

**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY  
EDUCATION**

**Program Quality Assurance Services**

**COORDINATED PROGRAM REVIEW**

**CORRECTIVE ACTION PLAN**

**Charter School or District: Chelmsford**

**CPR Onsite Year: 2016-2017**

**Program Area: Special Education**

*All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report dated 09/13/2017.*

**Mandatory One-Year Compliance Date: 09/13/2018**

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

<b>Criterion</b>	<b>Criterion Title</b>	<b>CPR Rating</b>
SE 7	Transfer of parental rights at age of majority and student participation and consent at the age of majority	Partially Implemented
SE 8	IEP Team composition and attendance	Partially Implemented
SE 13	Progress Reports and content	Partially Implemented
SE 18B	Determination of placement; provision of IEP to parent	Partially Implemented
SE 20	Least restrictive program selected	Partially Implemented
SE 24	Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE	Partially Implemented
SE 32	Parent advisory council for special education	Partially Implemented

<b>Criterion</b>	<b>Criterion Title</b>	<b>CPR Rating</b>
SE 34	Continuum of alternative services and placements	Partially Implemented
SE 54	Professional development	Partially Implemented
SE 55	Special education facilities and classrooms	Partially Implemented
CR 3	Access to a full range of education programs	Partially Implemented
CR 7	Information to be translated into languages other than English	Partially Implemented
CR 7B	Structured learning time	Partially Implemented
CR 7C	Early release of high school seniors	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 12A	Annual and continuous notification concerning nondiscrimination and coordinators	Partially Implemented
CR 18A	School district employment practices	Partially Implemented
CR 25	Institutional self-evaluation	Partially Implemented
ELE 5	Program Placement and Structure	Partially Implemented
ELE 7	Parent Involvement	Partially Implemented
ELE 17	Program Evaluation	Not Implemented

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of student records indicated that the district does not consistently inform the student and the parent/guardian of the rights that will transfer from the parent/guardian to the student upon his or her 18th birthday at least one year prior to the student reaching age 18.	
<b>Description of Corrective Action:</b> Director of Student Services will review with high school team chair & Assistant Director/ OOD coordinator Age of Majority Administrative Advisory SPED 2011-1. The high school team chair will share this Administrative Advisory with the high school liaisons.  The process & procedure for Transfer of Rights and Age of Majority will be reviewed with the assistant director/out of district coordinator and high school team chair during one of the weekly consult meetings with the Director of Student Services. The same training/discussion will occur with the high school liaisons at monthly meeting by the high school administrative team chair. Review of the decision making procedure if students choose to delegate decision-making to his/her parent and any legal court documentation needed by the parent if parents seek to legally keep decision-making will be a focus.  At the annual review meeting or reevaluation meeting prior to the student turning 18 years students and parents will be apprised of the need to make the age of majority decision once the student turns 18. In the meeting discussing transfer of rights, notice of transfer of rights will be reflected under additional information of the IEP and within the N1. The transfer of rights forms will be included in the IEP packet sent to Student Services.  Creation of procedural manual for all special education liaisons, Team Chairs & OOD Coordinator will include section on transfer of rights and age of majority.	
<b>Title/Role(s) of Responsible Persons:</b> Director of Student Services, Ass't Director/OOD Coord, High School Team Chair & Support Secretaries	<b>Expected Date of Completion:</b> 06/30/2018
<b>Evidence of Completion of the Corrective Action:</b> Copies of attendance & hand outs from meetings with ETF's & OOD Coordinator.  Log of the monthly emails sent by the information data secretary informing necessary staff of students turning 17.  Procedural manual (completed by 9/1/2018)	
<b>Description of Internal Monitoring Procedures:</b> Data Information secretary in the Student Services office sends a monthly email alert to the Director of Student Support Services, the high school team chair, the assistant	

director/OOD coordinator, high school special education liaisons, and special education support secretaries of the students turning 17.

Data information secretary processes IEP packets and will notify high school liaisons, team chair and assistant director/OOD coordinator of missing Transfer of Rights forms in packets sent where students are 17 years old. Log of these cases will be kept and shared with Director of Student Services to ensure compliance.

Random file checks bi-annually of students 17 year old or older by the Director of Student Services, high school team chair (administrator) and/or Assistant Director/OOD Coordinator. Log of compliance/documentation for transfer of rights and/or age of majority forms sent to DESE.

Procedural manual (by 9/01/2018) for all special education administrators (assistant director & team chairs) and special education liaisons will outline SE 7 compliance.

#### **CORRECTIVE ACTION PLAN APPROVAL SECTION**

**Criterion:**

SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority

**Corrective Action Plan Status:** Approved

**Status Date:** 11/15/2017

**Correction Status:** Not Corrected

**Basis for Decision:****Department Order of Corrective Action:****Required Elements of Progress Report(s):**

By January 5, 2018, submit evidence of training provided to appropriate staff to ensure the district informs the student and the parent/guardian of the rights that will transfer from the parent/guardian to the student upon his or her 18th birthday at least one year prior to the student reaching age 18. Please include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.

By March 16, 2018, submit the results of an internal review of records to ensure that the district informs the student and the parent/guardian of the rights that will transfer from the parent/guardian to the student upon his or her 18th birthday at least one year prior to the student reaching age 18. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance.

\*Please note when conducting internal monitoring, the 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):**

01/05/2018

03/16/2018



## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> SE 8 IEP Team composition and attendance	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of student records indicated the following issues when Team members are unable to attend the IEP meeting: a) the parent and district do not always agree to use alternative means, such as a video conference or a conference call, for a Team meeting; or b) the district and parent do not always agree, in writing, that the attendance of the Team member is not necessary because the member's area of the curriculum or related services is not being modified or discussed; or c) the district and the parent do not always agree, in writing, to excuse a required Team member's participation and for the excused member to provide written input into the development of the IEP to the parent and the IEP Team prior to the meeting.	
<b>Description of Corrective Action:</b> Director of Student Services will review the procedure for Team composition and attendance with the special education administrators at biweekly team chair meeting in November 2017. Review of who needs to attend IEP meetings along with regulation for excusal of a Team member from not attending the meeting. Copy of the excusal form will be provided to the team chairs and discussion about written input required from any Team member not able to attend the meeting. Discussion of needing parental permission to excuse a required team member early from a Team meeting.  Team Chairs (administrators) will continue this training/discussion at special education staff meetings by February, 2018 with all special education teachers and related service providers.  Excusal form will be added to district's IEP checklist form for all meeting packets.  Director of Student Services will discuss Team composition & attendance of necessary Team members at IEP meetings with all school principals at a principal leadership meeting by 11/30/17.  Creation of procedural manual for all special education liaisons, team chairs, Preschool Coordinator, Assistant Director & OOD Coordinator (by 9/01/2018) will include a section on IEP Team composition/attendance. Copy of the excusal form will be included in manual.	
<b>Title/Role(s) of Responsible Persons:</b> Director of Student Services, Ass't Dir/OOD Coord., PreK Coord., Team Chairs, & Special Ed. Liaisons	<b>Expected Date of Completion:</b> 02/01/2018
<b>Evidence of Completion of the Corrective Action:</b> Copies of agenda & attendance sheets from Team Chair meeting. Copies of agenda & attendance from special education liaison monthly meeting with respective level team chair. Copy of Team member excusal form. Procedural manual (by 9/1/2018)	

**Description of Internal Monitoring Procedures:**

Quarterly random file reviews to monitor compliance by Director of Student Services, Assistant Director, and/or team chairs (administrators). Log of detailed summary of the district record review indicating compliance and non-compliance.

Ongoing review of subject at monthly staff meetings with team chairs, special education teachers & related service providers.

Yearly review of team composition with principals at leadership meeting.

Procedural manual for ETF's to reference for compliance and access to necessary forms (9/01/2018)

**CORRECTIVE ACTION PLAN APPROVAL SECTION****Criterion:**

SE 8 IEP Team composition and attendance

**Corrective Action Plan Status:** Approved

**Status Date:** 11/15/2017

**Correction Status:** Not Corrected

**Basis for Decision:****Department Order of Corrective Action:****Required Elements of Progress Report(s):**

By January 5, 2018, submit evidence of training provided to appropriate staff to ensure that when Team members are unable to attend the IEP meeting: a) the parent and district agree to use alternative means, such as a video conference or a conference call, for a Team meeting; or b) the district and parent agree, in writing, that the attendance of the Team member is not necessary because the member's area of the curriculum or related services is not being modified or discussed; or c) the district and the parent agree, in writing, to excuse a required Team member's participation and for the excused member to provide written input into the development of the IEP to the parent and the IEP Team prior to the meeting. Please include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.

By March 16, 2018, submit the results of an internal review of records to ensure that when Team members are unable to attend the IEP meeting: a) the parent and district agree to use alternative means, such as a video conference or a conference call, for a Team meeting; or b) the district and parent agree, in writing, that the attendance of the Team member is not necessary because the member's area of the curriculum or related services is not being modified or discussed; or c) the district and the parent agree, in writing, to excuse a required Team member's participation and for the excused member to provide written input into the development of the IEP to the parent and the IEP Team prior to the meeting. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance.

\*Please note when conducting internal monitoring, the 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).
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<b>Progress Report Due Date(s):</b>
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01/05/2018
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03/16/2018
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## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> SE 13 Progress Reports and content	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of student records indicated that progress report information sent to parents does not always include written information on the student's progress towards the annual goals in the IEP.	
<b>Description of Corrective Action:</b> <p>The Student Services Office will create and distribute a chart indicating when special education progress reports are due at each level (preschool, elementary, middle, &amp; high school). Each level has different reporting periods due to some levels being on trimester, some on quarters, others on semesters. This will be created during an administrative program head leadership meeting with the Director of Student Services.</p> <p>The progress report due dates along with the specific information that needs to be written in the progress reports will be reviewed with each building principal or assistant principals and all special education liaisons including related service providers. It will be reviewed by each team chair with their special education liaisons at a monthly department meeting by 2/01/2018. Team chairs will stress that every goal must include the students' progress toward achieving the goal and that each objective must be commented on with respect to the progress the student has achieved (data).</p> <p>Creation of a Procedural Manual for all liaisons will include section on progress reports (9/01/2018). The manual will include specifically that data towards achieving each and every objective/benchmark must be included for every goal in each progress report for each specific goal.</p>	
<b>Title/Role(s) of Responsible Persons:</b> Director of Student Services Team Chairs Principals	<b>Expected Date of Completion:</b> 02/01/2018
<b>Evidence of Completion of the Corrective Action:</b> <p>Chart indicating when progress reports will be generated at each level along with descriptions that data to show each students' progress for each goal &amp; all objective must be included.</p> <p>Agenda &amp; attendance sheets from team chair meeting and special education staff meetings.</p> <p>Sample of progress reports completed at each level will be shared with DESE for compliance that each goal has a written narrative addressing progress for all objectives.</p> <p>Procedural manual for all special education liaisons (by 9/01/2018)</p>	
<b>Description of Internal Monitoring Procedures:</b>	

Progress reports at each level for each reporting period will be reviewed randomly by the Director of Student Services, Assistant Director and/or Team Chairs. Log of compliance for each goal being reported will be kept and shared with DESE.

Chart with progress report due dates and description of what needs to be included for each goal will be completed and shared at the beginning of each school year with all special education staff at all levels.

Procedural manual for all special education liaison's (by 9/01/2018)

### **CORRECTIVE ACTION PLAN APPROVAL SECTION**

**Criterion:**  
SE 13 Progress Reports and content

**Corrective Action Plan Status:** Approved  
**Status Date:** 11/15/2017  
**Correction Status:** Not Corrected

**Basis for Decision:**

**Department Order of Corrective Action:**

**Required Elements of Progress Report(s):**

By January 5, 2018, submit evidence of training provided to appropriate staff to ensure that progress report information sent to parents always includes written information on the student's progress towards the annual goals in the IEP. Please include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.

By March 16, 2018, submit the results of an internal review of records to ensure that progress report information sent to parents always includes written information on the student's progress towards the annual goals in the IEP. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance.

\*Please note when conducting internal monitoring, the 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):**

01/05/2018

03/16/2018

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> SE 18B Determination of placement; provision of IEP to parent	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of student records indicated that while the district provides the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice, these documents are not consistently provided immediately following the development of the IEP.	
<b>Description of Corrective Action:</b> <p>Review of regulation and training will be provided to special ed administrators by the Director of Student Services by 11/15/17 regarding the time line to provide parents with IEP's following a Team meeting. Agenda will focus on timeline for sending IEP to parents/guardians, team meeting summary form, and 2 copies of the complete IEP needs to be sent home. District has a summary form that is utilized which is provided to the parents at the meeting. This form outlines the goal areas and service delivery grid. Procedure for documenting on N1 under "enclosures" 2 copies of the IEP being sent will be reviewed.</p> <p>The Team chairs will review this same information with all liaisons and related service providers. In addition, a memo will be sent to all liaisons/service providers that completed proposed IEP with any changes from the team meeting must be sent to the Student Services office for their team chair to sign as LEA no later than 3-school days after the IEP meeting date. It will also include the need to document on the N1 the enclosures (2 complete IEP's, etc.) since liaisons are responsible for sending proposed IEPs with the N1 to the Team Chairs for signature.</p> <p>Directive by the Director of Student Services was given to the support secretary last school year when the Director first came to the district. This directive will be reviewed with the support secretary again to ensure 2 complete copies of the IEP are sent to parents. Discussion will occur regarding the need to document on the N1 the enclosures (2 complete IEP's, etc.). The support secretary will check all N1s sent to her to send out to parents to ensure 2 copies of IEPs is included under "enclosures" on the N1 form. A log of liaisons who omit documenting 2 copies included will be kept. Follow up by the team chair (administrator) with such liaisons will occur.</p> <p>Team Chairs will regularly monitor the time line for each of their responsible schools to ensure compliance by regular meetings with liaisons and file reviews. The team chairs will meet regularly with any liaison that continues to struggle with compliance in order to develop a system to ensure compliance.</p> <p>Team chairs will educate all special education staff of this regulation at monthly staff meetings to ensure staffs are aware of the need to comply with this regulation.</p>	

Student Services will create a procedural manual for all special education staff (by 9/01/2018). It will include a section on time lines and the necessary documentation required.	
<b>Title/Role(s) of Responsible Persons:</b> Director of Student Services, Ass't Dir, Team Chairs, liaisons, & support secretaries	<b>Expected Date of Completion:</b> 02/01/2018
<p><b>Evidence of Completion of the Corrective Action:</b> Attendance sheets, agenda &amp; any handouts will be provided from Team Chair meeting and special education staff meetings.</p> <p>Support Secretary reviews all proposed IEP &amp; documents before mailing to parents. The secretary will check to ensure all compliance documentation is noted and included. The secretary will keep a log of any liaisons who miss any necessary documentation and the respective Team chair will follow up with the liaisons.</p> <p>Copy of district's Team meeting summary form will be included in all IEP packets and files.</p> <p>Random file reviews (quarterly) by team chairs (administrators), Director of Student Services and/or Assistant Director of Student Services to ensure compliance with timelines (date on N1 is within the time line from the meeting date). Samples from each level and/or school will be included. Documentation of 2 copies of IEP sent will be reviewed on N1 under "enclosures" to ensure compliance.</p> <p>Procedural manual for all ETF's (by 9/01/2018)</p> <p><b>Description of Internal Monitoring Procedures:</b> Frequent review (at least quarterly) files to check for time line of IEP being sent, documentation that 2 copies of the IEP were sent, and copy of the Team meeting summary form are within compliance after Team meetings will be completed by Director of Student Services, Assistant Director, and/or Team Chairs.</p> <p>If compliance issues continue at any particular level and/or school, a plan will be implemented for the team chair to meet weekly with that liaison to devise system to ensure IEP's are sent to parents within the necessary time lines and the necessary documentation is included on the N1.</p> <p>Check system in place by the support secretary who processes the IEPs and necessary documents to be sent to parents. The secretary will keep a log of cases and the liaisons of any compliance issues. The administrative team chair for the liaisons will follow up and develop a compliance plan if necessary.</p> <p>Procedural manual for all special education staff (by 9/01/2018)</p>	

CORRECTIVE ACTION PLAN APPROVAL SECTION	
<b>Criterion:</b> SE 18B Determination of placement; provision of IEP to parent	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> <p>By January 5, 2018, submit evidence of training conducted for appropriate staff to ensure the district provides the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice immediately following the development of the IEP. Please include the training materials, agenda, and signed attendance sheet with staff name, role and signature.</p> <p>By March 16, 2018, submit the results of an internal review of records to ensure that the district provides the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice immediately following the development of the IEP. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance.</p> <p>*Please note when conducting internal monitoring, the 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).</p>	
<b>Progress Report Due Date(s):</b> 01/05/2018 03/16/2018	

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> SE 20 Least restrictive program selected	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of student records indicated that when a student is removed from the general education classroom at any time, the Team does not always state why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily.	
<b>Description of Corrective Action:</b> <p>The Director of Student Services will review &amp; discuss the need to individualize and document effects of removing a student from the general education setting under the Nonparticipation Justification section of the IEP at Team chair meeting by 11/15/2017. A PowerPoint Slide from the Writing Effective IEPs training provided to all liaisons during the 2016-2017 school year will be reviewed along with the Non-participation Justification handout. The Director will review the importance for the Team to discuss/consider the LRE environment in which the student can access the curriculum taking into account all aspects of learning (language, social emotional, social skills, behavior needs, etc.). The Team needs consider all impacts when determining a student needs be removed from the general education setting.</p> <p>The Team Chairs will then review with the special education liaisons &amp; related service providers in their schools the compliance of SE 20. Liaisons will be given a copy of sample Non-participation Justification statements to review and discuss how they met the compliance criteria.</p> <p>The Team chairs are responsible for reviewing the proposed IEP when liaisons send it to them for signature. The Team chairs will check/read all non-participation justification statements to ensure they contain individualized details as to why the student must be removed from gen. ed. setting. They will note any liaison who needs additional support in this area and will schedule a time to review with them.</p>	
<b>Title/Role(s) of Responsible Persons:</b> Director of Student Services, Assistant Dir, & Team Chairs	<b>Expected Date of Completion:</b> 02/01/2018
<b>Evidence of Completion of the Corrective Action:</b> Attendance sheet, agenda & any handouts from the administrative Team Chair meeting and the liaison & related service providers department meeting with the Team Chairs.	
<b>Description of Internal Monitoring Procedures:</b> <p>Annual review of Nonparticipation Justification statements in IEP's and the need to individualize the statement to the needs of the student at monthly liaison department meetings.</p> <p>Team chairs will work with the liaisons &amp; related service providers on examples and assist in cases.</p>	

Random file reviews (all levels) to check this section of the IEP for compliance by the Director of Student Services, Assistant Director and/or Team chairs.

Special Education Procedural Manual will contain information regarding the compliance of Non-participation Justification. Completion of manual for all liaisons by 9/1/2018.

### **CORRECTIVE ACTION PLAN APPROVAL SECTION**

**Criterion:**

SE 20 Least restrictive program selected

**Corrective Action Plan Status:** Approved

**Status Date:** 11/15/2017

**Correction Status:** Not Corrected

**Basis for Decision:**

**Department Order of Corrective Action:**

**Required Elements of Progress Report(s):**

By January 5, 2018, submit evidence of training provided to appropriate staff to ensure that the when a student is removed from the general education classroom at any time, the Team states why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Please include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.

By March 16, 2018, submit the results of an internal review of records to ensure that the when a student is removed from the general education classroom at any time, the Team states why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance.

\*Please note when conducting internal monitoring, the 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):**

01/05/2018

03/16/2018

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> 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	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of student records indicated that the school district's Notice of Proposed School District Action (N1) does not always include all required elements, specifically: a description of the action proposed or refused by the school district; an explanation of why the school district proposed or refused to take the action; a description of each evaluation procedure, test, record or report; a description of any other options that the school district considered and the reasons why those options were rejected; and other factors the school district used as a basis for the proposed or refused action.	
<b>Description of Corrective Action:</b> <p>The Director of Student Services will discuss with the Team chairs at one of the bi-weekly leadership team meetings the need to provide more details and specific information in the N1's following a Team meeting. Focus will be on including details to answer all required questions in the N1 form.</p> <p>Director of Student Services along with the Team Chairs will provide a mini-workshop with the agenda focusing on writing effective N1s for the liaisons &amp; related service providers at a monthly meeting the need to answer all required questions in all N1's. Following this mini-workshop on writing specific N1's, the Team chairs will follow up individually with each liaison and review/discuss actual N1's written by each liaison. Time will focus on this top on one of the department professional development early release days as well.</p> <p>Creation of procedural manual for all special education liaisons (by 9/01/2018). It will include a section on IEP's and N1.</p>	
<b>Title/Role(s) of Responsible Persons:</b> Director of Student Services, Assistant Dir, Team Chairs	<b>Expected Date of Completion:</b> 04/30/2018
<b>Evidence of Completion of the Corrective Action:</b> <p>Attendance &amp; agendas from Team Chair and liaison meetings indicating subject of writing N1s was reviewed.</p> <p>Random sample of N1's will be reviewed by Team Chairs as they sign IEPs to send out. Team Chairs will address any issues with specific liaisons as necessary.</p> <p>Procedural manual for all special education staff's (by 9/01/2018). Information regarding writing effective N1s will be a section.</p>	
<b>Description of Internal Monitoring Procedures:</b> <ul style="list-style-type: none"> <li>- Frequent review of N1's at monthly liaison meetings (Agenda item at least quarterly).</li> <li>- Ongoing mentoring by Team chairs with individual liaisons regarding effective N1 writing.</li> </ul>	



<ul style="list-style-type: none"> <li>- Team Chairs will determine which liaisons need further support with writing specific N1's addressing all required questions.</li> <li>- Director of Student Services and/or assistant director will randomly pull N1's to review from all levels (preschool, elementary, middle &amp; high school).</li> <li>- Procedural manual for all special education staff (by 9/01/2018)</li> </ul>	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> 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	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> <p>By January 5, 2018, submit evidence of training provided to appropriate staff to ensure that the school district's Notice of Proposed School District Action (N1) includes all required elements, specifically: a description of the action proposed or refused by the school district; an explanation of why the school district proposed or refused to take the action; a description of each evaluation procedure, test, record or report; a description of any other options that the school district considered and the reasons why those options were rejected; and other factors the school district used as a basis for the proposed or refused action. Please include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.</p> <p>By March 16, 2018, submit the results of an internal review of records to ensure that the school district's Notice of Proposed School District Action (N1) includes all required elements, specifically: a description of the action proposed or refused by the school district; an explanation of why the school district proposed or refused to take the action; a description of each evaluation procedure, test, record or report; a description of any other options that the school district considered and the reasons why those options were rejected; and other factors the school district used as a basis for the proposed or refused action. Please include the following: 1) the number of records reviewed; 2) the number of records in compliance; 3) for any records not in compliance, determine the root cause; and 4) the specific corrective actions taken to remedy the non-compliance.</p> <p>*Please note when conducting internal monitoring, the 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).</p>	
<b>Progress Report Due Date(s):</b> 01/05/2018 03/16/2018	

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> SE 32 Parent advisory council for special education	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents, as well as parent and staff interviews, indicated that while the district has an established parent advisory council on special education, the council does not have by-laws regarding officers and operational procedures. Additionally, the parent advisory council duties do not include advising the district on matters that pertain to the education and safety of students with disabilities; and meeting regularly with school officials to participate in the planning, development, and evaluation of the school district's special education programs. Parent and staff interviews also indicated that the school district does not conduct, in cooperation with the parent advisory council, at least one workshop annually within the district on the rights of students and their parents and guardians under the state and federal special education laws.	
<b>Description of Corrective Action:</b> <p>Prior to the 2016-2017 school year the district did not have an active SEPAC group. There was only an online group.</p> <p>The district worked to establish a new SEPAC during the 2016-2017 school year. A few meetings were held. A group of interested parents worked to plan/structure for the 2017-2018 school year. This group is acting as an interim board.</p>	
<b>Title/Role(s) of Responsible Persons:</b> Director of Student Services	<b>Expected Date of Completion:</b> 02/01/2018
<b>Evidence of Completion of the Corrective Action:</b> <p>Monthly meetings have been established and posted for the 2017-2018 school year. At the first meeting on 9/26/17 the parents adopted the last set of by-laws from the last time the district had an active SEPAC. Regular meetings are scheduled on a monthly basis between the Director of Student Services and the interim SEPAC board.</p> <p>The interim SEPAC board has asked for 2 parent liaison volunteers for from each school to represent SEPAC and share information with the schools.</p> <p>There is a liaison representative from the School Committee for SEPAC.</p> <p>A membership to MassPAC has been purchased by the district. The basic rights workshop is being scheduled for this fall.</p> <p>An election is scheduled to be held in January 2018 to elect new SEPAC Board Members.</p> <p>Evidence:</p> <ol style="list-style-type: none"> <li>1. Copies of the SEPAC meeting agendas</li> </ol>	

2. Creation of SEPAC web page attached to the Student Services page listing contact information for board, resources for parents,& meeting minutes. 3. Creation of a SEPAC email. 4. DESE chairperson can contact/interview SEPAC parents.	
<b>Description of Internal Monitoring Procedures:</b> Director of Student Services will work with the SEPAC board to ensure monthly public SEPAC meetings are scheduled each school year.  Planning meeting will be scheduled on a regular basis with the Director of Student Services and SEPAC board.  SEPAC website page attached to the District's Student Services page will be maintained.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> SE 32 Parent advisory council for special education	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By March 16, 2018, submit evidence that the special education parent advisory council has developed by-laws regarding officers and operational procedures. Additionally, provide evidence that the school district, in cooperation with the parent advisory council, conducts at least one workshop annually within the district on the rights of students and their parents and guardians under the state and federal special education laws. Please include the workshop materials, agenda, and signed attendance sheet.  By June 1, 2018, provide evidence that the special education parent advisory council has fulfilled the following duties: 1) advising the district on matters that pertain to the education and safety of students with disabilities and 2) meeting regularly with school officials to participate in the planning, development, and evaluation of the school district's special education programs.	
<b>Progress Report Due Date(s):</b>  03/16/2018 06/01/2018	

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> SE 34 Continuum of alternative services and placements	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents and staff interviews indicated that the district does not have a continuum of alternative services and placements at the elementary school level (grades k-4) for students with disabilities that impact social-emotional functioning and present with behaviors that impact learning. Students with this profile at the middle and high school levels have access to a variety of social emotional supports, which include the Students Assistance Program that is staffed by special educators, related service providers, paraprofessionals, and clinicians. Students with similar disabilities at the elementary level, however, receive services from a part-time clinical psychologist who is shared between two schools. Staff interviews indicated that, in absence of the clinical psychologist, staff members at the elementary level are frequently pulled from their duties to support students with this profile, which impacts the fidelity of service delivery to students. Similar disruptions to services do not occur regularly at the middle or high school levels.	
<b>Description of Corrective Action:</b> While the District has social emotional supports in place K-12, there is not a therapeutic special education program at the elementary level (K-4) like the Student Assistance Program at the middle & high school levels.	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Director of Student Services Team Chairs	<b>Expected Date of Completion:</b> 09/01/2018
<b>Evidence of Completion of the Corrective Action:</b> Full-time clinical (doctorate level) psychologists are at each elementary school as of September 2017. This allows for additional social emotional supports for elementary students that were not available in the past.  Research therapeutic programs in area districts to gather data on various service delivery models and supports.  Form a committee of key stakeholders (elementary principals, counselors, psychologists, special ed teachers, team chairs, etc). to discuss social emotional programming at the elementary level.  Identify a special education teacher or counselor in each elementary school that can provide a supportive classroom space for students with social and emotional needs.	
<b>Description of Internal Monitoring Procedures:</b> Director of Student Services will review annually the continuum of programming across all levels in the district in preparation for each new school year based on the needs of the students.	

CORRECTIVE ACTION PLAN APPROVAL SECTION	
<b>Criterion:</b> SE 34 Continuum of alternative services and placements	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By January 5, 2018, submit a description of the programmatic needs at the elementary school level (grades K-4) for students with disabilities that impact social-emotional functioning and present with behaviors that impact learning.  By March 16, 2018, submit a proposal to meet the programmatic needs, at elementary school level, for students with disabilities that impact social-emotional functioning and present with behaviors that impact learning.  By June 1, 2018, submit evidence that the proposal has been implemented. This may include program descriptions, staffing changes, and service schedules. Provide evidence of dissemination of information regarding the programmatic changes to appropriate elementary school level staff and parents.	
<b>Progress Report Due Date(s):</b> 01/05/2018 03/16/2018 06/01/2018	

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> SE 54 Professional development	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents and staff interviews indicated that general education staff do not receive training on state special education requirements and related local special education policies and procedures.	
<b>Description of Corrective Action:</b> 1. Special education administrators will present & discuss special education topics (accommodations, differentiation, MA & federal requirements, district's DECAP, co-teaching, etc) at a minimum of 2 faculty meetings annually.  2. Special education administrators will develop a training module for general education teachers on special education topics, policies and procedures.  3. Director of Student Services is developing a workshop/course for teachers on special education topics to offer to interested general education teachers.  4. At least monthly discussions among grade level teams during common planning time regarding specific students and implementation of accommodations, co-teaching strategies, and/or differentiation of instruction for students will take place at each school.	
<b>Title/Role(s) of Responsible Persons:</b> Director of Student Services, Principals, Team Chairs, Assistant Superintendent	<b>Expected Date of Completion:</b> 06/30/2018
<b>Evidence of Completion of the Corrective Action:</b> Agenda's for each school faculty meetings. Signed attendance sheets for each school. Minutes from common planning time relative to topic Copy of handouts/PowerPoint presentations (as applicable)	
<b>Description of Internal Monitoring Procedures:</b> Documentation (agendas, handouts, attendance) of all training including dates will be completed by May 30, 2018  Director of Student Services will include SE 54 on beginning of school year agenda with Team chairs to ensure implementation each year.  Director of Student Services will discuss SE54 with all principals at least yearly and review the need to have topic on at least 2 school faculty meetings annually.  Special education training module will have a sign off component.	

CORRECTIVE ACTION PLAN APPROVAL SECTION	
<b>Criterion:</b> SE 54 Professional development	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By January 5, 2018, submit evidence of training provided to general education staff on state and federal special education requirements and related local special education policies and procedures. Please include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.	
<b>Progress Report Due Date(s):</b> 01/05/2018	

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> SE 55 Special education facilities and classrooms	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> Observations indicated that at the high school, there is a cluster of special education classrooms which house the Resource Room (grades 9-12), Learning Center (grades 9-12), and Student Assistance Program (grades 9-12). This cluster is isolated from general education instructional areas. Interviews indicated that staff refer to this wing as the "Special Education Department."	
<b>Description of Corrective Action:</b> The entire high school classrooms have been reassigned. The special education classrooms are now spread out among all the other general education classrooms in the school. This reconfiguration took place over the summer (2017) by the high school principal, deans and high school special ed team chair administrator.	
<b>Title/Role(s) of Responsible Persons:</b> High School Principal Director of Student Services High School Deans High School Team Chair	<b>Expected Date of Completion:</b> 11/01/2018
<b>Evidence of Completion of the Corrective Action:</b> Invite the DESE chairperson for a site visit of the high school.	
<b>Description of Internal Monitoring Procedures:</b> Monitor by building principals, special education team chairs and director of student services.  Director of Student Services will discuss/review compliance for the location of special education teaching spaces to not be located in the same wing/area in schools as well as ensure they are free of auditory & visual distractions and the stigmatization of signs indicating special education classrooms with district principals annually (before the start of each school year). Special education Team Chairs and/or Director of Student Services will routinely make site visits to ensure compliance.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> SE 55 Special education facilities and classrooms	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By January 5, 2018, provide floor plans of the high school to document the changes made with regards to the placement of classrooms that house the Resource Room (grades 9-12), Learning Center (grades 9-12), and Student Assistance Program (grades 9-12).	



By January 5, 2018, a representative of the Department will schedule and conduct an onsite visit at the high school to review facilities and verify completion of corrective actions.

**Progress Report Due Date(s):**

01/05/2018

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 3 Access to a full range of education programs	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents and staff interviews indicated that while the district ensures all students, regardless of race, color, sex, religion, or national origin, have equal access to the general education program and the full range of any occupational/vocational education programs offered by the district, this assurance does not include gender identity, sexual orientation, disability, and homelessness as protected categories.	
<b>Description of Corrective Action:</b> The district will update documents that refer to educational program access to include "gender identity, sexual orientation, disability and homelessness" as protected categories	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent Director of Personnel Director of Student Support	<b>Expected Date of Completion:</b> 09/13/2018
<b>Evidence of Completion of the Corrective Action:</b> 1) Agendas from meetings 2) List of documents that need revision 3) Completed documents	
<b>Description of Internal Monitoring Procedures:</b> 3/30/18: Put on School Committee agenda by March 4/30/18: Complete final drafts of policies 5/30/18: Print new policies , when necessary 6/30/18: update websites.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> CR 3 Access to a full range of education programs	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By June 1, 2018, provide evidence that the protective classes of gender identity, sexual orientation, disability, and homelessness have been included in the school committee approved non-discrimination policy. Also provide evidence of dissemination of the revised non-discrimination policy to the school community, inclusive of staff, students, and parents. Additionally, submit a description of the district's internal monitoring and tracking protocols that ensure future compliance. Include the roles of those responsible for implementation and the dates of initial implementation.	
<b>Progress Report Due Date(s):</b>  06/01/2018	

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 7 Information to be translated into languages other than English	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents and staff interviews indicated that important information and documents, such as handbooks and codes of conduct, distributed to parents are not always translated into the major languages spoken by parents or guardians with limited English skills.	
<b>Description of Corrective Action:</b> 1. Interpretation Services for Parent Teacher Conferences - We currently contract with Cross Cultural Communications Systems, Inc. to provide interpreters for parent teacher conferences and a variety of other school meetings. 2. Communication with parents - We plan to contract with in-house staff/outside contractor (Cross Cultural Communications Systems, Inc.) to provide translations of vital school documentation.	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent ELL Director	<b>Expected Date of Completion:</b> 09/13/2018
<b>Evidence of Completion of the Corrective Action:</b> 1. Communicate with staff about the availability of translation services 2. Vital documents translated by in house staff/contracted services	
<b>Description of Internal Monitoring Procedures:</b> 1. Communicate with staff about translation options 2. Translated documents saved and accessible on-line	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> CR 7 Information to be translated into languages other than English	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By March 16, 2018, provide a description of procedures to ensure that important information and documents, such as handbooks and codes of conduct, distributed to parents are always translated into the major languages spoken by parents or guardians with limited English skills. Provide evidence of training for appropriate staff on these procedures. Please include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.	
<b>Progress Report Due Date(s):</b>  03/16/2018	

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 7B Structured learning time	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents and staff interviews indicated that the district requires that students in grades nine through twelve take a total of two semesters of physical education instead of the required four years.	
<b>Description of Corrective Action:</b> Our current program of studies has a three year requirement of PE with the additional requirement of grade 11/12 students before graduation beginning with the class of 2019. We are in the process of reviewing the program of studies to include the 4th year requirement to begin a phase-in with the class of 2021.	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent HS Principal Department Coordinator of PE/Health/FCS	<b>Expected Date of Completion:</b> 09/13/2018
<b>Evidence of Completion of the Corrective Action:</b> A HS Program of Studies with 4 year requirement.	
<b>Description of Internal Monitoring Procedures:</b> Use of the HS building leadership team consisting of HS principal, deans, department coordinators, assistant superintendent, and HS scheduler to meet the requirement as well as the additional HS requirements to meet a comprehensive curriculum.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> CR 7B Structured learning time	<b>Corrective Action Plan Status:</b> Disapproved <b>Status Date:</b> 11/13/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b> The district proposed phasing in this requirement with the class of 2021 only. While the Department understands that the class of 2021 will be the first class able to complete the four-year requirement, all Chelmsford public schools students in grades 9-12 are required to take physical education. This requirement cannot be phased-in as all findings of noncompliance must be corrected within one year of the issuance of the finding. Therefore, by September 12, 2018, all students in grades 9-12 who attend Chelmsford Public Schools are expected to participate in physical education.	
<b>Department Order of Corrective Action:</b> Ensure that physical education shall be taught as a required subject to all students in grades 9-12 who attend Chelmsford Public Schools within one year of the issuance of the finding of noncompliance.  For more information regarding this requirement, please see: M.G.L Chapt. 71, sec 3, <a href="https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXII/Chapter71/Section3">https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXII/Chapter71/Section3</a>	
<b>Required Elements of Progress Report(s):</b> By January 5, 2018, provide a letter of assurance from the superintendent indicating that within one year of the issuance of the finding of noncompliance, physical education will be a required course for all district students in grades 9-12.	

By June 1, 2018, submit the program of studies for the 2018-2019 school year that indicates high school students receive physical education in grades 9-12, as required.

**Progress Report Due Date(s):**

01/05/2018

06/01/2018

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 7C Early release of high school seniors	<b>CPR Rating:</b> Not Implemented
<b>Department CPR Findings:</b> A review of documents and staff interviews indicated that high school seniors are released more than twelve days before the regular scheduled closing date of the high school.	
<b>Description of Corrective Action:</b> A review of the school calendar will be completed to in order to ensure that seniors were not released more that twelve days before the regular scheduled closing.	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent HS Principal	<b>Expected Date of Completion:</b> 09/13/2018
<b>Evidence of Completion of the Corrective Action:</b> A compliant school calendar.	
<b>Description of Internal Monitoring Procedures:</b> Review of calendar at both the district and HS level teams prior to school committee approval.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> CR 7C Early release of high school seniors	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By June 1, 2018, provide evidence that the conclusion of the seniors' school year nor graduation is more than 12 school days before the regular scheduled closing date of that school.  Implementation Guidance: Per 603 CMR 27.05, school districts are encouraged to schedule high school graduation as close as possible to the scheduled closing date of the high school, and graduation may be held up to twelve days before the regularly scheduled closing date. The earliest permissible release day for seniors is twelve school days prior to the regularly scheduled closing date of the school, which means that high schools operating on a 180 day year for students may release the seniors as early as the 168th day of school. If the date for high school graduation has been set and subsequently a few more days are added to the school year to make up for snow days or other emergencies, the original graduation date does not need to be changed, as long as it is no more than twelve school days before the originally scheduled closing date for the school year.	
<b>Progress Report Due Date(s):</b>  06/01/2018	



## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 10A Student handbooks and codes of conduct	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> <p>A review of documents and staff interviews indicated that student handbooks and the code of conduct are not always translated by the district when requested by parents or students whose primary language is other than English.</p> <p>A review of documents indicated that while student codes of conduct published in student handbooks contain appropriate procedures for the discipline of students who have Individualized Education Plans, they do not include procedures for students who have Section 504 Accommodation Plans.</p> <p>A review of documents also indicated that although handbooks affirm the school's non-tolerance for harassment based on race, color, national origin, sex, and religion, or discrimination on those same bases, this statement does not include gender identity or sexual orientation.</p>	
<b>Description of Corrective Action:</b> 1. Communication with parents - We plan to contract with in-house staff/outside contractor (Cross Cultural Communications Systems, Inc.) to provide translations of vital school documentation.  2. Handbook will be revised to include the district's non-tolerance for harassment based on gender identity or sexual orientation.	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent Director of Student Services ELL Director Principals	<b>Expected Date of Completion:</b> 09/13/2018
<b>Evidence of Completion of the Corrective Action:</b> 1. Vital documents translated by in house staff/contracted services  2. Handbook will be revised to include the district's non-tolerance for harassment based on gender identity or sexual orientation  3. Code of conduct will be revised to update the procedures for students who have Section 504 plans.  4. Updated handbooks will be available on the district website for review.	
<b>Description of Internal Monitoring Procedures:</b> 1. Translated documents saved and accessible on-line.	



2. Annual review of the district's handbooks will be conducted by the Central Office Leadership team and communication about updates to procedures/laws will be reviewed annual with our attorneys.

### CORRECTIVE ACTION PLAN APPROVAL SECTION

**Criterion:**  
CR 10A Student handbooks and codes of conduct

**Corrective Action Plan Status:** Approved  
**Status Date:** 11/15/2017  
**Correction Status:** Not Corrected

**Basis for Decision:**

**Department Order of Corrective Action:**

**Required Elements of Progress Report(s):**

By June 1, 2018, submit relevant sections the school code of conduct, approved by the school committee, as evidence that it contains: 1) procedures assuring due process in disciplinary proceedings; 2) the district's responsibility to provide every student with an opportunity to make academic progress during the period of suspension whether in-school, out-of-school, or expulsion; and 3) appropriate procedures for the discipline of students with disabilities and students with Section 504 Accommodation Plans.

By June 1, 2018, submit relevant sections of the revised student handbooks, approved by the school committee, as evidence that the non-discrimination statement includes include gender identity and sexual orientation as a protected category. Additionally, provide evidence of dissemination of the revised code of conduct and non-discrimination policy to the school community, inclusive of staff, students, and parents.

By June 1, 2018, submit evidence that student handbooks and the code of conduct are translated by the district when requested by parents or students whose primary language is other than English.

**Progress Report Due Date(s):**

06/01/2018

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 10B Bullying Intervention and Prevention	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> <p>A review of documents indicated that the school handbooks are not consistent with the amendments to the Massachusetts anti-bullying law. Specifically, handbooks do not make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. Relevant policies, such as school committee policy 6202 entitled "Bullying Prevention" and procedures related to the school's anti-bullying plan are not included in student handbooks.</p> <p>A review of documents and staff interviews indicated that the district does not have an employee handbook that contains relevant sections of the amended Plan relating to the duties of faculty and staff and relevant provisions addressing the bullying of students by a school staff member.</p>	
<b>Description of Corrective Action:</b> 1) Committee formed to review law and discuss how adult responsibilities regarding bullying and harassment can best be communicated. 2) Language will be crafted that can be included in all student handbooks 3) Employee handbook will be created and will include duties of staff related to addressing bullying or harassment of students by a school staff member	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent Director of Personnel	<b>Expected Date of Completion:</b> 08/30/2018
<b>Evidence of Completion of the Corrective Action:</b> 1) Meeting agendas 2) Memo regarding language additions to handbook 3) Revised handbooks 4) Employee handbook	
<b>Description of Internal Monitoring Procedures:</b> 11/30: At least 4 employee handbooks collected from other districts 12/30: Committee assembled as proven by at least one meeting agenda 2/30: Internal memo updating language that has been discussed and where we are in the process of including that language in handbooks 3/30 First draft of employee handbook ready for review 5/15: Employee handbook completed and ready for distribution to new hires. 7/15: Student handbooks finalized at end of school year in preparation for upcoming school year.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> CR 10B Bullying Intervention and Prevention	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	

**Required Elements of Progress Report(s):**

By June 1, 2018, submit the relevant sections of the revised student and employee handbooks, approved by the school committee, as evidence that these documents make clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. Provide evidence that the relevant portions of the Bullying Prevention and Intervention Plan are included in these handbooks and have been disseminated to the school community, inclusive of staff, students, and parents. Additionally, provide evidence that relevant sections of the amended Bullying Prevention and Intervention Plan relating to the duties of faculty and staff and relevant provisions addressing the bullying of students by a school staff member have been included in the employee handbook.

**Progress Report Due Date(s):**

06/01/2018

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 10C Student Discipline	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents indicated that the district's Notice of Suspension and Hearing to students and parents does not contain all required elements. Specifically, the notice does not address the disciplinary offense; the basis for the charge; the potential consequence; the opportunity for a hearing to dispute the charges, present an explanation, and for the parent to attend; and the date, time and location of the hearing. The notice does not address both the right of the student and the parent to interpreter services and the right to appeal to the superintendent.	
<b>Description of Corrective Action:</b> The district will hold a training on discipline procedures and required documentation for all school administrators. There was not a consistent template of letters outlining the required elements. Not all schools were consistently following compliance for suspensions.	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Principals Director of Student Services Team Chairs	<b>Expected Date of Completion:</b> 08/30/2018
<b>Evidence of Completion of the Corrective Action:</b> Discipline training with all principals, assistant principals, and deans focusing on the required documentation/elements. A discipline binder will be created for each building administrators containing the regulations and sample letters containing the elements required when issuing a Notice of Suspension. School administrators will follow the discipline procedure outline in the binder and utilize the sample letters which contain the elements required. Copies of the agenda, PowerPoint (if applicable) and attendance sign in sheet.	
<b>Description of Internal Monitoring Procedures:</b> The Superintendent and/or Director of Student Services will review randomly discipline documentation from each school to ensure compliance.  Annual review of the discipline procedures will occur at a leadership meeting in the late summer/early fall.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> CR 10C Student Discipline	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By January 5, 2018, submit a sample of the district's Notice of Suspension and Hearing to students and parents that sets forth in plain language: the disciplinary offense; the basis for the charge; the potential consequences, including the potential length of the student's	

suspension; the opportunity for the student to have a hearing with the principal concerning the proposed suspension, including the opportunity to dispute the charges and to present the student's explanation of the alleged incident, and for the parent to attend the hearing; the date, time, and location of the hearing; the right of the student and the student's parent to interpreter services at the hearing if needed to participate; if the student may be placed on long-term suspension following the hearing with the principal:

1. the rights set forth in 603 CMR 53.08 (3)(b); and
2. the right to appeal the principal's decision to the superintendent.

By March 16, 2018, submit the results of an internal review of records, if any, of students suspended from school to ensure that district's Notice of Suspension and Hearing to students and parents contain all the required elements. Please include the following: the number of records reviewed; the number of records in compliance; for any records not in compliance, determine the root cause; and the specific corrective actions taken to remedy the non-compliance.

\*Please note when conducting internal monitoring, the 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):**

01/05/2018

03/16/2018

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 12A Annual and continuous notification concerning nondiscrimination and coordinators		<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of the district and individual school websites used to publicize the schools indicated that nondiscrimination statements are not included.		
<b>Description of Corrective Action:</b> The district's website needs to be updated to include nondiscrimination statements on each school and district pages.		
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Director of Technology Director of Personnel		<b>Expected Date of Completion:</b> 09/13/2018
<b>Evidence of Completion of the Corrective Action:</b> Updated & revised website will include the nondiscrimination statements.		
<b>Description of Internal Monitoring Procedures:</b> Ongoing monitoring by the Director of Personnel and/or Director of Technology to ensure the website contains the necessary nondiscrimination statements.		
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>		
<b>Criterion:</b> CR 12A Annual and continuous notification concerning nondiscrimination and coordinators	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected	
<b>Basis for Decision:</b>		
<b>Department Order of Corrective Action:</b>		
<b>Required Elements of Progress Report(s):</b> By January 5, 2018, submit the relevant sections of the district and school websites to ensure that written materials and other media used to publicize a school include a notice that the school does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion, or sexual orientation.		
<b>Progress Report Due Date(s):</b> 01/05/2018		

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 18A School district employment practices	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents indicated that although the district's employment practices are free from discrimination on the basis of race, color, national origin, and sex, the School Committee policy on employment does not include gender identity and disability as protected categories in its nondiscrimination statement and the district's hiring manual does not include gender identity as a protected category.	
<b>Description of Corrective Action:</b> We will update our School Committee nondiscrimination statements and hiring manual to include gender identity and disability as protected categories	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent Director of Personnel	<b>Expected Date of Completion:</b> 05/30/2018
<b>Evidence of Completion of the Corrective Action:</b> 1) School Committee Agenda(s) 2) Emails documenting progress towards goals 3) Final School Committee Policy and hiring manual	
<b>Description of Internal Monitoring Procedures:</b> Winter 2018: Review with attorney Winter 2018: Get on School Committee agenda Spring 2018: Update, print and post new policy and complete hiring manual	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> CR 18A School district employment practices	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By June 1, 2018, submit evidence that the school committee policy on employment includes gender identity and disability as protected categories in its nondiscrimination statement. Likewise, submit evidence that the district's hiring manual includes gender identity as a protected category.	
<b>Progress Report Due Date(s):</b>  06/01/2018	

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> CR 25 Institutional self-evaluation	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents 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.	
<b>Description of Corrective Action:</b> Devise a method of annually evaluating constituent perspective on issues of equity across the district.	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent Director of Personnel	<b>Expected Date of Completion:</b> 09/13/2018
<b>Evidence of Completion of the Corrective Action:</b> Proposal of what could be done to accomplish this Develop a list of questions that could be asked of employees annually	
<b>Description of Internal Monitoring Procedures:</b> 02/30: Decide what to do to collect this data 04/30: Implement the data collection method	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> CR 25 Institutional self-evaluation	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> <p>By January 5, 2018, provide a description of procedures and copies of tools to conduct an annual self-evaluation of all aspects of its K-12 programs 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. Procedures must also ensure that the district provides recommendations, as necessary, for changes as indicated by the self-assessment.</p> <p>By March 16, 2018, provide evidence of training and/or dissemination of these tools and procedures to staff responsible for implementation. Please include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.</p> <p>By June 1, 2018, submit the results of the annual self-evaluation of all aspects of its K-12 programs 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</p>	



extracurricular activities. Please include recommendations, as necessary, for changes as indicated by the self-assessment.

**Implementation Guidance:**

At the time of the facilities observation, a representative of the Department will schedule a technical assistance meeting to review the ESE guidance resources such as "District Toolkit for Identifying and Addressing Curriculum Bias (CR24) & Equal Program Access (CR25)."

**Progress Report Due Date(s):**

01/05/2018

03/16/2018

06/01/2018

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> ELE 5 Program Placement and Structure	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> <p>A review of the Castañeda's Three-Pronged Test completed by the district and student data showing how much ESL instruction English learners (ELs) receive indicate that ELs at McCarthy Middle School and Col Moses Parker School do not receive as much ESL instruction as the district determined necessary for them to make adequate progress.</p> <p>A review of documents and staff interviews also indicated that the district uses Hampton Brown/National Geographic books for ESL instruction. While purchased materials can be used as resources, they cannot replace an ESL curriculum that districts are expected to develop in order to implement with fidelity the educational approach the district adopted for their ELE program and described in the Castañeda Three-Pronged Test. The district should note that an ESL curriculum is integral to an effective ELE program in which ELs become English proficient at a rapid pace. Please see <a href="http://www.doe.mass.edu/ell/Guidance.pdf">HYPERLINK "http://www.doe.mass.edu/ell/Guidance.pdf"</a> <a href="http://www.doe.mass.edu/ell/Guidance.pdf">http://www.doe.mass.edu/ell/Guidance.pdf</a></p>	
<b>Description of Corrective Action:</b> <p>1. ESL Staffing- The district will evaluate ESL staffing levels at all schools (including McCarthy Middle School and Col Moses Parker Middle School) during the 2018-2019 budgetary process to determine where the greatest staffing needs are for the upcoming school year and make employee recommendations.</p> <p>2. ESL Instruction- Goal is to improve/enhance programming by providing curricula with rigor that sets high academic standards for all students through all content areas that is aligned to the state standards. Curriculum planning will include language and literacy developed across the curriculum. Subject area and ESL teachers will dedicate planning time to develop integrated units of instruction using our current updates and aligned curriculum through Houghton Mifflin, McDougall and Pearson.</p>	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent of Schools Assistant Superintendent ELL Director	<b>Expected Date of Completion:</b> 09/13/2019
<b>Evidence of Completion of the Corrective Action:</b> <p>1. Budget proposal to add an additional staff member for the 2018-2019 school year based on data collected</p> <p>2. Summer Curriculum Writing opportunity for staff</p>	
<b>Description of Internal Monitoring Procedures:</b> <p>1. Evaluation of staffing levels and budget proposal</p> <p>2. Monitor Summer Curriculum Writing through proposal documents</p>	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> ELE 5 Program Placement and Structure	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	

<b>Department Order of Corrective Action:</b>
<p><b>Required Elements of Progress Report(s):</b>          By January 5, 2018 submit the following:</p> <ol style="list-style-type: none"> <li>1- Information about the process of developing ESL curriculum as well as the timeline that shows executive milestones of the project, estimated completion, and implementation timeframe. Please note that the plan should reflect the content to be taught and address the instructional needs of the EL population at all levels;</li> <li>2- Information regarding the roles and responsibilities of the staff who are assigned to the ESL curriculum project and their qualifications;</li> <li>3- A detailed plan that shows that ELs receive sufficient ESL instruction as determined in the Castañeda's Three-Pronged Test completed by the district. Provided that the district has made programmatic changes in terms of ELE service delivery, please revise the Castañeda's Three-Pronged Test and train all staff members involved in the education of ELs to ensure that they are knowledgeable about the program goals described in the Castañeda Test and the district's commitment to provide sheltered content instruction and ESL instruction to ELs. Submit the training materials, agendas, and sign-in sheets by the due date of the progress report and;</li> <li>4- The EL Roster form available in the Document Library to document ESL instruction ELs receive.</li> </ol>
<p><b>Progress Report Due Date(s):</b>          01/05/2018</p>

## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> ELE 7 Parent Involvement	<b>CPR Rating:</b> Partially Implemented
<b>Department CPR Findings:</b> A review of documents and staff interviews indicated that the district sometimes uses an online translator for written documents and does not provide interpretation services for parent-teacher conferences. Online translators do not accurately convey the meaning of the source document and should be reviewed and edited by an individual qualified to do so. The district does not meet the obligation to communicate effectively with parents whose preferred language of communication is not English and fails to include these parents of ELs in matters pertaining to their children's education.	
<b>Description of Corrective Action:</b> 1. Interpretation Services for Parent Teacher Conferences- We currently contract with Cross Cultural Communications Systems, Inc. to provide interpreters for parent teacher conferences and a variety of other school meetings. 2. Communication with parents- We plan to contract with in-house staff/outside contractor (Cross Cultural Communications Systems, Inc.) to provide translations of vital school documentation.	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent ELL Director	<b>Expected Date of Completion:</b> 09/13/2018
<b>Evidence of Completion of the Corrective Action:</b> 1. Communicate with staff about the availability of translation services 2. Vital documents translated by in house staff/contracted services	
<b>Description of Internal Monitoring Procedures:</b> 1. Check in with staff about translation options 2. Translated documents saved and accessible on-line	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> ELE 7 Parent Involvement	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By January 5, 2018, submit the following: 1-The district's written key procedures and processes to follow in securing a translator or an interpreter; 2- Processes the school district uses to identify limited English proficient parents; 3- A description of steps the school district takes to provide effective language assistance to parents whose preferred language is not English and; 4- A sample of translated documents for SY 2017-18.	
<b>Progress Report Due Date(s):</b> 01/05/2018	



## COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN

<b>Criterion &amp; Topic:</b> ELE 17 Program Evaluation	<b>CPR Rating:</b> Not Implemented
<b>Department CPR Findings:</b> A review of documents and staff interviews indicated that the district does not have a comprehensive process to evaluate the effectiveness of its ELE programming in developing students' English language skills and increasing their ability to participate meaningfully in the district's educational program. Please see <a href="http://www.doe.mass.edu/ell/ProgramEvaluation.pdf">HYPERLINK "http://www.doe.mass.edu/ell/ProgramEvaluation.pdf"</a> <a href="http://www.doe.mass.edu/ell/ProgramEvaluation.pdf">http://www.doe.mass.edu/ell/ProgramEvaluation.pdf</a> .	
<b>Description of Corrective Action:</b> Utilize DESE's recommended program evaluation template to assist in determining areas of strength and challenges in services provided to the ELL students. Implementation of an action plan based on data collected.	
<b>Title/Role(s) of Responsible Persons:</b> Superintendent Assistant Superintendent ELL Director	<b>Expected Date of Completion:</b> 09/13/2018
<b>Evidence of Completion of the Corrective Action:</b> *Team Established *Data collection *Create action plan *Data Analysis	
<b>Description of Internal Monitoring Procedures:</b> *Data Collection and analysis	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b>	
<b>Criterion:</b> ELE 17 Program Evaluation	<b>Corrective Action Plan Status:</b> Approved <b>Status Date:</b> 11/15/2017 <b>Correction Status:</b> Not Corrected
<b>Basis for Decision:</b>	
<b>Department Order of Corrective Action:</b>	
<b>Required Elements of Progress Report(s):</b> By January 5, 2018, provide the names and the assignments of the staff members who will be involved in the district's program evaluation; qualitative and quantitative data that will be analyzed; and meeting dates and agendas including a timeline for the process.  By June 1, 2018, complete the program evaluation tool that is available at <a href="http://www.doe.mass.edu/ell/ProgramEvaluation.pdf">http://www.doe.mass.edu/ell/ProgramEvaluation.pdf</a> . The district must complete all of the components of the attached form in order to evaluate the effectiveness of its ELE program in developing students' English language skills and increasing their ability to participate meaningfully in the district's educational program.  By June 1, 2018, provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation. Include in your progress	

report 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.

**Progress Report Due Date(s):**

01/05/2018

06/01/2018