Instructions for Completing the CAP

The purpose of the District-wide Corrective Action Plan (CAP) template is to ensure consistency and standardization across the District when responding to conditions or findings identified in Internal Audit reports. The CAP also meets the directives from the Superintendent specific to reporting and monitoring the corrective action progress.

Call Internal Audit if you have questions:

- 1. Check the Audit Report for the due date to Internal Audit (IA); typically, ten (10) working days after the draft report is issued (electronic version).
 - **Important Note:** Allow enough time prior to the due date for IA consultation and Cabinet level administrator review and approval (signature and date) before submitting to IA, (the signed version of the CAP may be provided in hard copy).
- 2. Internal Audit will pre-load the CAP activities from report recommendations, and request a meeting to review both. The activities may be modified, as deemed necessary, based on the data owner's knowledge and expertise.
- 3. Items/Pages not used should be deleted; areas noted in red are to be modified by the data owner and the red notes should be deleted.
- 4. Under the appropriate labeled columns starting on CORRECTIVE ACTION ACTIVITIES page, the CAP must outline
 - (i) the activities,
 - (ii) the condition the activity addresses from the report,
 - (iii) projected completion dates,
 - (iv) identify responsible parties,
 - (v) list specific documents/evidence that will prove the activity occurred, and
 - (vi) document the status of each activity as it is completed.
- 5. Submit to your Cabinet Level Administrator for review and approval (signature and date), after you have completed the CAP.
- 6. Internal Audit will approve the CAP if the activities are sufficient to address the conditions/findings in the report.
- 7. Internal Audit will submit the CAP to the Superintendent for final approval, and IA will provide a copy of the approved CAP to data owner(s).
- 8. Note the CAP is an auditable document (from external agencies also).
- 9. <u>Major</u> changes to activities, timelines, etc., after the CAP has been approved, must follow the same approval process as the original CAP.
- 10. Minor changes may be noted in the Status column with a brief explanation.

Internal Audit is available to provide one on one support in the development of the CAP and thereafter.

CORRECTIVE ACTION PLAN FOR THE TEA SPECIAL ACCREDITATION INVESTIGATION AUDIT AND THE CHS NEWCOMER ADMISSION PROCESS AUDIT

Approved by	Name	Signature	Date
Internal Auditor	Hector Rodriguez		
Interim-Superintendent	Annette Brigham		
Board President	Armando Rodriguez		



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Resource Persons:

- 1. Annette Brigham, Interim-Superintendent
- 2. Cary Flores, Learning Center Lead Teacher
- 3. Cathy Bonner, Testing Coordinator
- 4. Christine Althoff, Consultant, Retired Administrator
- 5. Emil Herrera, Staff Auditor
- 6. Graciela Macias, Data Entry Clerk
- 7. Hector Rodriguez, Internal Auditor
- 8. Jan Massie, Assistant Principal
- 9. Michael Dillard, Consultant, Retired Administrator
- 10. Monica Prieto, Counselor
- 11. Michelle Escobedo, Counselor
- 12. Gabriela Marquez, Counselor
- 13. Christine Miller, Counselor
- 14. Rebecca Quintana, CHS Registrar
- 15. Robert Taylor, Consultant, Retired Administrator
- 16. Wes Temple, Region XIX Consultant
- 17. Region XX Consultant
- 18. Alfonso Rendon, Assistant Principal
- 19. Reyna Salcedo, Assistant Principal

Abbreviations/Acronyms Used in This Report:

AAR - Academic Achievement Records

ALS - Academic Language Services

C & I - Curriculum and Instruction

CAP - Corrective Action Plan

CHS - Canutillo High School

CUM - Cumulative Folder

DAC - District Advisory Committee

EL - English Learner

ESL- English as a Second Language

IA - Internal Audit

LPAC - Language Proficiency Assessment Committee

PGP - Personal Graduation Plan

SPED- Special Education

SRD - School Resources Division

TEA - Texas Education Agency

TEAMS - Total Education Administrative Management Solution

TLC - The Learning Center

Goals of This Corrective Action Plan

- 1. Comply with state laws, policies, and procedures.
- 2. Implement the elements of the Corrective Action Plan:
 - Develop or update existing procedures for:
 - o Grade Level Reclassification
 - o Cohort Placement
 - o Graduation Plans
 - o Personal Graduation Plans
 - Attendance Appeals
 - o SPED/LEP LEP Exit
 - o Out-Of-Country Credits
 - o The Learning Center
 - o State Assessment Testing
 - Develop and implement technology enhancements to satisfy reporting and monitoring needs.
 - Provide training for the newly developed or updated procedures.
 - Monitor the implementation of the new or updated procedures.
- 3. Receive favorable reports from future audits.
- 4. Avoid the risk of negative publicity.

CORRECTIVE ACTION PLAN ACTIVITIES

*Please note: CHS ADMIN means Principal and Assistant Principals.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
Data owner shares and reviews final approved CAP with all affected department personnel to help ensure all elements of CAP will be implemented.	Mandatory requirement per Superintendent	Five working days after approval of CAP	Interim Supt. Internal Auditor Cabinet	Meeting notification, sign-in sheet, memo or email	3/26/13 -The CAP has been provided to the consultants. The consultants are working with affected personnel to accomplish the CAP activities. 4/19/13 - The CAP was provided to the leadership team. 5/1/13 - The CAP was provided during the DAC meeting. 7/19/13 - The CAP was provided to the new CHS Principal.

(la	Activity ist the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
	Data owner submits written CAP status reports to IA to ensure data owner is in compliance with CAP activities	Mandatory requirement per Superintendent	4/2013 monthly	Interim Supt., Internal Auditor, Cabinet	Data owner's CAP status report	IA is attending meetings with the consultants and the Interim-Superintendent to obtain CAP status updates. In turn IA is updating the status in the CAP. The meetings have been held on: 3/12/13 3/13/13 3/26/13 4/2/13 4/9/13 4/18/13 5/7/13 5/14/13 6/18/13 7/2/13 7/19/13 8/7/13 8/7/13 8/7/13 8/16/13 8/28/13 9/5/13 9/5/13 10/1/13 10/2/13 10/10/13
-int	ernal Audit		+		•	12/ 4/ 2013

(li.	Activity st the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
3.	IA spot checks data owner CAP implementation and documentation collection to ensure implementation is occurring for stated activities.	Mandatory requirement per Superintendent	6/2013 7/2013 8/2013 1/2014 6/2014	Internal Auditor, Hector Rodriguez	Memo or email (where applicable)	IA is obtaining evidence to support the completion of the CAP activities as the activities are being completed. After IA has verified that the activity has been accomplished, IA will insert the word VERIFIED in the status column.
Pro	ocedures					
4.	Grade Level Reclassification procedures will be adopted.	3, 26, TEA	5/2013 6/2013 4/9 – The completion date was revised due to competing priorities (Supt. Process)	CHS Associate Supt. C & I Counselors	Grade Level Reclassification Procedures	6/6/13 – Draft Grade Level Reclassification procedures are near completion. 7/2/13 – A meeting was held to review the procedures and revisions were suggested.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
					7/8/13 - The procedures were presented to Cabinet 7/8/13. The next step is to revise the procedures as recommended and to post to the website.
					A grade level reclassification policy was also created which will be presented to the Policy Committee.
					8/7/13 – Due to lack of time the Grade Level Reclassification policy will be changed to a regulation.
					8/12/13 - The regulation was approved by Cabinet and has been uploaded to

(li.	Activity st the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
						the website. VERIFIED
5.	Cohort Placement procedures will be adopted.	6	9/2013	CHS SRD	Cohort Placement Procedures	5/13/13 – The cohort procedures were incorporated into EIF Regulation.
6.	Graduation Plan(Minimum/ Recommended/Distinguished) procedures will be adopted.	6, TEA	6/2013	CHS Admin., Counselors, Dr. Althoff	Graduation Plan Procedures	3/25/13, 3/26/13, 4/2/13 - Initial meetings were held with counselors, AP, and counseling center clerk.
						5/7/13 – All CHS students have a 4- year graduation plan in the Naviance system.
						6/6/13 – Draft Graduation Plan procedures are near completion.
						7/2/13 – A meeting was held

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
					to review the procedures and revisions were suggested. The procedures will be presented to Cabinet 7/8/13.
					8/12/13 – The regulation was approved by Cabinet and has been posted to the website. VERIFIED

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
7. Personal Graduation Plan procedures will be adopted.	6, TEA	5/2013	CHS Admin., Counselors, At-Risk	Personal Graduation Procedures	3/26/13, 4/2/13 – Reviewed the documentation related to PGPs. Checked status of PGPs. Began discussions about developing PGP procedures.
					4/25/13 – Received the 3 rd Draft of EIF Regulation which describes the PGP process.
					5/7/13 – EIF Regulation has been reviewed by IA and administration.
					5/13/13 – EIF Regulation was approved by Cabinet.
					7/12/13 – EIF Regulation has been uploaded to the website.
Internal Audit		12	<u></u>		VERIFIED 12/4/2013

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
8. Attendance Appeal procedures will be adopted.	TEA	4/2013	Assoc. Supt., CHS Principal, C & I Director	Attendance Appeal Procedures Student Rosters ARC Schedule	3/25/13 - Attendance for Credit FEC Regulation has been approved by cabinet and is now in effect. The forms have been finalized. The regulation and forms have been presented to the stakeholders and to the Board. 4/18/13 - An attendance appeal packet was submitted to IA containing: 1) Loss of credit report, 2) Student roster by grade level, 3) Scheduled appointments, 4) Committee members. 6/6/13 - Attendance for Credit FEC

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
					Regulation and related exhibits are posted on the administration regulation website.
					VERIFIED

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
9. SPED/LEP Exit procedures will be adopted.	6, TEA	6/2013- 6/2014	Assoc. Supt., Dr. Althoff, SPED Director, ALS Director	SPED/ALS – LEP Exit Procedures	9/25/13 – A meeting was held to plan the development of the procedures.
					10/3/13 – The SPED/LEP Exit procedures were adapted from South San Antonio ISD. The procedures follow the steps provided in the TEA document titled "Process for Considering Special Exit Criteria from Bilingual/English as a Second Language (ESL) Services Under 19 TAC 89.1225(k) 2013-2014 School Year" VERIFIED

Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
1	6/2013	ALS Director, CHS Personnel, C & I, Interim Supt.	Updated Out-Of- Country Credits Matrix	5/8/13 – ALS has started to update the matrix with courses not accepted for CISD credit.
				6/18/13 – The Out- Of-Country Matrix was reviewed and changes were suggested.
				7/3/13 - The Matrix has been updated and is ready for cabinet approval.
				8/27/13 – The Matrix was approved by cabinet and posted on the District website.
	Finding Number Being Addressed	Finding Completion Number Being Date(s) Addressed	Finding Number Being Addressed 1 6/2013 ALS Director, CHS Personnel, C &	Finding Number Being Addressed 1 6/2013 ALS Director, CHS Personnel, C & Country Credits Matrix Completion Date(s)

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
11. Individual timelines will be set for each employee involved in the process of awarding foreign transfer credit to ensure credits are awarded within 20 days of the receipt of official transcripts.	2	8/2013	ALS Director, CHS Personnel	Out-Of-Country Procedures Manual	5/8/13 – IA met with ALS personnel to discuss the timelines needed. 5/15/13 – IA met with each employee involved in the process and obtained estimated timelines. The timelines were forwarded to ALS personnel to incorporate into the Foreign Transcript Audit Form. 6/18/13 – The Out-Of-Country timelines were reviewed. 7/3/13 – The timelines have been revised and are ready for cabinet approval.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
					8/27/13 – The timelines were approved by cabinet as incorporated into FDA Exhibit B – Out of Country Transcript Audit Form, which is posted on the District website.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
12. The Foreign Transcript Audit form will be updated to include signature and date fields for each person involved in the process.	14	8/2013	ALS Director, Counselors, EL Facilitator	Updated Foreign Transcript Audit Form	5/8/13 – IA met with ALS personnel to discuss the updates for the Foreign Transcript Audit Form. 6/18/13 – The Foreign Transcript Audit form was reviewed. 7/3/13 – The form has been revised and is ready for cabinet approval. 8/27/13 – FDA Exhibit B – Out of Country Transcript Audit Form was approved by cabinet which includes signature and date fields.
					VERIFIED

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
13. A procedures manual will be developed to document the out-of-country credits process in detail to include the evaluation of foreign credits, grade conversion, review and approval credit recommendations, roles and responsibilities, and timelines.	6, 7, 16, 18, TEA CAP	9/2013	ALS Director, EL Facilitator, Assistant Principal, Counselor, Interim Supt.	Out-Of-Country Credits Procedures Manual	5/8/13 – IA met with ALS personnel to discuss the corrective activity. Both parties agreed that the Out-Of-Country Credit Regulation and Foreign Transcript Audit form would be updated to address the areas listed in the corrective activity. 8/27/13 – FDA Regulation and exhibits were approved by Cabinet and were posted to the website.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
14. The TLC procedures will be reviewed and updated if necessary.	TEA CAP	6/2013 7/2013	Asst. Principal TLC Coordinator, C & I Director	Review notes and/or TLC Procedure Updates	4/8/13, 4/24/13 – Meetings were held with the TLC Coordinator to update the TLC Procedures. 5/8/13 – The TLC procedures have been scheduled to be discussed during the 5/13/13 cabinet meeting. 6/6/13 – The Draft TLC procedures are near completion. 7/3/13-The draft TLC procedures are ready for Cabinet approval. 7/15/2013 – The TLC Procedures were approved by Cabinet.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
15. The Student Assessment Testing Procedures will be reviewed and updated if necessary.	TEA CAP	4/2013 5/2013 6/2013 7/2013	DTC, CTC Interim Supt. Mr. Dillard.	Review notes and/or Student Assessment Testing Procedure Updates	4/10/13 – IA met with the DTC and Mr. Dillard to discuss the testing procedures. The DTC provided the procedure outline and scope. IA provided to the DTC sample regulations to use as a starting point. 7/9/13 – The draft testing procedures are ready for cabinet approval. 7/22/13 – The Testing Administration Regulation was approved by Cabinet and has been posted on the website.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
16. LPAC Procedure/REGS	Admin Request	9/2013	ALS Director, EL Facilitator, C & I, CHS Admin.		5/8/13 – IA received the draft LPAC regulation. IA reviewed the regulation and provided suggested revisions. 5/13/13 – The LPAC procedures were reviewed by Cabinet and were returned to ALS for additional revisions. 12/4/13 – The LPAC procedures are being compiled to provide to IA.
17. SPED Procedures/LPAC/LEP Students	Admin Request	7/2013 8/2013	Region XIX Mr. Dillard CHS Admin. CHS Counselors SPED Director		7/3/13 – The procedures were reviewed. VERIFIED

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
18. Cumulative Folder Procedure	Admin Request	9/2013	SRD Interim Supt. Campus Principals Registrars		12/4/13 – Current policies and regulations are being reviewed and draft changes have been made.
Technology Enhancements					
19. The grade level reclassification process will be automated to ensure the grade level classification scale is applied consistently.	3	7/2013	CHS Admin. SRD Assoc. Supt.	Development and implementation of an automated grade level reclassification process	5/7/13 - IA met with the IT Systems Programmer to discuss this activity.
20. A Grade Level Exception Report will be developed. The report will provide a list of students where the total number of credits does not match the assigned grade level.	3	7/2013	SRD Counselors	Grade Level Exception Report	5/7/13 - IA met with the IT Systems Programmer to discuss this activity. 7/3/13 - The report was reviewed and a discrepancy was found. The IT Systems Programmer is working on a fix.

Addressed	Date(s)	(title, name)	activity occurred)	(status of corrective activity and completion dates)
				8/8/13 – The report will be modified based on the revised grade level reclassification criteria.
				11/5/13 – The implementation of the new grade level reclassification criteria has been postponed until 2014-2014 therefore the current report is adequate to meet the current needs.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
21. A Graduation Exception Report will be developed. The report will provide a list of graduates that appear not to have enough credits for graduation.	5	7/2013	CHS Admin. E. Jimenez School Counselors	Graduation Exception Report	5/7/13 - IA met with the IT Systems Programmer to discuss this activity. 7/3/13 - Received sample reports. The next step is to test the reports for accuracy. 8/14/13 - It appears that the reports are functioning correctly. VERIFIED
22. Newcomer students will be flagged in TEAMS.	12	7/2013	E. Jimenez Prologic	Newcomer list from TEAMS	5/7/13 – IA met with the IT Systems Programmer to discuss this activity. The term newcomer was defined and roles and responsibilities

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
					were discussed. 6/6/13 – IA met with the affected parties and formalized the definition for newcomer students and discussed the technical aspects of the flag. 7/3/13 – Flag and reports were reviewed. 8/29/13 – Instructions on how to flag newcomers in TEAMS was sent to affected personnel.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
23. ALS & SPED will work with School Resources to identify available system information or custom reports that will be used to evidence that EL students are being monitored every 6 weeks.	20	7/2013	ALS Director SRD Personnel SPED Director	EL 6 Weeks Monitoring Reports	5/8/13 – IA held a meeting with the EL Facilitator and Systems Programmer to discuss the business requirements for the report. 10/10/13 – IA assisted the EL Facilitator in merging the failure report with students classified as LEP, M1, and M2. IA provided instructions on how to perform the merge for future use. A meeting was then held between ALS and campus administration to discuss the process to monitor the student population.

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
					12/4/13 – A meeting was held where IT presented the failure report that could be run by program. IT has provided access to the ALS personnel.
Training					
24. Grade Level Reclassification procedures training will occur.	3, 26, TEA	8/2013	Central Office Admin.	Sign-in sheets	9/11/13 – Training occurred.
					VERIFIED
25. Cohort Placement procedures training will occur.	6	8/2013	Central Office Admin.	Sign-in sheets	9/11/13 – Training occurred.
					VERIFIED
26. Graduation Plan(Minimum/ Recommended/Distinguished) training will occur.	6, TEA	8/2013	Central Office Admin.	Sign-in sheets	9/11/13 – Training occurred.
adming will decur.					VERIFIED

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
27. Personal Graduation Plan training will occur.	6, TEA	8/2013	Central Office Admin. RegionXIX	Sign-in sheets	9/11/13 – Training occurred.
			Regionzaza		VERIFIED
28. Attendance Appeal training will occur.	TEA	8/2013	Central Office Admin.	Sign-in sheets	10/3/13 – Training occurred.
					VERIFIED
29. SPED/ALS – LEP Exit training will occur.	TEA	8/2013	Region XX Central Office Admin. Region XIX SPED Director	Sign-in sheets	10/3/13 – Training occurred. VERIFIED
30. Out-Of-Country Credits Procedures Manual training will occur.	6	8/2013	CHS Admin. CHS Counselors ALS Director	Sign-in sheets	9/4/13 – Training has been scheduled for 9/6/13.
					9/6/13 – Training occurred.
					VERIFIED

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
31. Leadership seminars on team building, professionalism, ethics and raising expectations for all district and campus leadership will occur.	TEA CAP	07/13 09/31/13 1/31/2014	Assoc. Supt., Exec. Dir. HR, Region XX	Sign-in sheets	4/19/13 – The Ethics and Integrity presentation was provided during the District Leadership Meeting. 8/5/13 - The Ethics training was provided during the Leadership meeting. VERIFIED
32. Grade Level Exception Report training will occur.	3	8/2013	Assoc. Supt. SRD	Sign-in sheets	
33. Graduation Exception Report training will occur.	5	1/2014	Counselor SRD	Graduation Exception Report	
34. EL 6 Weeks Monitoring Reports training will occur.	20	8/2013	ALS Director ALS Dept. SRD	EL 6 Weeks Monitoring Reports	

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
35. Policy Training		9/2013	TASB- Erin Oehler		10/1/13 – Training is scheduled to occur in October. 10/24/13 – The training occurred.
Monitoring and other action items					
36. The 2013 spring student testing at CHS will be monitored.	TEA CAP	3/11/2013- 5/20/2013 7/31/2013 Revised end date in order to monitor the summer testing	Mr. Dillard Mr. Young District Testing Coordinator	Monitoring reports	3/28/13, 4/1/13, 4/2/13 – Rooms were checked to ensure testing compliance and requirements were met. The monitoring was documented on checklists. These steps were performed before and during testing. 6/6/13 – In general, test administration was successful except for a transfer student that did not

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
					take the Math TAKS in May. This student will take the Math TAKS in July.
					7/25/13 – Testing administration monitoring reports were received and reviewed.
					VERIFIED

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
37. The SPED/LEP students that exited the LEP status without proper documentation will be reevaluated to ensure that the exit decision was appropriate.	TEA CAP	6/2013-6/2014	ALS Director SPED Director C & I Director	Evaluation reports	6/6/13 – IA reviewed the list of SPED/LEP students that exited the LEP status. For each student that is still enrolled at CISD test scores were obtained. With this information the District will be able to determine whether the students previously exited have now met the regular exit criteria. For those students that have not met the regular exit criteria, IA is recommending that an LPAC be conducted. 12/4/13 – IA is awaiting a status update.
38. The Compliance Director and	TEA CAP	4/2013	Interim Supt.	Evaluation reports	4/10/13 – IA met

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
External Funding Coordinator job descriptions and federal compliance monitoring processes will be reviewed to determine whether sufficient oversight is in place to mitigate non-compliance risk with federal program regulations.		7/2013	Exec. Dir. HR Exec. Dir. Finance		with the External Funding Coordinator to gain an understanding of the federal compliance monitoring roles and responsibilities. 4/24/13 – IA met with the Program Compliance Director to gain an understanding of the federal compliance monitoring roles and responsibilities. 5/2/13 – IA met with the personnel committee to present the IA analysis performed and offered recommendations for improvement.

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					7/10/13 – IA has received and has reviewed the revised job
					descriptions which are pending signatures.
					8/8/13 – The Job Descriptions with signatures have been received.
					VERIFIED

Activity (list the activity; each activity should be on a separate row)	Condition or Finding Number Being Addressed	Projected Completion Date(s)	Person(s) Responsible (title, name)	Documentation (must be evidence that activity occurred)	Status (status of corrective activity and completion dates)
39. Additional monitoring will be applied for areas lacking federal compliance oversight.	TEA CAP	4/2013 6/2014 Expenditure s will be monitored for the entire 2013-2014 school year	Interim Supt. Exec. Dir. HR Exec. Dir. Finance	Monitoring reports	5/2/13 – IA recommended that the Program Compliance Director and the Funding Compliance Clerk job descriptions be updated. IA also identified that additional monitoring is needed in the area of setting up initial budgets for selected funds and monitoring expenditure requirements. For the 2013-2014 school year IA will verify the reasonableness of initial budgets and continue to monitor expenditure requirements.

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40. Transfer credits will be awarded to the student missing foreign transfer credits as shown on the Recommended High School Program.	4	6/2013 1/2014 6/2014	ALS Director CHS Admin. CHS Personnel	Transcript	5/8/13 – IA provided to the EL Facilitator the documentation to support that the student in question was missing the recommended foreign transfer credit. 6/6/13 – IA has verified that the student in question has received the missing foreign transfer credits. VERIFIED

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41. The interim-superintendent will provide a written notice to CHS administrators requiring that at least one administrator be present during any LPAC meeting.	9	3/13/2013	Interim Supt.	Memo to CHS administrators	The Interim Superintendent sent a memo to all principals requiring that at least one administrator be present at all LPAC meetings. VERIFIED
42. Completed Foreign Transcript Audit Forms and updated transcripts will be provided to the EL Facilitator. These documents will be retained in a central location to evidence that foreign transfer credits have been awarded.	2, 8	8/2013 9/2013	CHS Admin. EL Facilitator ALS Dept.	Completed Foreign Transcript Binders	The EL Facilitator is no longer part of the process. The completed foreign transcript audit forms will be filed within the student cumulative folders.

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43. The Out-Of-Country Credit Matrix will be applied to ensure foreign transfer credits are awarded consistently.	1	8/2013 9/2013	CHS Admin. EL Facilitator ALS Dept.	Foreign Transcript Audit Forms Transcripts	10/11/13 – IA reviewed out-of-country credit documentation and in general credits are being awarded consistently and in accordance with the matrix. VERIFIED
44. The EL Facilitator will monitor and report to the Principal and Internal Audit when foreign transfer credits are not awarded and or appropriate grade reclassifications do not occur within 20 days of the receipt of official foreign transcripts.	2	8/2013 9/2013 ongoing	CHS Admin.	Emails to Principal and Internal Auditor	REVISED ACTIVITY The campus will forward all Foreign Transcript Audit Forms to Academic Languages Services for review

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45. Preventive controls or strategies will be put in place to ensure that parent representatives attend LPAC meetings.	9	8/2013 ongoing	CHS Admin.	List of controls or strategies LPAC sign-in sheets with Parent Representative signatures	5/8/13 – ALS has included language in the draft LPAC regulation requiring 2 or 3 alternate parents to attend LPAC meetings. 11/6/13 – Strategies have been put in place to ensure that parent representatives attend LPAC meetings. VERIFIED

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46. LPAC agendas will be created and retained in the LPAC binder for each LPAC meeting.	10	8/2013 9/2013 ongoing	ALS Director	LPAC agendas	5/8/13 – IA held a meeting with ALS personnel and requested that the LPAC regulation list the contents of the LPAC binders. 10/11/13 – The LPAC meeting forms were reviewed. VERIFIED
47. LPAC minutes will be created and retained in the LPAC binder for each LPAC meeting.	10	8/2013 9/2013 ongoing	ALS Director	LPAC minutes	5/8/13 – IA held a meeting with ALS personnel and requested that the LPAC regulation list the contents of the LPAC binders. 11/6/13 - LPAC minutes have been created. VERIFIED

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48. Escalation procedures will be implemented to report past due ESL Progress Report and Intervention forms.	15	8/2013	ALS Director Teachers EL Facilitator	Past due emails	5/8/13 – IA held a meeting with ALS personnel to discuss the escalation procedures.
49. LPACs will be scheduled and will occur within a four week period of each other.	21	8/2013 ongoing	ALS Director	LPAC schedule LPAC sign-in sheets	10/4/13 – An LPAC meeting schedule has been created for the 2013-2014 school year and has been agreed upon by the participating LPAC members. VERIFIED
50. A LEP student CUM folder documentation checklist will be used to ensure all required documents are within the CUM folder.	22, 23	7/2013 8/2013 9/2013	Registrar Assist. Principal SRD	LEP student CUM folder documentation checklists	11/6/13 – A LEP student CUM folder documentation checklist has been created. VERIFIED

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51. A summary lead sheet will be used to compile the information captured on the individual LEP student CUM folder document checklists.	22, 23	7/2013 8/2013 9/2013	ALS Director, Registrar	LEP documentation summary lead sheet	10/11/13 – A summary lead sheet was created for all grade levels. VERIFIED
52. ALS will review the LPAC binders to ensure that they are complete and accurate.	24, 25	8/2013- 6/2014	ALS Director	Certification by ALS that the LPAC binders have been reviewed for completeness and accuracy	
53. The three final TLC grades in question will be changed to 70%.	19	6/2013 8/2013	CHS Principal, Lead Teacher	Transcripts	8/27/13 – The changes have been approved and are pending entry into TEAMS. 10/14/13 – The changes have been entered into TEAMS. VERIFIED

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54. TLC employees will assign appropriate grades based on whether the course was taken for credit recovery or initial credit.	19	6/2013 9/2013	CHS Principal, Lead Teacher	Transcripts	10/14/13 – Reviewed the TLC 2012-2013 credits spreadsheet and on a sample basis verified that the correct grades were being awarded. VERIFIED
55. The Out-Of-Country Regulation, Matrix, Flowchart, and Foreign Transcripts Audit form will be reviewed and updated at the end of the 2013 school year to address any issues encountered through- out the year and will seek Cabinet approval.	1, TEA CAP	7/2013- 8/2013	Central Office Admin. CHS Admin. CHS Counselors EL Facilitator	Updated Out-Of-Country Regulation, Flowchart, and Foreign Transcripts Audit form.	5/8/13 – IA met with ALS personnel to discuss needed updates for the regulation, matrix, flowchart, and foreign transcript audit form. 8/27/13 – The regulation and exhibits were reviewed, updated, approved, and posted on the districts website.

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56. The Grade Level Exception Report will be generated, reviewed and any discrepancies will be researched and corrective action will be taken if necessary.	3	7/2013- 8/2013 9/2013- 10/2013	Central Office Admin. CHS Admin. CHS Counselors EL Facilitator	Grade Level Exception Reports	
57. The Graduation Exception Report will be generated, reviewed and any discrepancies will be researched and corrective action will be taken if necessary.	5	1/2014 10/2013	Central Office Admin. CHS Admin. CHS Counselors EL Facilitator	Graduation Exception Reports	