Team process (ST); however, it is not implemented consistently across each school level and there is not a defined tiered level of support system or response to intervention (RTI) designed to provide instructional support for teachers. | | |
| **Description of Corrective Action:**  The district has a new working draft of the DCAP and have been working with building administrators and central office staff to finalize the new document. Our timeline looks to finalize the document by early October, and then distribute to staff. Discussions revolving around distribution have included planning to review the document in staff meetings, and post to the district website. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS and building Principals | | **Expected Date of Completion:**  11/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Once completed and distributed, the review of the document will be recorded in the attendance sheets compiled during staff meetings at each school. | | |
| **Description of Internal Monitoring Procedures:**  The document is being primarily created out of the special education department with collaboration from various stakeholders and coordinated through that department. Distribution to building principals will be from the Special Education Department, who will in turn share and review the document with their staff. Posting on the document to the website will occur through the Spec Educ Dept. On a yearly basis, the document will be reviewed by the admin team as part of their meeting schedule, updated, and redistributed throughout the district. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's description and evidence of completion of corrective action indicates the district has a working draft of the DCAP. However, the inconsistency across each school level of the district's Study Team process (ST) and developing a defined tiered level of support system or response to intervention (RTI) designed to provide instructional support for teachers is not addressed. | | |
| **Department Order of Corrective Action:**  The district must 1) develop procedures for a tiered level of support system or response to intervention (RTI) designed to provide instructional support for teachers and 2) provide training to special education and general education staff on the district's Study Team process (ST). | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, update the DCAP on the district website to include services to address the needs of children whose behavior may interfere with learning.  By March 4, 2019, provide the procedures developed for a tiered level of support system or response to intervention (RTI).  By March 4, 2019, submit evidence of training (agenda and dated attendance list with staff signature/role) to special education and general education staff on the procedures developed for the 1) DCAP; 2) ST process to ensure the ST is consistently implemented across all grade levels and 3) tiered system of supports to ensure staff understand the supports in place to meet the needs of diverse learners in the general education classroom, including services to address the needs of children whose behavior may interfere with learning. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that individual teachers in the district do not review educational materials for consideration of 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:**  Building principals are in the process of developing a bias review system that will record efforts to review supportive materials and text for bias review at the individual teacher level. These efforts will also include a bias survey with follow up discussions relevant to survey results within each class. | | |
| **Title/Role(s) of Responsible Persons:**  Building Principals (Vasil, LaFrenierre, Soltysik, Jillson) | | **Expected Date of Completion:**  12/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Completed reviews of materials will include the materials that are used in each individual class. Students will be introduced to bias lessons through surveys and discussions about bias in their classrooms. Evidence wi | | |
| **Description of Internal Monitoring Procedures:**  The district, at the building level on a yearly basis, will continue to conduct lessons on bias, surveys to students, and reviews of supportive materials and texts. Building principals will review this process with classroom teachers each year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, provide a copy of the bias review system procedures developed and evidence of training (agenda, dated attendance list with staff signature/role) provided to special education and general education teachers to ensure they review all educational materials presented in the classroom for consideration of simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation and that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in such materials. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  Document review and staff interviews indicated that the district does not evaluate all aspects of its  K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. | | |
| **Description of Corrective Action:**  The district is in the process of developing a survey that will be distributed to students, parents, and staff to aid in gauging and evaluating if students and their families have access to all programs. We will use the results of the survey as a data collection point, determine if it is a representative sample, analyze the data we receive/returned, and identify any root causes that are discovered in the review. In analyzing data, we will see if there are areas that require additional trainings or outreach to address within the school and the community. | | |
| **Title/Role(s) of Responsible Persons:**  Building principals | | **Expected Date of Completion:**  12/15/2018 |
| **Evidence of Completion of the Corrective Action:**  Once surveys are distributed and returned, a collection tool will be used to analyze the data so that it can be broken down into components (groups). Any outreach that is done will be recorded relevant to community offerings and/or staff trainings, and learning walks. | | |
| **Description of Internal Monitoring Procedures:**  After the first year the district will engage feedback of stakeholders by distributing the survey and updating it as needed before redistribution for the next year and document those efforts. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By March 4, 2019, submit a copy of the district's institutional self-evaluation including the tools utilized, conclusions reached, and resolution of any identified issues 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. | | |
| **Progress Report Due Date(s):**  03/04/2019 | | |

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

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| **Criterion & Topic:**  ELE 5 Program Placement and Structure | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review indicated that the district does not have an ESL curriculum, and the ESL teacher uses reading intervention software that is designed to meet the needs of students in grades 4-12 struggling with reading, special education students and nonreaders. Reading and literacy intervention programs cannot be a substitute for an ESL curriculum that should guide the ESL instruction. | | |
| **Description of Corrective Action:**  The district is in the process of ordering several research based curriculum programs for to be used with students receiving ELL services to enhance the current programs we use. These new materials are being ordered from Pearson and include; -Writing Power, Levels 1 9780132314848 ,2 9780132314855 ,3 9780132314862 , and 4 9780132314879 .  -Listening Power, Level 1 (Student Book with Classroom Audio 9780132626491) (Teacher's Pack 9780136114222)  -Listening Power, Level 2 ( Student Book with Classroom Audio 9780132626514) (Teacher's Pack 9780136114260)  -Listening Power, Level 3 ( Student Book with Classroom Audio 9780132626484) (Teacher's Pack 9780136114291)  -Reading Power 1, 3rd ed (Student Book 9780138143893, Test Booklet 9780132085342)  -Reading Power 2, 4th ed (Student Book 9780138143886, Test Booklet 9780138143909)  -Reading Power 3, 3rd ed (Student Book 9780132089036, Test Booklet 9780132089043)  -Reading Power 4, (Student Book 9780133047172, Test Booklet 9780133247985)  Focus on Grammar 4th ed 2012  Level 1 -  Student Book with MyEnglishLab: Focus on Grammar 9780132484121  Workbook 9780132484138  Teacher’s Resource Pack with CD-ROM 9780132484145  Classroom Audio CDs 9780132484152  Instructor Access 9780132315838  Focus on Writing Student Book 1 9780132313506  Focus on Writing Student Book 2 9780132313520  Student Book single copy 9780132314848  Student Book single copy 9780132314862    Level 2 -  Student Book 9780132546478  Teacher’s Resource Pack with CD-ROM 9780132163521  Classroom Audio CDs 9780132160506  Instructor Access 9780132315838  Student Book A with MyEnglishLab: Focus on Grammar & Workbook A 9780132862240  Student Book B with MyEnglishLab: Focus on Grammar & Workbook B 9780132862257  Student Book A with MyEnglishLab: Focus on Grammar 9780132114455  Student Book B with MyEnglishLab: Focus on Grammar 9780132169271  Student Book B and Workbook B 9780132861793  Student Book B 9780132169264  Workbook A 9780132163507  Workbook B 9780132163514  Level 3 -  Teacher’s Resource Pack with CD-ROM 9780132169714  Classroom Audio CDs 9780132169356  MyEnglishLab: Focus on Grammar 9780132560528  Instructor Access 9780132315838  Student Book A with MyEnglishLab: Focus on Grammar & Workbook A 9780132862325  Student Book A with MyEnglishLab: Focus on Grammar 9780132160599  Student Book A and Workbook A 9780132862318  Student Book B 9780132160612  Workbook A 9780132169318  Level 4 -  Student Book with MyEnglishLab & Workbook 9780132862363  Student Book with MyEnglishLab: Focus on Grammar 9780132169363  Student Book and Workbook 9780132862356  Teacher’s Resource Pack with CD-ROM 9780132169721  Classroom Audio CDs 9780132169783  Instructor Access 9780132315838  Student Book A with MyEnglishLab: Focus on Grammar & Workbook A 9780132862387  Student Book B with MyEnglishLab: Focus on Grammar & Workbook B 9780132862349  Student Book A with MyEnglishLab: Focus on Grammar 9780132169394  Student Book B with MyEnglishLab: Focus on Grammar 9780132169660  Level 5 -  Workbook 9780132169851  Teacher’s Resource Pack with CD-ROM 9780132169974  MyEnglishLab: Focus on Grammar 9780132560597  Instructor Access 9780132315838  Student Book A with MyEnglishLab: Focus on Grammar & Workbook A 9780132862455  Student Book A with MyEnglishLab: Focus on Grammar 9780132169820  Student Book B and Workbook B 9780132862462  These items should be received by late September and distributed shortly thereafter. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS | | **Expected Date of Completion:**  11/01/2018 |
| **Evidence of Completion of the Corrective Action:**  The district will make available copies of invoices. We will also include logs of discussions with ELL staff relevant to use/overview and distribution of curriculum materials. | | |
| **Description of Internal Monitoring Procedures:**  The Dir PPS meets with ELL staff at least once per month. During these meetings we will discuss the roll-out of the curriculum, as well as continuing discussions of other resources needed for these students. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 5 Program Placement and Structure | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The curriculum programs the district is planning to purchase are designed for general student population as supplementary resources for intervention. Reading and Writing intervention curricula help the students improve their reading and writing skills, but do not provide explicit, direct and systematic instruction to learn English language. Therefore, they cannot be used as a substitute for an ESL curriculum. | | |
| **Department Order of Corrective Action:**  See below. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, please submit a plan that includes information about a process for developing or adopting an ESL curriculum that integrates WIDA ELD standards as well as the timeline for implementation. Please note that the plan should reflect the content to be taught and address the instructional needs of the ELL population at all levels. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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

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| **Criterion & Topic:**  ELE 14 Licensure Requirements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Interviews, document review and a review of ELAR indicated that the ESL teacher who provides students with ESL instruction does not hold an ESL license or a current waiver issued by the Massachusetts Department of Elementary and Secondary Education.  Staff interviews and the relevant SEI endorsement data also indicated that most core academic teachers assigned to provide sheltered English instruction to English learners hold the SEI Teacher Endorsement, but some do not. | | |
| **Description of Corrective Action:**  Currently, the ELL teacher has applied for certification as an ELL teacher, but has not received confirmation. She is currently certified as a reading specialist and has completed her SEI endorsement. The district had applied for a waiver last year, but had not received notification of authorization. Additional outreach was conducted recently, which we imagine may lead to the district applying for a waiver again. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS | | **Expected Date of Completion:**  10/01/2018 |
| **Evidence of Completion of the Corrective Action:**  The district will supply documentation of the waiver or certification completion. | | |
| **Description of Internal Monitoring Procedures:**  The district monitors certification at the central office level and keeps hard copies of staff certifications in a central location in the district central office of all staff and contracted supports. Certifications are reviewed annually and upon hiring. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 14 Licensure Requirements | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district provided information regarding the licensure of the unlicensed ESL teacher; however, it did not provide documentation of the educator's application for licensure or evidence that the district has applied for the appropriate waiver. Although the district provided information regarding the process for monitoring certification, it did not provide documentation of its procedures for ensuring that unendorsed SEI-content area teachers earn their endorsement and a timeline that shows educators' efforts towards earning their SEI endorsement. | | |
| **Department Order of Corrective Action:**  Please, see below. | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018, the district will:  1) Provide documentation of the educator's application for licensure or evidence that the district has applied for the appropriate waiver.  2) Provide information on the support the district will provide to help the unendorsed educator(s) earn their endorsement and a timeline that shows the educators' efforts towards earning their SEI endorsement.  3) Submit the district's plan to ensure that ELs are assigned only to core academic teachers who hold the SEI endorsement.  4) 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.  5) Please submit the completed SEI endorsement form available in the Document Library to provide information regarding the SEI endorsement status of the core academic teachers of ELs in the district. | | |
| **Progress Report Due Date(s):**  12/03/2018  03/04/2019 | | |

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

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| **Criterion & Topic:**  ELE 17 Program Evaluation | | **CPR Rating:**  Not Implemented |
| **Department CPR Findings:**  A review of the documentation indicated that the district has not conducted periodic evaluations of the effectiveness of its ELE program in developing students' English language skills and increasing their ability to participate meaningfully in the educational program. | | |
| **Description of Corrective Action:**  The district is formalizing an ELL team that has been meeting on a bi-weekly (every two week) basis since last spring 2018. We are looking to expand this team to have a broader perspective from administrators and general education staff. The intent is for the larger team to meet on a monthly basis. The intent is to take data that is reviewed in the smaller groups and analyze that information using a focus on effectiveness of programs using a growth model, student participation in school culture and extracurricular activities, identification practices with specific focus on overidentification and if students who are ELL are being referred to special education. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Dir PPS | | **Expected Date of Completion:**  11/01/2018 |
| **Evidence of Completion of the Corrective Action:**  Completion of a district ELE Program Evaluation document. | | |
| **Description of Internal Monitoring Procedures:**  Meetings for the smaller group will continue on a monthly basis with the larger team meeting three times per year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  ELE 17 Program Evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 10/15/2018  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2018:  1. Please complete the program evaluation tool that is available at http://www.doe.mass.edu/ell/ProgramEvaluation.pdf  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 at promoting and supporting the rapid acquisition of English language proficiency by ELs as is required in G.L. c. 71A. | | |
| **Progress Report Due Date(s):**  12/03/2018 | | |