

**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION  
COORDINATED PROGRAM REVIEW**

**Charter School or District: Worcester Public Schools  
Corrective Action Plan Forms**

**Program Area: Civil Rights  
Prepared by: Stacey Deboise Luster**

CAP Form will expand to as many lines as necessary. Before completing and emailing to pqacap@doe.mass.edu, please see separate *Instructions for Completing Corrective Action Plans*.

*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 to the school or district.*

**Mandatory One-Year Compliance Date: October 23, 2010**

**COORDINATED PROGRAM REVIEW  
CORRECTIVE ACTION PLAN  
(To be completed by school district/charter school)**

**Criterion & Topic:** CR 3 Access to a full range of education programs

**Rating:** Partially Implemented

**Department CPR Finding:** *Student records, staff interviews, and parent surveys indicated that students with limited English proficiency (LEP) do not always have full access to the full range of programs offered since not all LEP students are receiving English Language Development instruction as required by state law.*

**Narrative Description of Corrective Action:**

1. The District revised its protocol for allocating English Language Learner Instruction to include all LAU categories and levels. The Worcester Public Schools requires that all direct ELD services are aligned with guidelines provided by the DESE. This minimum hours of services recommended will guide all direct services provided by the district. Services to C Lau Students: Based on the significant improvement of ELLs in language development, from last year to this year, the district is able to provide all students at the C Lau level (level III) with direct services they need by qualified staff. Services to ELLs at the secondary level: Based on the language progression of students at this level, students are able to get the recommended numbers of hours. This is achieved using the ESL sections: 3 sections for Level I, 2 sections for Level II, and 1 section for Level III students. The district is also restructuring the sections at the high school to include the new requirement of 2.5 hours a week for students in levels IV and V.
2. The District will disseminate and provide training regarding its English Language Learner instructional protocols, for all Principals and Guidance Counselors.

**Comment:** Page: 3

**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training on effective implementation. (There should also be follow-up activities, to be described under Internal Monitoring Procedures—see below—to ensure that the new policy and procedures are being implemented systemwide and that they continue to be implemented.)

<b>Title/Role of Person(s) Responsible for Implementation:</b> Director of English Language Learners	<b>Expected Date of Completion for Each Corrective Action Activity:</b> Training at Principals at IDEA meetings - November 13, 20, and 24, 2009.  Training at city-wide guidance department meetings - on or before February 2010.
<b>Evidence of Completion of the Corrective Action:</b> Training agendas and attendance sign in sheets; Handouts provided at trainings; English Language Learners instruction guidelines	
<b>Description of Internal Monitoring Procedures:</b> The English Language Learner staff will conduct a monthly review of the records of English Language Learners and provide a summary in the spring of 2010 and annually thereafter, to ensure the appropriate amount of instruction, by LAU category and level.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b> <b>(To be completed by the Department of Elementary and Secondary Education)</b>	
<b>Criterion:</b> CR 3 Access to a full range of education programs	<b>Status of Corrective Action:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Partially Approved <input type="checkbox"/> Disapproved
<b>Basis for Partial Approval or Disapproval:</b> None	
<b>Department Order of Corrective Action:</b> None	
<b>Required Elements of Progress Report(s):</b> 1. By <b>February 26, 2010</b> , the District will submit evidence of its training (the dated agenda, handouts and attendance lists including the name, title and role of participants) provided to principals and guidance counselors regarding the requirements for the provision of ESL services to limited English proficient students in levels 1-5 as stated on its narrative description of corrective action.  By <b>May 25, 2010</b> , the district will submit the results of an administrative review of all district schools for limited English proficient students to ensure that all direct ELD services are aligned with guidelines provided by the DESE.  Please provide a list of all LEP students including the following information: a) the name of the school the student is currently attending; b) the LEP level of the student; c) the amount of direct ELD instruction provided to the student. 2. Please list by school the students that are not provided ELD services aligned with the guidelines provided by the DESE. Please determine the root cause(s) of the continued noncompliance provide the district's plan to remedy the continued noncompliance. The plan to correct any identified noncompliance should include a timeline for implementation.  The district must maintain the following documentation and make it available to the Department upon request: a) Date of the review; b) Name(s) of the person(s) who conducted the review, their role(s) and their signature(s).	
<b>Progress Report Due Date(s): February 26, 2010 &amp; May 25, 2010</b>	

**Comment:** Page: 3  
**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best practice for corrective action for some standards will require collaboration of personnel across more than one program. For example, putting appropriate procedures in place for determining what kind of assessments should be administered and in what language when a limited H... [1]

**Comment:** Page: 3  
**Expected Date of Completion for Each Corrective Action Activity:** All noncompliance in all programs monitored in the Coordinated Program Review must be corrected as soon as possible, but in no case later than one year from identification, i.e., from the date of issuance of the Final Report. (In the case of special education, correction of noncompliance as soon as possible... [2])

**Comment:** Page: 3  
**Evidence of Completion:** The school/district should describe the evidence it will collect in order to document the completion of each of the activities that make up the corrective action. For example, for a workgroup that is revising a school/district policy, it can collect meeting minutes from the workgroup along with the workgroup's final product, i.e. the revised polic... [3]

**Comment:** Page: 3  
**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. These procedures could include sampling, record reviews, tracking systems, or any other ongoing or periodic method... [4]

**Comment:** Page: 4  
**Basis for Partial Approval or Disapproval:** The Department staff person should provide a summary explanation of why the CAP was partially approved or disapproved, so that it is clear what the Department's rationale was.

**Comment:** Page: 4  
**Required Elements of Progress Report(s):** The Department staff person should clearly specify what kind of evidence of completion is required, including any supporting documentation and the results of internal monitoring activities.

<b>COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN</b> (To be completed by school district/charter school)	
<b>Criterion &amp; Topic:</b> CR 6 Availability of in-school programs for pregnant students	<b>Rating:</b> Partially Implemented
<b>Department CPR Finding:</b> Documentation and staff interviews indicated that the district does not have a policy statement regarding pregnant students. Staff interviews indicated that at some schools, pregnant students are prohibited from taking PE or extracurricular activities or may be required to go to the School Aged Mothers Program (SAMS).	
<b>Narrative Description of Corrective Action:</b>	
<ol style="list-style-type: none"> <li>1. The District published its policy statement regarding pregnant students in its 2009-2010 Policy Handbook. The District will develop an informed consent form, which will be required for pregnant students to withdraw from home school and to enroll into SAMS.</li> <li>2. Training will be provided to all principals, guidance counselors and school adjustment counselors to ensure the proper implementation of the Districts pregnancy policy.</li> </ol>	
<b>Title/Role of Person(s) Responsible for Implementation:</b> Human Resource Manager and Chief Academic Officer	<b>Expected Date of Completion for Each Corrective Action Activity:</b> Training at Principals at IDEA meetings - November 13, 20, and 24, 2009.  Training at city-wide school adjustment counselors and guidance department meetings - on or before February 2010.
<b>Evidence of Completion of the Corrective Action:</b> Training agendas and attendance sign in sheets Handouts provided at trainings Pregnancy policy	
<b>Description of Internal Monitoring Procedures:</b> Quarterly report of enrollment in SAMS by sending school	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b> (To be completed by the Department of Elementary and Secondary Education)	
<b>Criterion:</b> CR 6 Availability of in-school programs for pregnant students	<b>Status of Corrective Action:</b> <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Partially Approved <input type="checkbox"/> Disapproved
<b>Basis for Partial Approval or Disapproval:</b> The finding specified physical education and extracurricular activities, the district needs to include training to all its physical education, extracurricular and athletics personnel.	
<b>Department Order of Corrective Action:</b> The district's corrective action should include policy awareness for physical education teachers and other district employees who supervise extracurricular and athletic programs.	

**Comment:** Page: 3  
**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training on effective implementation. (There s ... [5])

**Comment:** Page: 3  
**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best p ... [6]

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**Expected Date of Completion for Each Corrective Action Activity:** All noncompliance in all programs monitored in the Coordinated Program Review must be corrected as soon as possible, but in no case later than one year from identification, i.e., from the date of issuance of the Final Report. (In the case of special education, correction of noncompliance as soon as possible ... [7])

**Comment:** Page: 3  
**Evidence of Completion:** The school/district should describe the evidence it will collect in order to document the completion of each of the activities that make up the corrective action. For example, for a workgroup that is revising a school/district policy, it can collect meeting minutes from the workgroup along with the workgroup's final product, i.e. the revised polic ... [8]

**Comment:** Page: 3  
**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. These procedures could include sampling, record reviews, tracking systems, or any other ongoing or periodic method ... [9]

**Comment:** Page: 4  
**Basis for Partial Approval or Disapproval:** The Department staff person should provide a summary explanation of why the CAP was partially approved or disapproved, so that it is clear what the Department's rationale was.

<b>Required Elements of Progress Report(s):</b>
1. The district will submit evidence of its training (the dated agenda, handouts and attendance lists including the name, title and role of the participants) provided to principals, counselors, physical education, extracurricular and athletics staff.
2. A copy of the district's pregnancy policy.
<b>Progress Report Due Date(s): February 26, 2010</b>

**Comment:** Page: 4  
**Required Elements of Progress Report(s):** The Department staff person should clearly specify what kind of evidence of completion is required, including any supporting documentation and the results of internal monitoring activities.

<b>COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN (To be completed by school district/charter school)</b>	
<b>Criterion &amp; Topic:</b> CR 7 Information to be translated into languages other than English	<b>Rating:</b> Partially Implemented
<b>Department CPR Finding:</b> <i>Documentation and staff interviews indicated that important information and documents, such as handbooks/codes of conduct, high school course of studies and report cards are not translated into the major languages spoken by parents or guardians with limited English skills. Documentation indicated that the district has not established a system of oral interpretation to assist parents/guardians with limited English skills, including those who speak low-incidence languages.</i>	
<b>Narrative Description of Corrective Action:</b>	
<p>1. The District translates all essential documents into Albanian, Portuguese, Spanish and Vietnamese. The District developed a Translation and Interpreter service protocol to ensure that Principals know how to access translation and interpreter services. The district made significant changes in the translations offered to all of our parents. We assigned a qualified staff person to coordinate all translations in the district. The reorganization has given us the opportunity to review all of our procedures. We have developed new standards for all translators servicing the district, in particular with regard to their qualification to produce high-quality translations. We also developed a list of all translators being utilized by different departments (SPED, ELL and other departments). This list provides us with a pool of qualified translators accessed through a centralized location and protocol. Lastly, a database of essential and non-essential documents is being created to avoid the duplication of documents that are consistently used by the district.</p> <p>2. Training will be provided to Principals to ensure that essential documents are translated into Albanian, Portuguese, Spanish, Vietnamese and other languages as needed.</p>	
<b>Title/Role of Person(s) Responsible for Implementation:</b> Human Resources Manager and Chief Academic Officer	<b>Expected Date of Completion for Each Corrective Action Activity:</b> Training at Principals at IDEA meetings - November 13, 20, and 24, 2009.
<b>Evidence of Completion of the Corrective Action:</b> Training agendas and sign in sheets Handouts provided at training Translations and interpreter service protocol	

**Comment:** Page: 3  
**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training on effective implementation. (There should also be follow-up activities, to be described under Internal Monitoring Procedures—see below—to ensure that the new policy and procedures are being implemented systemwide and that ... [10])

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**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best practice for corrective action for some standards will require collaboration of persons ... [11]

**Comment:** Page: 3  
**Expected Date of Completion for Each Corrective Action Activity:** All noncompliance in all programs monitored in the Coordinated Program Review must be corrected as soon as possible, but in no case later than one year from identification, i.e., from the date of issuance of the Final Report. (In the case of special education, correction of noncompliance as soon as possible but in no case later than one year from identification is required by the ... [12])

**Comment:** Page: 3  
**Evidence of Completion:** The school/district should describe the evidence it will collect in order to document the completion of each of the activities that make up the corrective action. For example, for a workgroup that is revising a school/district policy, it can collect meeting minutes from the workgroup along with the workgroup's final product, i.e. the revised policy. Training sessions can be documented by copies of the agendas, the training ... [13]

**Description of Internal Monitoring Procedures:** World Language Liaison and Department Head will provide a report of all translations and interpretations provided as of spring 2010, and annually thereafter, to ensure full implementation of the Districts translations and interpreter services.

**CORRECTIVE ACTION PLAN APPROVAL SECTION**  
**(To be completed by the Department of Elementary and Secondary Education)**

<b>Criterion:</b> CR 7 Information to be translated into languages other than English	<b>Status of Corrective Action:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Partially Approved <input type="checkbox"/> Disapproved
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**Basis for Partial Approval or Disapproval:** None

**Department Order of Corrective Action:** None

**Required Elements of Progress Report(s):** 1. By **February 26, 2010**, the district will submit evidence of its training (the dated agenda, handouts and attendance lists) provided to principals on the regulations that require the translation of important information and documents.

2. A copy of the district's *Translation and Interpreter Service Protocol*.

By **May 25, 2010**, the district will submit the results of an administrative review of all district schools to ensure that essential documents (e.g. the handbooks and codes of conduct) are translated into the four major languages present within the district. Please provide the Department with the results of the district's review, and any additional corrective action steps taken to ensure the major publications of the district are translated into the four major non-English languages of the district.

**Progress Report Due Date(s):** February 26, 2010 & May 25, 2010

**Comment:** Page: 3  
**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. These procedures could include sampling, record reviews, tracking systems, or any other ongoing or periodic method of oversight by key personnel by which the district can collect data to inform its leadership of progress being made toward meeting the requirements of the standard and by which the district can ensure that it has attained and is maintaining compliance. By planning and implementing these procedures, the district assumes oversight of its systemic practices and responsibility for managing them. In the example of disciplinary procedures, the district might describe its plans for an internal monitoring system whereby the Team chairperson for each school periodically reviews the disciplinary logs maintained by the school, cross-references them with the student's records to ensure that there is evidence of appropriate actions taken consistent with the IDEA 2004 requirements, and provides feedback to special education staff, regular education administrators, and the special education administrator. By use of this review and feedback the district will be able to direct training or other resources to those specific schools or personnel needing further assistance.

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**Required Elements of Progress Report(s):** The Department staff person should clearly specify what kind of evidence of completion is required, including any supporting documentation and the results of internal monitoring activities.

<b>COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN (To be completed by school district/charter school)</b>	
<b>Criterion &amp; Topic:</b> CR 7B Structured learning time	<b>Rating:</b> Partially Implemented
<b>Department CPR Finding:</b> <i>Documentation and interviews indicated that physical education is not required for all students every year of high school for all high schools in the district.</i>	
<b>Narrative Description of Corrective Action:</b> <ul style="list-style-type: none"> <li>• During the 2009-10 school year, all K-6 students receive physical education once a week for 40 minutes.</li> <li>• During the 2009-10 school year, all middle school students participate in a physical education course.</li> <li>• During the 2009-10 school year, students participate in physical education coursework for two school years earning .5 credits each year.</li> <li>• The Chief Academic Officer, Quadrant Managers and the Director of Health, Physical Education and Athletics will meet with high school principals before scheduling for the 2010-11 school year to ensure that all students participate in physical education every year, K-12.</li> </ul>	
<b>Title/Role of Person(s) Responsible for Implementation:</b> Chief Academic Officer	<b>Expected Date of Completion for Each Corrective Action Activity:</b> Spring 2010
<b>Evidence of Completion of the Corrective Action:</b> Middle school and high school course schedules and physical education teacher schedules.	
<b>Description of Internal Monitoring Procedures:</b> Annual review of physical education schedules.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION (To be completed by the Department of Elementary and Secondary Education)</b>	
<b>Criterion:</b> CR 7B Structured learning time	<b>Status of Corrective Action:</b> <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Partially Approved <input type="checkbox"/> Disapproved
<b>Basis for Partial Approval or Disapproval:</b> The district must provide training to all high school principals on the requirements that physical education must be required for all students every year of high school at all high schools in the district.	
<b>Department Order of Corrective Action:</b> The district must ensure physical education for all students in all grade levels every school year.	
<b>Required Elements of Progress Report(s):</b> 1. By <b>February 26, 2010</b> , the district will submit evidence of the training (dated agenda, handouts and attendance lists) provided to high school principals and physical education teachers on the requirements that physical education must be required for all students every year of high school at all high schools in the district.	
By <b>May 25, 2010</b> , the District will submit a copy of the pages of its Course of Studies for the 2010-11 SY, once it has been approved by the School Committee, which includes a requirement of physical education being required for all students every year of high school.	
<b>Progress Report Due Date(s):</b> February 26, 2010 & May 25, 2010	

**Comment:** Page: 3  
**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a p... [14]

**Comment:** Page: 3  
**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the ov... [15]

**Comment:** Page: 3  
**Expected Date of Completion for Each Corrective Action Activity:** All noncompliance in all programs monitored in the Coordinated Program Review must be corrected as soon as possible, but in no case later than one year from identification, i.e., from the date ... [16]

**Comment:** Page: 3  
**Evidence of Completion:** The school/district should describe the evidence it will collect in order to document the completion of each of the activities that make up the corrective action. For example, for a workgroup that is revising a school/district polic... [17]

**Comment:** Page: 3  
**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. Th... [18]

**Comment:** Page: 4  
**Basis for Partial Approval or Disapproval:** The Department staff person should provide a summary explanation of why the CAP was partially approved or disapproved, so that it is clear what the Department's rationale was.

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**Required Elements of Progress Report(s):** The Department staff person should clearly specify what kind of evidence of completion is required, including any supporting documentation and the results of internal monitoring activities.

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<b>COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN (To be completed by school district/charter school)</b>	
<b>Criterion &amp; Topic:</b> CR 14 Counseling and counseling materials free from bias and stereotypes	<b>Rating:</b> Partially Implemented
<b>Department CPR Finding:</b> <i>Staff interviews indicated that the district does not always ensure that students with limited English proficiency have the opportunity to receive support services, such as guidance and counseling, in a language that the student understands. Students at the New Citizen's Center, a choice school for elementary and secondary limited English proficient students, only receive guidance and counseling by requesting such from their neighborhood schools.</i>	
<b>Narrative Description of Corrective Action:</b>	
<ol style="list-style-type: none"> <li>The District provides high school English Language Learners, in all LAU categories and levels, guidance counseling in a language they understand, directly or through personally known interpreter.</li> <li>Training will be provided for all principals and guidance counselors, to ensure that English Language Learners receive guidance counseling in a language that they understand.</li> </ol>	
<b>Title/Role of Person(s) Responsible for Implementation:</b> Manager of Staff and Curriculum Development	<b>Expected Date of Completion for Each Corrective Action Activity:</b> Training at Principals at IDEA meetings - November 13, 20, and 24, 2009.  Training at city-wide guidance department meetings - on or before February 2010.
<b>Evidence of Completion of the Corrective Action:</b> Training agendas and attendance sign in sheets Handouts provided at trainings List of all English Language Learners who received guidance counseling in a language other than English.	
<b>Description of Internal Monitoring Procedures:</b> The Manager of Staff and Curriculum Development will provide a quarterly report of English Language Learners who received guidance counseling in languages other than English, and an annual summary beginning in the spring of 2010, to ensure that English Language Learners receive guidance counseling in a language that they understand.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION (To be completed by the Department of Elementary and Secondary Education)</b>	
<b>Criterion:</b> CR 14 Counseling and counseling materials free from bias and stereotypes	<b>Status of Corrective Action:</b> <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Partially Approved <input type="checkbox"/> Disapproved
<b>Basis for Partial Approval or Disapproval:</b> The district did not provide any description regarding the CPR Finding, "...Students at the New Citizen's Center, a choice school for elementary and secondary limited English proficient students, only receive guidance and counseling by requesting such from their neighborhood schools."	
<b>Department Order of Corrective Action:</b> The district must ensure equal access to counseling	

**Comment:** Page: 3  
**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training on effective implementation. (There ... [19])

**Comment:** Page: 3  
**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best ... [20]

**Comment:** Page: 3  
**Expected Date of Completion for Each Corrective Action Activity:** All noncompliance in all programs monitored in the Coordinated Program Review must be corrected as soon as possible, but in no case later than one year from identification, i.e., from the date of issuance of the Final Report. (In the case of special education, correction of noncompliance as soon as possible ... [21])

**Comment:** Page: 3  
**Evidence of Completion:** The school/district should describe the evidence it will collect in order to document the completion of each of the activities that make up the corrective action. For example, for a workgroup that is revising a school/district policy, it can collect meeting minutes from the workgroup along with the workgroup's final product, i.e. the revised poli ... [22]

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**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. These procedures could include sampling, record reviews, tracking systems, or any other ongoing or periodic method ... [23]

**Comment:** Page: 4  
**Basis for Partial Approval or Disapproval:** The Department staff person should provide a summary explanation of why the CAP was partially approved or disapproved, so that it is clear what the Department's rationale was.

services.

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

1. The district will submit evidence of its training (a copy of the district policy and procedure, dated agenda, handouts and attendance lists including name, title and role of participants) provided to principals and guidance counselors on the regulations that require that limited English proficient students have an opportunity to receive support services, such as guidance and counseling, in a language that the student understands.
2. A description of how students are determined to require guidance and counseling in a language that an LEP student understands.
3. A description of how guidance and counseling is provided to students at the New Citizen's Center.

This progress report is due By **February 26, 2010**.

By **May 25, 2010**, the District will submit the results of an administrative review of all LEP students at the New Citizen's Center that require guidance and counseling in a language that they understand to determine compliance regarding the requirement that limited English proficiency have the opportunity to receive support services, such as guidance and counseling, in a language that the student understands.

Please provide the number of students that require guidance and counseling in a language other than English at the New Citizen's Center and the number of students where guidance and counseling was provided consistent with regulations. For all students where the district was not in compliance with this criterion, determine the root cause(s) of the noncompliance and provide the district's plan to remedy the noncompliance to ensure 100% compliance with this criterion.

The district must maintain the following documentation and make it available to the Department upon request: a) List of student names, building names and grade levels of students that require guidance and counseling in a language that the student understands: b) Date of the review: c) Name(s) of the person(s) who conducted the review, their role(s) and their signature(s).

**Progress Report Due Date(s): February 26, 2010 & May 25, 2010**

**Comment:** Page: 4

**Required Elements of Progress Report(s):** The Department staff person should clearly specify what kind of evidence of completion is required, including any supporting documentation and the results of internal monitoring activities.

**COORDINATED PROGRAM REVIEW  
CORRECTIVE ACTION PLAN  
(To be completed by school district/charter school)**

**Criterion & Topic:** CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion

**Rating:** Partially Implemented

<p><b>Department CPR Finding:</b> <i>Documentation and interviews indicated that the high schools in the district do not send an annual written notice to former students who have not yet earned their competency determination and who 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.</i></p> <p><i>Documentation and interviews also indicated that while the district does send an initial notice within ten days from the fifteenth consecutive unexcused absence for a student 16 or over, the notice is not always in the family's primary language. The notice does not state that the student and the parent or guardian may meet with a representative of the district within ten days from the date the notice was sent or that at the request of the parent or guardian, the district may consent to an extension of the time for the meeting of not longer than fourteen days.</i></p>	
<p><b>Narrative Description of Corrective Action:</b></p> <ol style="list-style-type: none"> <li>1. The District sends letters to students after 15 unexcused absences from school, and each year thereafter for 3 years, following their departure from school.</li> <li>2. Training will be provided to principals and guidance counselors to ensure that students with 15 unexcused absences receive immediate and annual notices which encourage them to stay enrolled in school.</li> </ol>	
<p><b>Title/Role of Person(s) Responsible for Implementation:</b> Secondary Principals</p>	<p><b>Expected Date of Completion for Each Corrective Action Activity:</b> Training at Principals at IDEA meetings - November 13, 20, and 24, 2009. Training at city-wide guidance department meetings - on or before February 2010.</p>
<p><b>Evidence of Completion of the Corrective Action:</b> Training agendas and attendance sign in sheets Handouts provided at trainings Report on number of students who received the 15 day and annual notices Report on number of students who remained enrolled in Worcester Public Schools after receiving notice.</p>	
<p><b>Description of Internal Monitoring Procedures:</b> Secondary principals will provide a quarterly report beginning in the spring of 2010, and annually thereafter, on the number of students who received the 15 day annual notice, including how many remained enrolled in the Worcester Public Schools.</p>	
<p><b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b> <b>(To be completed by the Department of Elementary and Secondary Education)</b></p>	
<p><b>Criterion:</b> CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion</p>	<p><b>Status of Corrective Action:</b>  <input type="checkbox"/> Approved    <input checked="" type="checkbox"/> Partially Approved    <input type="checkbox"/> Disapproved</p>
<p><b>Basis for Partial Approval or Disapproval:</b></p> <ol style="list-style-type: none"> <li>1. The district's corrective action does not include revising its initial notice sent to a student 16 years or over who is leaving school without a high school diploma, certificate of attainment, or certificate of completion. The letter must include language to the effect "...that the student and the parent or guardian may meet with a representative of the district within ten days from</li> </ol>	

**Comment:** Page: 3  
**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training on effective implementation. (There ... [24])

**Comment:** Page: 3  
**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best ... [25]

**Comment:** Page: 3  
**Expected Date of Completion for Each Corrective Action Activity:** All noncompliance in all programs monitored in the Coordinated Program Review must be corrected as soon as possible, but in no case later than one year from identification, i.e., from the date of issuance of the Final Report. (In the case of special education, correction of noncompliance as soon as possible ... [26])

**Comment:** Page: 3  
**Evidence of Completion:** The school/district should describe the evidence it will collect in order to document the completion of each of the activities that make up the corrective action. For example, for a workgroup that is revising a school/district policy, it can collect meeting minutes from the workgroup along with the workgroup's final product, i.e. the revised poli ... [27]

**Comment:** Page: 3  
**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. These procedures could include sampling, record reviews, tracking systems, or any other ongoing or periodic method ... [28]

**Comment:** Page: 4  
**Basis for Partial Approval or Disapproval:** The Department staff person should provide a summary explanation of why the CAP was partially approved or disapproved, so that it is clear what the Department's rationale was.

*the date the notice was sent or that at the request of the parent or guardian, the district may consent to an extension of the time for the meeting of not longer than fourteen days.”*

2. The district’s corrective action does not include the creation of an annual written notice for students 16 or over who have left school without a high school diploma, certificate of attainment, or certificate of completion within the past two years and who have not yet earned their competency determination and who have not transferred to another school. This notice must include, at minimum, the following:

- a) It must inform them of the availability of publicly funded post-high school academic support programs and
- b) It must encourage them to participate in those programs.

This notice must be sent by first class mail to the last known address of each such student who attended a high school in the district within the past two years.

3. The district’s corrective action did not include procedures to ensure that both notices required in this criterion are provided in a language that the student understands.

**Department Order of Corrective Action:** The district will revise its notifications as indicated under the Department’s basis for the partial approval of the district’s corrective action plan.

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

1. By **February 26, 2010**, the district will submit documentation of its training (the dated agenda, handouts and attendance lists including the name, title and role of participants) provided to principals and guidance counselors on all requirements to provide notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion both initially and annually in a language that the student understands.

2. A copy of the initial notice sent to a student 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion.

3. A copy of the an annual written notice for students 16 or over who have left school without a high school diploma, certificate of attainment, or certificate of completion within the past two years and who have not yet earned their competency determination and who have not transferred to another school.

4. Five (5) copies of both an initial notice as well as an annual notice to students 16 or over who have left school without a high school diploma, certificate of attainment, or certificate of completion within the past two years and who have not yet earned their competency determination and who have not transferred to another school during the 2009-2010 SY. Include at least one of each (initial and annual notices) in a language that the student understands.

5. Procedures to ensure that the both annual and written notices are provided in a language that the student understands.

By **May 25, 2010**, the District will submit the results of an administrative review of students 16 or over who have left school without a high school diploma, certificate of attainment, or certificate of completion and who have not yet earned their competency determination and who have not transferred to another school during the 2009-2010 SY.

Please submit:

- 1. The number of HS students that were sent an initial notice with all requirements listed in CR 16.
- 2. The number of HS students that were sent annual notices with all the requirements listed in CR 16.

**Comment:** Page: 4  
**Required Elements of Progress Report(s):** The Department staff person should clearly specify what kind of evidence of completion is required, including any supporting documentation and the results of internal monitoring activities.

**Comment:** Page: 4  
**Basis for Partial Approval or Disapproval:** The Department staff person should provide a summary explanation of why the CAP was partially approved or disapproved, so that it is clear what the Department’s rationale was.

3. The number of HS students that required notices to be sent in the primary language of the student.
4. The number of students that were sent notices for submissions #1-3 that were consistent with regulations.
5. For all records not in compliance with this criterion, determine the root cause(s) of the noncompliance and provide the district's plan to remedy the noncompliance to ensure 100% compliance with this criterion.

The district must maintain the following documentation and make it available to the Department upon request: a) List of student names, building names and grade levels of students reviewed: b) Date of the review: c) Name(s) of the person(s) who conducted the review, their role(s) and their signature(s).

**Progress Report Due Date(s): February 26, 2010 & May 25, 2010**

<b>COORDINATED PROGRAM REVIEW CORRECTIVE ACTION PLAN</b> (To be completed by school district/charter school)	
<b>Criterion &amp; Topic:</b> CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program	<b>Rating:</b> Partially Implemented
<b>Department CPR Finding:</b> <i>Documentation and staff interviews indicated that while the district has developed and implemented staff training at least annually on the use of physical restraint consistent with regulatory requirements, such training does not always occur within the first month of each school year. Furthermore, employees hired after the school year begins do not receive training within a month of their employment. Interviews and documentation indicated that there are no restraint trained staff at the New Citizens Center.</i>	
<b>Narrative Description of Corrective Action:</b>	
<ol style="list-style-type: none"> <li>The District implements Crisis Prevention Intervention (CPI) as the protocol for its physical restraint policy.</li> <li>Two staff members in each building receive in-depth training on physical restraint. The District provides training in de-escalation and the physical restraint policy to all teachers, instructional assistants and school administrators within the first 30 days of the start of school and/or within 30 days of being hired.</li> </ol>	
<b>Title/Role of Person(s) Responsible for Implementation:</b> Principals (annual training) Human Resource Manager (new hires after annual training)	<b>Expected Date of Completion for Each Corrective Action Activity:</b> The District provides training on de-escalation strategies and the physical restraint policy to all teachers, instructional assistants and school administrators within the first 30 days of the start of school and/or within 30 days of being hired.
<b>Evidence of Completion of the Corrective Action:</b> Training agendas and attendance sign in sheets Handouts provided at trainings Physical restraint policy	
<b>Description of Internal Monitoring Procedures:</b> The Office of Human Resources will provide a report on all physical restraint training as of the spring 2010, and annually thereafter.	
<b>CORRECTIVE ACTION PLAN APPROVAL SECTION</b> (To be completed by the Department of Elementary and Secondary Education)	
<b>Criterion:</b> CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program	<b>Status of Corrective Action:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Partially Approved <input type="checkbox"/> Disapproved
<b>Basis for Partial Approval or Disapproval:</b> None	
<b>Department Order of Corrective Action:</b> None	
<b>Required Elements of Progress Report(s):</b> 1. By February 26, 2010, the district will submit evidence of its annual training (the dated agenda, handouts and attendance lists including the name, title and role of participants) provided to all district staff on regulatory requirements	

**Comment:** Page: 3  
**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training ... [29]

**Comment:** Page: 3  
**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of ... [30]

**Comment:** Page: 3  
**Expected Date of Completion for Each Corrective Action Activity:** All noncompliance in all programs monitored in the Coordinated Program Review must be corrected as soon as possible, but in no case later than one year from identification, i.e., from the date of issuance of the Final Report. (In ... [31])

**Comment:** Page: 3  
**Evidence of Completion:** The school/district should describe the evidence it will collect in order to document the completion of each of the activities that make up the corrective action. For example, for a workgroup that is revising a school/district policy, it can collect meeting minutes from the ... [32]

**Comment:** Page: 3  
**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. These procedures could include sampling ... [33]

**Comment:** Page: 4  
**Basis for Partial Approval or Disapproval:** The Department staff person should provide a summary explanation of why the CAP was partially approved or disapproved, so that it is clear what the Department's rationale was.

**Comment:** Page: 4  
**Required Elements of Progress Report(s):** The Department staff person should clearly specify what kind of evidence of completion is required, including any supporting documentation and the results of internal monitoring activities.

regarding the use of physical restraint on any student enrolled in a publicly-funded education program.

2. Please list of all staff in each district school building, including the New Citizens' Center, that have received in-depth training on physical restraints.

3. The procedures for ensuring that employees hired after the school year begins receive training within a month of their employment. Evidence that this training has occurred during the 2009-2010 SY.

**Progress Report Due Date(s): February 26, 2010**

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**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best practice for corrective action for some standards will require collaboration of personnel across more than one program. For example, putting appropriate procedures in place for determining what kind of assessments should be administered and in what language when a limited English proficient student is referred for a special education evaluation might involve the special education administrator, the director of English language education, and perhaps the director of data systems.

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**Evidence of Completion:** The school/district should describe the evidence it will collect in order to document the completion of each of the activities that make up the corrective action. For example, for a workgroup that is revising a school/district policy, it can collect meeting minutes from the workgroup along with the workgroup's final product, i.e. the revised policy. Training sessions can be documented by copies of the agendas, the training materials and the participant attendance sheets. In some cases evidence of completion should include evidence of a change in practices as a result of the corrective action. In the example of staff training on the disciplinary procedures under IDEA 2004 for suspensions of students with disabilities beyond 10 days, the evidence of completion could include copies of the results of manifestation determinations conducted consistent with the standard. (Documentation of this evidence of completion will be required by the Department.)

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**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. These procedures could include sampling, record reviews, tracking systems, or any other ongoing or periodic method of oversight by key personnel by which the district can collect data to inform its leadership of progress being made toward meeting the requirements of the standard and by which the district can ensure that it has attained and is maintaining compliance. By planning and implementing

these procedures, the district assumes oversight of its systemic practices and responsibility for managing them. In the example of disciplinary procedures, the district might describe its plans for an internal monitoring system whereby the Team chairperson for each school periodically reviews the disciplinary logs maintained by the school, cross-references them with the student's records to ensure that there is evidence of appropriate actions taken consistent with the IDEA 2004 requirements, and provides feedback to special education staff, regular education administrators, and the special education administrator. By use of this review and feedback the district will be able to direct training or other resources to those specific schools or personnel needing further assistance.

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**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training on effective implementation. (There should also be follow-up activities, to be described under Internal Monitoring Procedures—see below—to ensure that the new policy and procedures are being implemented systemwide and that they continue to be implemented.)

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**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best practice for corrective action for some standards will require collaboration of personnel across more than one program. For example, putting appropriate procedures in place for determining what kind of assessments should be administered and in what language when a limited English proficient student is referred for a special education evaluation might involve the special education administrator, the director of English language education, and perhaps the director of data systems.

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**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. These procedures could include sampling, record reviews, tracking systems, or any other ongoing or periodic method of oversight by key personnel by which the district can collect data to inform its leadership of progress being made toward meeting the requirements of the standard and by which the district can ensure that it has attained and is maintaining compliance. By planning and implementing these procedures, the district assumes oversight of its systemic practices and responsibility for managing them. In the example of disciplinary procedures, the district might describe its plans for an internal monitoring system whereby the Team chairperson for each school periodically reviews the disciplinary logs maintained by the school, cross-references them with the student's records to ensure that there is evidence of appropriate actions taken consistent with the IDEA 2004 requirements, and provides feedback to special education staff, regular education administrators, and the special education administrator. By use of this review and feedback the district will be able to direct training or other resources to those specific schools or personnel needing further assistance.

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**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training on effective implementation. (There should also be follow-up activities, to be described under Internal Monitoring Procedures—see below—to ensure that the new policy and procedures are being implemented systemwide and that they continue to be implemented.)

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**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best practice

for corrective action for some standards will require collaboration of personnel across more than one program. For example, putting appropriate procedures in place for determining what kind of assessments should be administered and in what language when a limited English proficient student is referred for a special education evaluation might involve the special education administrator, the director of English language education, and perhaps the director of data systems.

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Page 4: [12] Comment                      Department of Education                      4/15/09 9:23 AM

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Page 6: [15] Comment                      Department of Education                      4/15/09 9:23 AM

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best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best practice for corrective action for some standards will require collaboration of personnel across more than one program. For example, putting appropriate procedures in place for determining what kind of assessments should be administered and in what language when a limited English proficient student is referred for a special education evaluation might involve the special education administrator, the director of English language education, and perhaps the director of data systems.

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records to ensure that there is evidence of appropriate actions taken consistent with the IDEA 2004 requirements, and provides feedback to special education staff, regular education administrators, and the special education administrator. By use of this review and feedback the district will be able to direct training or other resources to those specific schools or personnel needing further assistance.

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**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training on effective implementation. (There should also be follow-up activities, to be described under Internal Monitoring Procedures—see below—to ensure that the new policy and procedures are being implemented systemwide and that they continue to be implemented.)

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Page: 3

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sessions can be documented by copies of the agendas, the training materials and the participant attendance sheets. In some cases evidence of completion should include evidence of a change in practices as a result of the corrective action. In the example of staff training on the disciplinary procedures under IDEA 2004 for suspensions of students with disabilities beyond 10 days, the evidence of completion could include copies of the results of manifestation determinations conducted consistent with the standard. (Documentation of this evidence of completion will be required by the Department.)

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**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best practice for corrective action for some standards will require collaboration of personnel across more than one program. For example, putting appropriate procedures in place for determining what kind of assessments should be administered and in what language when a limited English proficient student is referred for a special education evaluation might involve the special education

administrator, the director of English language education, and perhaps the director of data systems.

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**Expected Date of Completion for Each Corrective Action Activity:** All noncompliance in all programs monitored in the Coordinated Program Review must be corrected as soon as possible, but in no case later than one year from identification, i.e., from the date of issuance of the Final Report. (In the case of special education, correction of noncompliance as soon as possible but in no case later than one year from identification is required by the federal government in connection with Indicator 15 of the *Massachusetts Part B State Performance Plan for FFY 2005-2010* submitted, as required, in December 2005 to the Office of Special Education Programs of the U.S. Department of Education and revised and reported on thereafter.) Each corrective action activity should have a proposed date for completion for that specific activity well before the one-year anniversary of the CPR Final Report.

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**Evidence of Completion:** The school/district should describe the evidence it will collect in order to document the completion of each of the activities that make up the corrective action. For example, for a workgroup that is revising a school/district policy, it can collect meeting minutes from the workgroup along with the workgroup's final product, i.e. the revised policy. Training sessions can be documented by copies of the agendas, the training materials and the participant attendance sheets. In some cases evidence of completion should include evidence of a change in practices as a result of the corrective action. In the example of staff training on the disciplinary procedures under IDEA 2004 for suspensions of students with disabilities beyond 10 days, the evidence of completion could include copies of the results of manifestation determinations conducted consistent with the standard. (Documentation of this evidence of completion will be required by the Department.)

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**Description of Internal Monitoring Procedures:** Each school/district should describe the ongoing monitoring procedures that it will use to determine whether the previously identified noncompliance has been corrected and to ensure continued compliance. These procedures could include sampling, record reviews, tracking systems, or any other ongoing or periodic method of oversight by key personnel by which the district can collect data to inform its leadership of progress being made toward meeting the requirements of the standard and by which the district can ensure that it has attained and is maintaining compliance. By planning and implementing these procedures, the district assumes oversight of its systemic practices and responsibility for managing them. In the example of disciplinary procedures, the district might describe its plans for an internal monitoring system whereby the Team chairperson for each school periodically reviews the disciplinary logs maintained by the school, cross-references them with the student's records to ensure that there is evidence of appropriate actions taken consistent with the IDEA 2004 requirements, and provides feedback to special education staff, regular education administrators, and the special education administrator. By use of this review and feedback the district will be able to direct training or other resources to those specific schools or personnel needing further assistance.

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**Narrative Description of Corrective Action:** The school/district should describe the sequence of specific activities it will implement in order to remedy the identified noncompliance. Corrective action should be more than a single event. For example, if the school/district needs to revise a policy and procedures there will be a series of activities that may include their revision by a workgroup, the dissemination of the revised policy and procedures to appropriate staff, and staff training on effective implementation. (There should also be follow-up activities, to be described under Internal Monitoring Procedures—see below—to ensure that the new policy and procedures are being implemented systemwide and that they continue to be implemented.)

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**Title/Role of Person(s) Responsible for Implementation:** The primary staff responsible for implementing the corrective action should be identified by role or job function. As a matter of best practice, the program director or administrator should have the overall responsibility for the correction of noncompliance by the implementation of corrective action. However, best practice for corrective action for some standards will require collaboration of personnel across more than one program. For example, putting appropriate procedures in place for determining what kind of assessments should be administered and in what language when a limited English proficient student is referred for a special education evaluation might involve the special education administrator, the director of English language education, and perhaps the director of data systems.

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