Submit to CDE
Due December 15, 2020

2019/20 SELPA Special Education Plan Review Checklist		
LEA Name: Oakland Unified	SELPA Name: Oakland Unified	Date Reviewed: 12/8/2020

Please review the documents submitted by the LEA to ensure completeness. Check any unmet element(s) for the LEA.

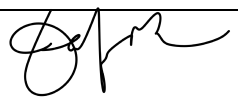
X 1	**X 3c ELA**	**☐ 5a**	**X 6b**	**X 7b Age**	**☐ 9**	**☐ 13**	**☐ Child Find**
☐ 2	**X 3c Math**	**X 5b**	**X 7a Increased**	**X 7c Increased**	**X 10**	**X 14a**	**X Chronic Absenteeism**
X 3b ELA	**☐ 4a**	**☐ 5c**	**X 7a Age**	**X 7c Age**	**☐ 11**	**X 14b**	**☐ Disproportionality in Placement**
X 3b Math	**☐Disproportionality in Discipline**	**X 6a**	**X 7b Increased**	**☐ 8**	**☐ 12**	**☐ 14c**	**☐ Significant Disproportionality (Element form and Completed Packet)**

Did the LEA complete the required SEP Local Educational Agency Identification form? **X** Yes ☐ No
Did the LEA include all the required planning team members? **X** Yes ☐ No
Did the LEA include a schedule of meetings that includes at least one meeting in the fall, winter, and spring? **X** Yes ☐ No
Did the LEA identify the data examined to determine root causes? **X** Yes ☐ No

For each element that the Special Education Plan is required to address:

Did the plan include root causes that led to the LEA's failure to meet the target? **X** Yes ☐ No
Did the plan include overall strategies and/or activities to address the root cause(s)? **X** Yes ☐ No
Did the plan include resources needed to support the strategies and activities? **X** Yes ☐ No
Did the plan include the title(s) and role(s) of the person(s) responsible for carrying out activities? **X** Yes ☐ No
Did the plan include methods and standards used to measure success? **X** Yes ☐ No
Did the plan include dates by which activities will be due? **X** Yes ☐ No

SELPA Representative Name: Jenn Blake SELPA Representative Signature:



Was the Special Education Plan complete? X Yes ☐ No

2019–2020 Special Education Plan

Local Educational Agency Identification Form

Every Special Education Plan (SEP) must include this form.

I. LEA and SELPA Information

Complete the following chart:

Local Education Agency (LEA) Information	
LEA Name:	Oakland Unified School District
CDS Code:	01612590000000
LEA Representative Name:	Jenn Blake
LEA Representative Title:	Executive Director/SELPA Director
LEA Representative Phone Number:	925-28-59082
LEA Representative Email:	Jennifer.blake@ousd.org
Special Education Local Plan Area (SELPA)	
***2020–21 SELPA Name:**	Same as above
SELPA Representative Name:	
SELPA Representative Title:	
SELPA Representative Phone Number:	
SELPA Representative Email:	

II. 2019–20 SEP Elements

In order to determine the Elements to be addressed in the SEP, the LEA should refer to the LEA's *Notification of 2018–19 Annual Determination Pursuant to the Individuals with Disabilities Education Act and Selection for 2019–20 Special Education Monitoring Activities including Identification of Significant Disproportionality (Annual Determination Notification)*, emailed on January 31, 2020.

To confirm identification of the Elements that the LEA must include in its SEP, the California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must complete an Element Form for every Element in

which the *Elements Requiring Review* list for the LEA shows "Yes" in the Review Required column.

The LEA must also complete the *Significant Disproportionality Comprehensive Coordinated Early Intervening Services* (CCEIS) plan and related forms if the LEA has been identified for Significant Disproportionality.

In the chart below, mark "Yes" or "NA" in the column "SEP 2019−20" to indicate whether the LEA must address the Element as part of the 2019–20 SEP or the Element is not applicable.

Element	SEP 2019–20
1: Graduation Rate	X
2: Dropout Year Rate	
3b: English Language Arts Assessment Participation	X
3b: Mathematics Assessment Participation	X
3c: English Language Arts Assessment Achievement	X
3c: Mathematics Assessment Achievement	X
4a: Suspension Rate	
5a: Least Restrictive Environment–Regular class 80% or more	
5b: Least Restrictive Environment–Regular class less than 40%	X
5c: Least Restrictive Environment–Separate School	
6a: Preschool Least Restrictive Environment–Receiving Special Education Services in Regular Program	X
6b: Preschool Least Restrictive Environment–Separate class, School, or Residential Facility	X
7a1: Preschool Skills–Positive Social-Emotional Skills, Substantially Increased*	X
7a2: Preschool Skills–Positive Social-Emotional Skills, Functioning within Age Expectations*	X
7b1: Preschool Skills–Acquisition and Use of Knowledge and Skills, Substantially Increased*	X
7b2: Preschool Skills–Acquisition and Use of Knowledge and Skills, Functioning within Age Expectations*	X
7c1: Preschool Skills–Use of Appropriate Behaviors to Meet Their Needs: Substantially Increased*	X
7c2: Preschool Skills–Use of Appropriate Behaviors to Meet Their Needs: Functioning within Age Expectations*	X
8: Parent Involvement	

Element	SEP 2019–20
9: Disproportionate Representation	
10: Disproportionate Representation by Disability	X
Disproportionality in Discipline	X
Disproportionality in Placement	
11: Timely Eligibility Evaluation**	
12: Early Childhood Transition**	
13: Secondary Transition**	
14a: Post-School Outcomes–Higher Education	X
14b: Post-School Outcomes–Higher Education or Competitively Employed	X
14c: Post-School Outcomes–Any Education or Employment	
Child Find	
Chronic Absenteeism	X
Significant Disproportionality	X

***** Element: 7 has six subparts, as listed in the above chart. If an LEA was selected for Preschool Review, it must address all subparts of Element: 7 in the SEP. The Element: 7 form is designed for that purpose.

** Elements: 11, 12, and 13 are not required to be addressed in the 2019–20 SEP due on December 15, 2020.

III. 2019–20 SEP Improvement Team

The LEA will form a SEP Improvement Team (SEP Team or Improvement Team). The SEP Team will be responsible for managing the entire process. This will include analyzing data, identifying appropriate root causes for which strategies/activities are identified, implementing the SEP, and monitoring success. The members of the SEP Team will meet into the fall of school year **2020–21** to develop the SEP. Throughout the 2020-21 school year, the SEP Team will continue to meet in order to implement each strategy/activity, observe and collect data during implementation, and review progress. The LEA will choose the members of this team, with suggested representation from:

- SELPA Representative
- Special Education Administrator
- General Education Administrator
- Special Education Teacher
- General Education Teacher

IV. List of 2019–2020 SEP Team Members

Complete the table below. For each SEP Team role, list the corresponding SEP Team member's name, LEA title or position, and email address. If the same person is fulfilling more than one role, explain the reason in the box below the table. Add rows to the chart for additional members, as necessary.

SEP Team Role	Name	Title or Position	Email Address
SELPA Representative	Jenn Blake	ED, Special Ed	Jennifer.blake@ousd.org
Special Education Administrator	Cary Kaufman	Coordinator, Special Ed	*All staff have first.last@ousd.org*
Special Education Administrator	Anne Zarnowiecki	Coordinator, Special Ed	
Special Education Administrator	Allison Guilfoil	Coordinator, Special Ed	
Special Education Administrator	David Cammarata	Coordinator, Special Ed	
Special Education Administrator	Stacey Lindsay	Coordinator, Special Ed	
Special Education Administrator	Neku Pogue	Coordinator, Special Ed	
General Education Administrator	Sondra Aguilera	Chief Academic Officer	
General Education Administrator	Anita Comelo	Principal	
General Education Administrator	Barbara McClung	Director, Behavioral Health	

General Education Administrator	Jorge Wahner	Assistant Principal	
Special Education Teacher	Virginia Bonham	Special Educator	
General Education Teacher	Stephanie Jemilo	General Educator/TSA	
Attendance and Discipline Lead	Misha Karigaca	Coordinator, Attendance and Discipline	
Counselor/Linked Learning	Elizabeth Paniagua	Director, Linked Learning	
Related Services	Sasha Wertheim	AT Specialist	
Related Services	Margaret O'Reilly and Carolyn Emrich	OT Specialists	
Related Services	Karen Nehemiah and Christina Walker	School Psychologist	
Data Lead	Juan Du	ED, Research Assessment and Data	

Explanation of Improvement Team Member Roles:

Each member will be assigned to a subcommittee of the larger group that focuses on Element(s) that align with their core responsibilities within the organization. The team will meet as a whole at the beginning and close of each stakeholder meeting to review key data, root causes and plan elements with the broader

body. Members may be assigned to specific tasks between meetings to ensure that the plan is comprehensive and complete by the due date.
The Special Education administrators will be the primary members responsible for formatting the final plan after the stakeholder team has created a final draft, as well as for ensuring implementation monitoring meetings take place for the elements to which they are assigned.

V. SEP Team Meetings

The SEP Team will meet into the fall of school year **2020–21** to develop the SEP and throughout the 2020–21 school year to implement and monitor the entire SEP. Each meeting may address multiple items, but each area the meeting addresses should be listed in the chart below. In the case of future meetings, list the areas the SEP Team plans to address. Documentation of these meetings, such as meeting agendas and notes, should be maintained for future reference. During the 2019–20 school year (if the planning started during the Spring of 2020) and the 2020–21 school year, the SEP Team shall meet to address the following:

- **Data Analysis**–Collecting and analyzing data to answer questions leading to identification of the factors that may impact outcomes for students with disabilities.
- **Root Cause Analysis**–Identifying the significant factors to be addressed in order to improve outcomes for students with disabilities.
- **Improvement Planning**–Selecting strategies/activities, with supporting resources, in order to impact outcomes for students with disabilities.
- **Planning the Implementation and Monitoring of the SEP**–Creating a plan to implement the strategies/activities and monitor implementation as it occurs.
- **Implementation**–Preparing for and implementing the SEP.
- **Monitoring**–Observing implementation, reviewing documentation, and collecting data to determine whether the strategies/activities were implemented with fidelity, whether the standards of success were met, and the reasons why or why not.
- **Review**–Reviewing the results of the plan to determine next steps, including any actions necessary to maintain any improvement observed for students with disabilities.

List of SEP Team Meetings and Strategies/Activities

List the planning and monitoring dates in the chart below. Include meetings that have already occurred and meetings that are planned for the future. At least one monitoring meeting must be conducted in the winter and spring quarters of the 2020–21 school year. The dates should be listed in chronological order. Every effort

should be made to schedule future meetings realistically, taking into consideration the academic calendar; however, it is understood that rescheduling may be required due to unforeseen circumstances in the new school year. Insert new rows for meetings dates, as necessary.

Dates (include month, day, and year)	Element(s) to Be Addressed During the Meeting	What areas will the meeting address?	Documentation Collected/ To Be Collected
Planning Meetings 2019−20 and Fall 2020			
8/24/2020	All	**Stakeholder Meeting: Introduction, Grounding Data Dive**	Initial Data, Agenda and Deck
9/28/2020	All	**Stakeholder Meeting: Current Initiatives, Data Analysis**	Element-Specific Data, Agenda and Deck
10/19/2020	All	**Stakeholder Meeting: Complete Root Causes**	Agenda and Deck
11/10/2020	All	**Stakeholder Meeting: Develop Intervention Plans**	Agenda and Deck, Element Forms
11/20/2020	All	**SEP Lead Team Meeting: Review and Complete Final Drafts**	Final Element Forms
Implementation/Monitoring Fall 2020−21 (if applicable)			
N/A			
Implementation/Monitoring Winter 2020−21			
2/1/2021	All	Stakeholder Meeting	Agenda and Deck
Implementation/Monitoring Spring 2021			
4/19/2021	All	Stakeholder Meeting	Agenda and Deck

Dates (include month, day, and year)	Element(s) to Be Addressed During the Meeting	What areas will the meeting address?	Documentation Collected/ To Be Collected
5/17/2020	3 (Participation), 14 (College and Employment)	State Testing Participation Update, Post-Secondary Data Results	Meeting Agenda, Data Review Sheets
6/28/2020	1- Graduation	Grad Data Review, 2020-21	Meeting Agenda, Grad Data

The full SEP will consist of this document and, for each unmet Element, an *Element Form*. It will also include a SEP *Root Cause Analysis and Improvement Form* for each identified root cause, *but only if* the LEA is not using the revised Element Forms in which the *Root Cause Analysis and Improvement* portions are now embedded. Combine all the forms into one PDF document. The sequence of the forms will be as follows:

- *LEA Identification Form*
- *SEP Element Form* for the first unmet Element
- SEP *Root Cause Analysis and Improvement Form* for each root cause applicable to the first unmet Element (if not using the revised Element Form with root cause embedded)
- SEP *Element Form* for the second unmet Element
- SEP *Root Cause Analysis and Improvement Form* for each root cause applicable to the second unmet Element (if not using the revised *Element Form* with root cause embedded).
- Repeat the above sequence for any remaining unmet SEP Elements.

Save the SEP PDF document with the following name: "<Name of LEA> <SELPA> 2019−2020 SEP–<Targeted or Intensive>."

The LEA will send the full SEP to the SELPA for their review. It is important to be aware of any deadlines set by the SELPA. After reviewing the LEA's 2019–20 SEP, the SELPA will complete the *2019–20 SELPA Review Checklist*. The SELPA will attach the *SELPA Review Checklist* at the front of the LEA's 2019–20 SEP as one PDF document and submit it to the CDE, Special Education Division, no later than December 15, 2020, as follows:

If the LEA was selected for Targeted Monitoring, the SELPA shall email the final PDF document to TargetedMonitoring@cde.ca.gov.

If the LEA was selected for Intensive Monitoring, the SELPA shall email the final PDF document to IntensiveMonitoring@cde.ca.gov.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 1: Graduation Rate

Element 1: Graduation Rate corresponds to Graduation Rate as shown on the California School Dashboard (Dashboard) for students with disabilities. If the Local Educational Agency's (LEA's) 2019 Dashboard performance level for Graduation Rate for students with disabilities is red or orange, the LEA must address this Element in its Special Education Plan (SEP), for implementation beginning in the 2020–21 school year.

Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

I. Review of Dashboard Information/Data

The LEA's performance level for Graduation Rate on the Dashboard is a combination of Status Level and Change Level. In July 2019, the State Board of Education approved the implementation of a combined graduation rate, which reflects all students who: (1) graduate in four years as part of the most current graduating class and (2) graduate in five years as part of the prior year graduating class. Beginning with the Fall 2019 Dashboard, the Graduation Rate on the Dashboard, for all comprehensive high schools, is based on the combined rate. [See the *California Department of Education's 2019 California School Dashboard Technical Guide: Final Version 2019–20 School Year, December 2019*.] The SEP Team's understanding of the Dashboard data and performance levels will be essential in the team's determination of root causes and corresponding strategies/activities to improve performance. The SEP Team may determine root causes applicable to the Status Level, Change Level, or both, depending on the LEA's Dashboard data.

Using data for the Student Group: Students with Disabilities on the 5x5 Graduation Rate Placement Report–Detailed Data from the LEA's 2019 Dashboard, complete the charts below.

Color	Status Level	Change Level	CURRENT STATUS: 2018–19 Graduation Rate	CHANGE: Difference between current rate and prior rate
Red	**Very Low**	**Declined**	**63.3%**	**Declined by 4%**

Based on the above information, indicate the area(s) that the LEA intends to address:

Area to Address	Yes/No
Status Level	**Yes**
Change Level	***Yes***

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

Currently, Oakland Unified is supporting the graduation of students with disabilities through multiple channels. Our High School Network's 'Linked Learning' office provides options for school day-embedded employment experiences, which can make school feel more relevant and aligned to student strengths and interests.

High school counselors have access to tools through our data dashboards to identify students who are off track in core content (e.g. Math, Science, English). Counselors have held meetings with individual students earlier when they are identified as off-track to support alternative options to recoup credits (e.g. Summer Learning, online learning).

Specific to Special Education, students in upper grades in high school also have Workability and Transition Partnership services, which include executive functioning skills, job skills, and self-advocacy skills.

As indicated above, students with disabilities are provided with transition services embedded within their core program. Counselors are meeting with students with and without disabilities to identify alternatives to support youth who are credit deficient. All staff have access to our dashboard tools, including Special Education personnel and central leadership, to guide site level conversations.

III. Data and Analysis

In order to identify appropriate root causes for the LEA's performance in relation to Element 1: Graduation Rate, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 1: Graduation Rate. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
California School Dashboard	
Ed-data.org—Cohort Graduation	**x**
California Longitudinal Pupil Achievement Data System (CALPADS)	
Annual Performance Report (APR)	
Special Education Information System (e.g., SEIS, SIRAS, Welligent)	**x**
UC/CSU eligibility/enrollment data	**x**
Transition Plans	
Student Grades, Transcripts	
Guidance Counselor Information	
Other School Plans (e.g., Local Control Accountability Plan (LCAP), Western Association of Schools and Colleges (WASC), Technology Plan	
Policies and Procedures	**x**
Compliance Review Data (Student Record Reviews, SELPA Governance, Policies and Procedures)	
Parent Input Data	
Other (please state):	

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do systems, policies, procedures, and/or practices address this Element for students with disabilities, and are they working as intended?

This data does not reflect the students that transition to the Young Adult Program and are on certificate track. This data also does not reflect the significant number of students who graduate in their 5th year. Exit codes are noted as a dropout for students who do not complete high school by the end of their 4th year.

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 1: Graduation Rate. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause:

SDC students have limited access to general education courses including those that meet A-G requirements

Data Support and Background for Root Cause:

I. Graduation Rates
   A. 17/18 82% of SPED students did not meet A-G (82% of Gen Ed did)
   B. 16/17, 83% of SPED students did not meet A-G (52.6% of Gen Ed did)
   C. 15/16, 83% of SPED students did not meet A-G (56% of Gen Ed did)

II. College Enrollment
   A. 2018, 65% (29/35) Gen Ed enrolled 2/4 year vs 34% (33/8) SPED
   B. 2017, 65% (32/33) Gen Ed enrolled 2/4 year vs 42% (36/7) SPED
   C. 2016, 67% (35/32) Gen Ed enrolled 2/4 year vs 45% (38/7) SPED

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement (List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)	
1.	Increase the percent of students who spend 50% or more of their time in gen ed courses to 75%
2.	Prepare sites for more inclusive practices
3.	
4.	
5.	
Resources Required (Align numbers with Strategies/Activities for Improvement)	
1.	Support from counselors, site leads, training for teachers towards curriculum design and implementation
2.	Train gen ed staff towards support in Gen Ed. classes, specific training towards modification/accommodation
3.	
4.	
5.	
Title of Person(s) Responsible for Implementation (Align numbers with Strategies/Activities for Improvement)	
1.	Secondary Special Education Coordinators
2.	Secondary Special Education Coordinators, Principals
3.	
4.	
5.	
Start Date (Align numbers with Strategies/Activities for Improvement)	
1.	11/30/20
2.	11/30/20
3.	
4.	
5.	
Date of Completion (Align numbers with Strategies/Activities for Improvement)	
1.	September 2021
2.	September 2021

3.	
4.	
5.	

Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement)**	
1.	**40% of students with IEPs will meet A-G requirements**
2.	**75% of students in SDCs will be mainstreamed over 50% of their day**
3.	
4.	
5.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement)**	
1.	**Use data dashboard information**
2.	**SEIS data based on case manager and % in and out of gen ed**
3.	
4.	
5.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement)**	
1.	**40% of students with IEPs will meet A-G requirements**
2.	**75% of students in SDCs will participate in general education curriculum for 50% or more of their day**
3.	
4.	
5.	

Root Cause 2:

Credit recovery options are not accessible for students with IEPs including summer school options

Data Support and Background for Root Cause:

III. Graduation Rates A. 17/18 82% of SPED students did not meet A-G (82% of Gen Ed did) B. 16/17, 83% of SPED students did not meet A-G (52.6% of Gen Ed did) C. 15/16, 83% of SPED students did not meet A-G (56% of Gen Ed did) IV. College Enrollment A. 2018, 65% (29/35) Gen Ed enrolled 2/4 year vs 34% (33/8) SPED B. 2017, 65% (32/33) Gen Ed enrolled 2/4 year vs 42% (36/7) SPED C. 2016, 67% (35/32) Gen Ed enrolled 2/4 year vs 45% (38/7) SPED

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **(List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
6.	**Add resource specialists to districts general education summer school program**
7.	**Add SpEd central credit recovery program**
8.	
9.	
10.	
Resources Required **(Align numbers with Strategies/Activities for Improvement)**	
6.	**Additional funding for teachers to support students with credit recovery program throughout the full year including the summer**
7.	**Train SpEd teachers in credit recovery program**
8.	
9.	
10.	
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement)**	
6.	**High School Special Education Coordinator, Summer Learning Coordinator**

7.	**High School Special Education Coordinator**
8.	
9.	
10.	
Start Date **(Align numbers with Strategies/Activities for Improvement)**	
6.	**December 2020**
7.	**December 2020**
8.	
9.	
10.	
Date of Completion **(Align numbers with Strategies/Activities for Improvement)**	
6.	**May 2021**
7.	**August 2022**
8.	
9.	
10.	

Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement)**	
6.	**100% of district summer programs will include at least one resource teacher**
7.	**100% of comprehensive high schools will have a Special Education Credit Recovery Lead using the district adopted program with their students**
8.	
9.	
10.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement)**	
6.	**Employee record for Summer School programs**
7.	**Evidence of student progress from credit recovery program per site**
8.	
9.	

10.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement)**	
6.	**21-22 Graduation rates will increase to 30% students with IEPs meeting A-G requirements.**
7.	**21-22 College enrollment rates will increase to 45% students enrolling in a 2/4 year college**
8.	
9.	
10.	

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Root Cause 1:

- SEIS data pulls at each semester regarding percentage of times students are spending in gen-ed settings
- UC/CSU Eligibility data tracking by semester
- Ongoing tracking of teachers/ support providers that participate in professional learning around inclusive settings
    - Agendas, powerpoints, etc.,
- Tracking of general education personnel that participate in training around inclusive settings and practices
    - Agendas, powerpoints, etc.

Root Cause 2:

- Tracking of teachers/ service providers trained to provide A-G aligned credit recovery options to SWD
- Student academic data and tracking of credits recovered through participation in aligned credit recovery programming
- Number of students participating in District provided summer school learning opportunities
- UC/CSU Eligibility data tracking by semester

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019−20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 3b: English Language Arts Participation

Element 3b: English Language Arts (ELA) Participation, corresponds to State Performance Plan Indicator (SPPI) 3b: ELA Participation. The Local Educational Agency (LEA) must address this Element in its 2019–20 Special Education Plan (SEP) if the LEA did not meet the statewide target for SPPI 3b: ELA Participation, as shown on the LEA's Annual Performance Report (APR) and on the *2019–20 Targeted Review Selection Data* chart linked to the January 31, 2020, *Annual Determination Notification.*

Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

I. Review of APR Data

SPPI 3b: ELA Participation has a target of 95 percent of students with disabilities participating in the ELA portion of the California Assessment of Student Performance and Progress (CAASPP) or the California Alternate Assessment (CAA), as shown on the APR.

Using the LEA's APR data, complete the chart below for Element 3b: ELA Participation.

What is the ELA Participation rate (Rate) of students with disabilities?

LEA's ELA Participation Rate	State Target
88.61%	**95%**

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

When testing starts, the district assessment team generates an OUSD dashboard to track participation rate. Schools and districts both have access to this dashboard. Strategies included holding PDs with all SPED and site testing coordinators to reinforce the impact of statewide testing; provide sites with lists of all students with IEPs by test type in advance of the testing window to ensure sites know which students should be testing; family outreach to encourage participation. Yes this indicator for ELA participation was addressed in the 18/19 PIR Plan. Unfortunately, our ELA participation rate went down from 89.55% in 17/18 to 88.61% in 18/19.

III. Data and Analysis

In order to identify appropriate root causes for the LEA's performance in relation to Element 3b: ELA Participation, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The Data Source Checklist, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 3b: ELA Participation. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
California School Dashboard	X
California School Dashboard – Comparison to All Students or Other Student Groups	X
Annual Performance Report – ELA Participation Rate	X
Special Education Information Systems (e.g., SEIS, SIRAS, Welligent)	
Attendance Records, Discipline Data	
CAASPP Makeup Records	
California Longitudinal Pupil Achievement Data System (CALPADS)	
Test Operations Management System (TOMS) Records, Student Score Reports, Accommodations	
IEP Meeting Notes, Parent Opt-Out letters, Testing Accommodations	X

Policies and Procedures	
Compliance Review Data (Student Record Reviews, SELPA Governance Review, Policies and Procedures Review)	
Parent Input Data	
Other School Plans (e.g., Local Control Accountability Plan (LCAP), Western Association of Schools and Colleges (WASC), Technology Plan)	
Other (please state):	

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for students with disabilities, and are they working as intended?

Parent Opt-out; High Absentee rate; Communication from teachers/school staff to parent maybe discouraging participation; SpEd teachers not understanding what it is or why it may be important - need training in how to present testing to students/families; SpEd teachers not actively involved in testing schedule; If vacancy in classroom it may affect participation

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 3b: ELA Participation. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause 1:

Lack of understanding by school staff of the importance of SBAC participation of Special Education students.

Data Support and Background for Root Cause:

Root cause is related to not enough training and conversations rooted in data about the importance of the SBAC for students with disabilities.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	**Train all SpEd teachers and Site Testing Coordinators. In training, emphasize the importance of testing as an indicator of student learning. Include how to ensure accommodations and modifications are provided. Show teachers where to find practice tests and encourage use.**
2.	**Training for SpEd teachers on the relevance of testing, how to use test results in differentiation of instruction, how to minimize stress, and other social-emotional factors from testing.**
3.	**Allow students to practice testing in the computer-based format.**
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Time for training, training materials**
2.	**Time to prepare and send the lists, collaboration with Testing Office**
3.	**Computers**
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Testing Office personnel and site leaders**
2.	**SpEd leadership and Testing Office**
3.	**SpEd Dept (Leadership, Instructional coaches, SpEd teachers)**
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**January 2021**
2.	**January 2021**
3.	**January 2021**
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**April 2021**
2.	**April 2021**
3.	**April 2021**

Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Increase participation rates for students with IEPs to take SBAC as shown in state reports.**
2.	**Increase participation rates for students with IEPs to take SBAC as shown in state reports**
3.	**Increase participation rates for students with IEPs to take SBAC as shown in state reports**
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Measured by training participation of Site Testing Coordinators and SpEd teachers.**
2.	**Measured by training participation of Site Testing Coordinators and SpEd teachers.**
3.	**Measured by rate of teacher participation in practice tests**
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Increased testing participation rates.**
2.	**Increased testing participation rates**
3.	**Increased testing participation rates**

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Evidence of trainings listed above for SpEd teachers and site testing coordinators. List of students with IEPs including test type. Evidence of time given to students to practice testing with computers.

Root Cause 2:

SpEd Department (including SpEd Teachers) gets missed in communication - lack of communication between Testing Office and sites to note who is not being included in testing in real time, as well as looking at previous year's testing participation.

Data Support and Background for Root Cause:

Root cause is related to lack of meetings between the Testing Office and Department of Special Education.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	**Develop communication system to share information about participation between Testing Office and SpEd Department**
2.	**Testing Office will compile data about who is not participating and complete outreach to Site Administrators, Testing Coordinators, SpEd Department**
3.	**Monitoring of participation by Testing Office throughout the testing window and target sites with lower participation during last year's test.**
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Training around communication system and time to collaborate and develop system for Site Testing Coordinators for outreach to Administrators, teachers, and families**
2.	**Time, access to AERIES, SEIS, Data Dashboard**
3.	**Time, access to AERIES, SEIS, Data Dashboard**
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
1. **2.**	**Testing Office and SpEd leadership** **Testing Office and SpEd leadership**
3.	**Testing Office, Site administrators and SpEd leadership**
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	

1.	**January 2021**
2.	**January 2021**
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**April 2021**
2.	**April 2021**

Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
1. **2.** **3.**	**Improved communication between team members** **Increased participation rates for students with IEPs to take CAASPP as shown in state reports.** **Increased participation rates for students with IEPs to take CAASPP as shown in state reports.**
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
1. **2.**	**Documentation of increased communication between departments** **Measured by analysis of state reports of participation rates.**
3.	**Measured by analysis of state reports of participation rates.**
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Increased testing participation rates**
2. **3.**	**Increased testing participation rates** **Increased testing participation rates**

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).

5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Documentation to show development and final plan for communication system to share information around participation between testing office and sites. Evidence from testing coordinators, such as family communication logs, to show that they have made outreach to families of students who are not included.

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Compilation of data collected that shows reasons for non-participation. Evidence that this data has been shared with network leads and other central office stakeholders.

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 3b: Math Participation

Element 3b: Math Participation corresponds to State Performance Plan Indicator (SPPI) 3b: Math Participation. The Local Educational Agency (LEA) must address this Element in its 2019–20 Special Education Plan (SEP) if the LEA did not meet the statewide target for SPPI 3b: Math Participation as shown on the LEA's Annual Performance Report (APR) and on the *2019–20 Targeted Review Selection Data* chart linked to the January 31, 2020, *Annual Determination Notification*.

Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

I. Review of APR Data

SPPI 3b: Math Participation has a target of 95 percent of students with disabilities participating in the Math portion of the California Assessment of Student Performance and Progress (CAASPP) or the California Alternate Assessment (CAA), as shown on the APR.

Using the LEA's APR data, fill out the chart below for Element 3b: Math Participation.

What is the Math Participation rate (Rate) of students with disabilities?

LEA's Math Participation Rate	State Target
87.85%	**95%**

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

When testing starts, the district assessment team generates an OUSD dashboard to track participation rate. Schools and districts both have access to this dashboard. Strategies included holding PDs with all SPED and site testing coordinators to reinforce the impact of statewide testing; provide sites with lists of all students with IEPs by test type in advance of the testing window to ensure sites know which students should be testing; family outreach to encourage participation.; Yes this indicator for Math participation was addressed in the 18/19 PIR Plan. Unfortunately, our Math participation rate went down from 88.91% in 17/18 to 87.85% in 18/19.

III. Data and Analysis

In order to identify appropriate root causes for the LEA's performance in relation to Element 3b: Math Participation, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The Data Source Checklist, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 3b: Math Participation. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
California School Dashboard – Math Participation	X
California School Dashboard – Comparison to All Students or Other Student Groups	X
APR – Math Participation Rate	X
Special Education Information Systems (e.g., SEIS, SIRAS, Welligent)	X
Attendance Records, Discipline Data	
CAASPP Makeup Records	
California Longitudinal Pupil Achievement Data System (CALPADS)	
Test Operations Management System (TOMS) Records, Student Score Reports, Accommodations	
IEP Meeting Notes, Parent Opt-Out letters, Testing Accommodations	X
Policies and Procedures	X

Compliance Review Data (Student Record Reviews, SELPA Governance Review, Policies and Procedures Review)	
Parent Input Data	
Other School Plans, such as the Local Control Accountability Plan (LCAP), Western Association of Schools and Colleges (WASC), Technology Plan	
Other (please state):	

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for students with disabilities, and are they working as intended?

Parent Opt-out; High Absentee rate; Communication from teachers/school staff to parent maybe discouraging participation; SpEd teachers not understanding what it is or why it may be important -need training in how present testing to students/families; SpEd teachers not actively involved in testing schedule; If vacancy in classroom it may affect participation,

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 3b: Math Participation. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one and only one root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause 1:

Lack of understanding by school staff of the importance of SBAC participation of Special Education students.

Data Support and Background for Root Cause:

Root cause is related to not enough training and conversations rooted in data about the importance of the SBAC for students with disabilities.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	**Train all SpEd teachers and Site Testing Coordinators. In training, emphasize the importance of testing as an indicator of student learning. Include how to ensure accommodations and modifications are provided. Show teachers where to find practice tests and encourage use.**
2.	**Training for SpEd teachers on the relevance of testing, how to use test results in differentiation of instruction, how to minimize stress and other social-emotional factors from testing.**
3.	**Allow students to practice testing in the computer-based format.**
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Time for training, training materials**
2.	**Time to prepare and send the lists, collaboration with Testing Office**
3.	**Computers**
	Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**
1.	**Testing Office personnel and Site leaders**
2.	**SpEd Leadership and Testing Office**
3.	**SpEd Department ((Leadership, Instructional coaches, SpEd teachers)**
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**January 2021**
2.	**January 2021**
3.	**January 2021**

Date of Completion (Align numbers with Strategies/Activities for Improvement.)	
1.	April 2021
2.	April 2021
3.	April 2021
Phase 2: Monitoring of Improvement	
Expected Outcome(s) (Align numbers with Strategies/Activities for Improvement.)	
1.	Increase participation rates for students with IEPS to take SBAC as shown in state reports.
2.	Increase participation rates for students with IEPS to take SBAC as shown in state reports.
3.	Increase participation rates for students with IEPS to take SBAC as shown in state reports.
Methods of Measurement (Align numbers with Strategies/Activities for Improvement.)	
1.	Measured by training participation of Site Testing Coordinators and SpEd teachers.
2.	Measured by training participation of Site Testing Coordinators and SpEd teachers.
3.	Measured by rate of teacher participation in practice tests
	Quantifiable Standards of Improvement (Align numbers with Strategies/Activities for Improvement.)
1.	Increased testing participation rates.
2.	Increased testing participation rates.
3.	Increased testing participation rates.

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).

5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Evidence of trainings listed above for SpEd teachers and site testing coordinators. List of students with IEPs including test type. Evidence of time given to students to practice testing with computers.

Root Cause 2:

SpEd Department (including SpEd Teachers) gets missed in communication - lack of communication between Testing Office and sites to note who is not being included in testing in real time, as well as looking at previous year's testing participation.

Data Support and Background for Root Cause:

Root cause is related to lack of meetings between the Testing Office and Department of Special Education.

Phase 1: Improvement Strategy Development

Strategies/Activities for Improvement

List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)

1.	**Develop communication system to share information about participation between Testing Office and SpEd Department**
2.	**Testing Office will compile data about who is not participating and complete outreach to Site Administrators, Testing Coordinators, SpEd Department**
3.	**Monitoring of participation by Testing Office throughout the testing window and target sites with lower participation during last year's test.**

Resources Required

(Align numbers with Strategies/Activities for Improvement.)

1.	Training around communication system and time to collaborate and develop system for Site Testing Coordinators for outreach to Administrators, teachers, and families
2.	Time, access to AERIES, SEIS, Data Dashboard
3.	Time, access to AERIES, SEIS, Data Dashboard
Title of Person(s) Responsible for Implementation (Align numbers with Strategies/Activities for Improvement.)	
1.	Testing Office and SpEd leadership
2.	Testing Office and SpEd Leadership
3.	Testing Office, Site Administrators, and SpEd Leadership
Start Date (Align numbers with Strategies/Activities for Improvement.)	
1.	January 2021
2.	January 2021
3.	January 2021
Date of Completion (Align numbers with Strategies/Activities for Improvement.)	
1.	April 2021
2.	April 2021
3.	April 2021
Phase 2: Monitoring of Improvement	
Expected Outcome(s) (Align numbers with Strategies/Activities for Improvement.)	
1.	Improved communication between team members
2.	Increased participation rates for students with IEPs to take CAASPP as shown in state reports.
3.	Increased participation rates for students with IEPs to take CAASPP as shown in state reports.
Methods of Measurement (Align numbers with Strategies/Activities for Improvement.)	
1.	Documentation of increased communication between departments
2.	Measured by analysis of state reports of participation rates.
3.	Measured by analysis of state reports of participation rates.
Quantifiable Standards of Improvement (Align numbers with Strategies/Activities for Improvement.)	
1.	Increased testing participation rates
2.	Increased testing participation rates
3.	Increased testing participation rates

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Documentation to show development and final plan for communication system to share information around participation between Testing Office and sites. Evidence from testing coordinators, such as family communication logs, to show that they have made outreach to families of students who are not included.

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Compilation of data collected that shows reasons for non-participation. Evidence that this data has been shared with network leads and other central office stakeholders.

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019-20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 3c: English Language Arts Achievement

Element 3c: English Language Arts (ELA) Achievement, corresponds to academic performance in ELA as shown on the California School Dashboard (Dashboard) for students with disabilities, and to State Performance Plan Indicator (SPPI) 3c: ELA Achievement as shown on the Annual Performance Report (APR). The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The Local Educational Agency (LEA) must address this Element in its 2019–20 SEP if the *Elements Requiring Review* list shows "Yes" for this Element in the Review Required column.

I. Review of Dashboard and APR Information/Data

The 2019 Dashboard method for calculating ELA Achievement differs from the method used for the SPPI 3c: ELA Achievement calculation on the APR. The Dashboard calculations reflect the Distance from Standard, which is the measurement of how many points, on average, students are from the lowest possible score for Standard Met. Each of those calculations differs from the SPPI 3c calculation method on the APR report. The APR calculation reflects the number of students with disabilities scoring at or above the standard divided by the total number of students with disabilities who received a valid score and for whom a proficiency level was assigned. Each method of calculation is used in determining whether the LEA is in the Targeted or the Intensive Review, and both are valid for understanding the LEA's performance on the ELA portion of the California Assessment of Student Performance and Progress (CAASPP) and the California Alternate Assessment (CAA).

A. Review of Dashboard Information/Data

The LEA's performance level for ELA achievement on the Dashboard is a combination of Status Level and Change Level. The SEP Team's understanding of the Dashboard data and performance levels will be essential in the team's determination of root causes and corresponding strategies/activities. The SEP Team may determine root causes applicable to the Status Level, Change Level, or both depending on the LEA's Dashboard data.

Using the data on the 5x5 English Language Arts Placement Report (Grades 3-8 and 11)–Detailed Data from the LEA's 2019 California School Dashboard, complete the charts below with information for the student group: Students with Disabilities.

Color	Status Level	Change Level	CURRENT STATUS: Average distance from Standard	CHANGE: Difference between current status and prior status
Orange	**Very Low**	**Increased**	**-119.7**	**6.7**

Based on the above information, indicate the area(s) the LEA intends to address.

Area to Address	Yes or No
Status Level	Yes
Change Level	*Yes*

B. Review of APR Data

Using the SSPI data from the LEA's APR, complete the chart below for 3c: ELA Achievement.

LEA's Rate	State Target
8.92%	**15.9%**

Once the LEA has determined the LEA's performance level on the Dashboard and the APR in ELA Achievement, complete the chart below.

Accountability System	Performance Level to Meet Requirements	Did the LEA Meet the Performance Level?
Dashboard	Blue, Green or Yellow	No
APR	>15.9%	No

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies relevant to this Element that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

OUSD ELA went from Red level to Orange level, which indicates improvement. ELA achievement was addressed in the 18/19 PIR Plan. Strategies included more Gen Ed participation for SWD in ELA gen ed classes; PD for Gen Ed teachers regarding disability awareness, Ensure classrooms have appropriate Tier One curricula, Mindset-low expectations -bias from school staff; IEP accommodations are being implemented

III. Data and Analysis

In order to identify appropriate root causes for the LEA's performance in relation to Element 3c: ELA Achievement, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist* below should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 3c: ELA Achievement. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
California School Dashboard— ELA for Student with Disabilities	**X**
California School Dashboard— Comparison to All Students or Other Student Groups	**X**
Test Operations Management System (TOMS) Student Score Reports	
Test Operations Management System (TOMS) Accommodations	
Interim or Other Assessments	
Classroom-level Data— Student Grades, Assignment Grades	**X**
Annual Performance Report (APR) – ELA Achievement, Participation Rate, Least Restrictive Environment (LRE)	**X**
Special Education Information System (e.g**.,** SEIS, Welligent, SIRAS)	**X**
Service Logs and/or Pull-Out Schedules	

Student Course Enrollment Data, Attendance Records, Schedules, and/or Transcripts	
California Longitudinal Pupil Achievement Data System (CALPADS)	**X**
Empathy Interview/ Focus Group Data	
Observation of English class(es)	
Observation of Testing (CAASPP or Other Testing Environment)	
Professional Development Records	
Curriculum Guides, Lesson Plans, Syllabi	
Other School Plans (e.g., Local Control Accountability Plan (LCAP), Western Association of Schools and Colleges (WASC), Technology Plan)	
Policies and Procedures	**X**
Compliance Review Data (Student Record Reviews, SELPA Governance Review, Policies and Procedures Review)	**X**
Parent Input Data	
Other (please state):	

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for students with disabilities, and are they working as intended?

Not enough access to Gen Ed curriculum, Gen Ed teachers without enough resources to support SWD, students being pulled out for services and missing instruction, Mis-match between test students are taking and the accommodations they should have in place.

Teacher report: “Test directions and questions are worded and not always student-friendly. Students sometimes do not pay attention when I read test items and just guess. Students are also not used to taking tests in an online and no-support environment. There is not much time for teaching test-taking skills.”

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA’s performance level specific to Element 3c: ELA Achievement. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and

provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause 1:

Lack of access to supportive curriculum for students with disabilities and Gen-Ed teachers not having resources to support students with disabilities

Data Support and Background for Root Cause:

Qualitative data indicates that about 30-50% of our Special Education teachers are implementing newly adopted Intervention Reading curriculum (ex. Spire). While Special Education teachers may have access to General Education curriculum, the use of that curriculum is not consistent.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	**Increase percentage of time included in General Education for ELA**
2.	**Ensure all SpEd classrooms have appropriate Tier 1 curricula**
3.	**Trainings for Gen-Ed teachers on disability awareness and on how to read and implement IEPs**
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Professional Development**
2.	**Fund curriculum materials for SpEd classes**
3.	**Funding to stipend teachers for PD participation and Develop trainings on disability awareness and on IEPs for Gen-Ed teachers**
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**SpEd case managers, Site administrators, SpEd Leadership**

2.	**Academic division and SpEd Leadership**
3.	**SpEd Director, Chief Academic Officer, Sped Dept**
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**January 2021**
2.	**January 2021**
3.	**January 2021**
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**May 2021**
2.	**May 2021**
3.	**May 2021**
Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Improved test scores in ELA**
2.	**Improved test scores in ELA**
3.	**Improved test scores in ELA**
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Audit percentage in LRE gen-ed classes on IEPs of a randomized sample of SBAC participants and compare 20-21 and 21-22 Gen Ed. time**
2.	**Audit SpEd classrooms to determine access to Gen-Ed curricula**
3.	**Training Participation rate of teachers**
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Analysis of test scores for ELA**
2.	**Analysis of test scores for ELA**
3.	**Analysis of test scores for ELA**

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).

3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

-Comparison data between 2 year of access GenEd time based on IEP minutes. -Evidence of curricula audit of SpEd classrooms. Evidence of trainings that have happened in specific curricula for special education teachers. -Documentation of training for general education teachers on disability awareness and how to implement IEPs.

Root Cause 2:

Students not having access to standardized test accommodations as guaranteed in IEP (Missing from IEP or IEP not being followed during testing.)

Data Support and Background for Root Cause:

Per SEIS search: At least 362 students have no accommodations listed in SBAC accommodations for ELA. Other students have accommodations listed but at times the accommodations do not correctly match the needs of the student.

Phase 1: Improvement Strategy Development

Strategies/Activities for Improvement

List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)

1.	**Holding timely IEPs that include compliant testing status and accommodations**
2.	**All Case Managers and General Education teachers will be trained on how to address all testing requirements and access accommodations**
3.	**All General Education teacher will have access to "IEPs at a Glance" which include accommodations**

Resources Required (Align numbers with Strategies/Activities for Improvement.)	
1.	Training for Case Managers to calendar their IEP to make sure IEPs are held before testing window
2.	Provide mandatory training sessions on statewide testing and provide opportunities for individualized support at sites with the lowest achievement rates.
3.	Instructional Coach support to ensure all Case Managers distribute "IEPs at a Glance" to General Education teachers at the onset of the school year and again prior to statewide testing window.
Title of Person(s) Responsible for Implementation (Align numbers with Strategies/Activities for Improvement.)	
1.	SpEd leadership, Site Principals, SpEd Department
2.	SpEd leadership, Site Principals, Testing Coordinators
3.	SpEd leadership, Site Principals, Testing Coordinators
	Start Date (Align numbers with Strategies/Activities for Improvement.)
1.	January 2021
2.	January 2021
3.	January 2021
Date of Completion (Align numbers with Strategies/Activities for Improvement.)	
1.	May 2021
2.	May 2021
3.	May 2021
Phase 2: Monitoring of Improvement	
Expected Outcome(s) (Align numbers with Strategies/Activities for Improvement.)	
1.	Improved test scores in ELA
2.	Improved test scores in ELA
3.	Improved test scores in ELA
Methods of Measurement (Align numbers with Strategies/Activities for Improvement.)	
1.	Increase in the achievement of students taking the CAASPP to meet indicators by the close of Spring 2021 testing window.
2.	Pre and Post survey re: knowledge of training
3.	Case manager to cc both Principal and appropriate when sending out the "IEP in a Glace doc" to Gen Ed staff

Quantifiable Standards of Improvement (Align numbers with Strategies/Activities for Improvement.)	
1.	**Analysis of test scores**
2.	**Analysis of test scores**
3.	**Analysis of test scores**

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

6. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
7. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
8. Evidence that the SEP Team has monitored the implementation of its plan.
9. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
10. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

-Evidence of calendared IEP meetings for the year from Case Managers.

-Evidence of participation of training on appropriate statewide testing accommodations in IEPs.

-Evidence that General Education teachers have received emailed copies of “IEPs at a Glance”.

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 3c: Math Achievement

Element 3c: Math Achievement corresponds to academic performance in Math as shown on the California School Dashboard (Dashboard) for students with disabilities, and to State Performance Plan Indicator (SPPI) 3c: Math Achievement as shown on the Annual Performance Report (APR). The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The Local Educational Agency (LEA) must address this Element in its 2019–20 SEP if the *Elements Requiring Review* list shows "Yes" for this Element in the Review Required column.

I. Review of Dashboard and APR Information/Data

The 2019 Dashboard method for calculating Math Achievement differs from the method used for the SPPI 3c: Math Achievement calculation on the APR. The Dashboard calculations reflect the Distance from Standard, which is the measurement of how many points, on average, students are from the lowest possible score for Standard Met. Each of those calculations differ from the SPPI 3c calculation method on the APR report. The APR calculation reflects the number of students with disabilities scoring at or above the standard, divided by the total number of students with disabilities who received a valid score and for whom a proficiency level was assigned. Each method of calculation is used in determining whether the LEA is in the Targeted or the Intensive Review, and both are valid for understanding the LEA's performance on the Math portion of the California Assessment of Student Performance and Progress (CAASPP) and the California Alternate Assessment (CAA).

A. Review of Dashboard Information/Data

The LEA's performance level for Math Achievement on the Dashboard is a combination of Status Level and Change Level. The SEP Team's understanding of the Dashboard data and performance levels will be essential in the team's determination of root causes and corresponding strategies/activities. The SEP Team may determine root causes applicable to their Status Level, Change Level, or both depending on the LEA's Dashboard data.

Using the data on the 5x5 Mathematics Placement (Grades 3–8 and 11) Detailed Report from the LEA's 2019 California School Dashboard, complete the charts below with information for the student group: Students with Disabilities.

Color	Status Level	Change Level	CURRENT STATUS: Average distance from Standard	CHANGE: Difference between current status and prior status
Orange	**Very Low**	**Increased**	**-144.7**	**7.4**

Based on the above information, indicate the area(s) the LEA intends to address.

Area to Address	Yes or No
Status Level	Yes
Change Level	Yes

B. Review of APR Data

Using the SPPI data from the LEA's APR, complete the chart below for 3c: Math Achievement.

LEA's Rate	State Target
7.86 %	**13.6%**

Once the LEA has determined the LEA's performance level on the Dashboard and the APR in Math Achievement, complete the chart below.

Accountability System	Performance Level to Meet Requirements	Did the LEA Meet or Exceed the Performance Level?
Dashboard	Blue, Green or Yellow	No
APR	>13.6%	No

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

OUSD Math went from Red to Orange so there was improvement, Math achievement was addressed in the 18/19 PIR Plan. Strategies included more Gen Ed participation for SWD in ELA gen ed classes; PD for gen ed teachers regarding disability awareness; Ensure classrooms have appropriate Tier One curricula, Mindset-low expectations -bias from school staff; IEP accommodations are being implemented.

III. Data and Analysis

In order to identify appropriate root causes for the LEA's performance in relation to Element 3c: Math Achievement, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 3c: Math Achievement. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
California School Dashboard—Math Achievement for students with disabilities	**X**
California School Dashboard – Comparison to All Students or other student groups	**X**
Test Operations Management System (TOMS) Student Score Reports	
Test Operations Management System (TOMS) Accommodations	
Interim or Other Assessments	
Classroom-level Data — Student Grades, Assignment Grades	
APR – Math Achievement, Participation Rate, Least Restrictive Environment (LRE)	**X**
Special Education Information System (e.g., SEIS, Welligent, SIRAS)	**X**

Service and/or Pull-Out Schedules	
Student Course Enrollment Data Attendance Records, Schedules, and/or Transcripts	
California Longitudinal Pupil Achievement Data System (CALPADS)	
Empathy Interview/ Focus Group Data	
Observation of Math Class(es)	
Observation of Testing (CAASPP or Other Testing Environment)	
Professional Development Records	
Curriculum Guides, Lesson Plans, Syllabi	
Other School Plans (e.g., Local Accountability Plan (LCAP), Western Association of Schools and Colleges (WASC), Technology Plan)	
Policies and Procedures	
Compliance Review Data (Student Record Reviews, SELPA Governance Review, Student Record Review)	**X**
Parent Input Data	
Other (please state):	

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for students with disabilities, and are they working as intended?

Teacher report: “Test directions and questions are worded and not always student-friendly. Students sometimes do not pay attention when I read test items and just guess. Students are also not used to taking tests in an online and no-support environment.There is not much time for teaching test-taking skills.”
Not enough access to Gen Ed curriculum, Gen Ed teachers without enough resources to support SWD, students being pulled out for services and missing instruction, Mis-match between test students are taking and the accommodations they should have in place.

V. Root Cause Analysis and Improvement Form

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 3c: Math Achievement. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one and only one root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause 1:

Lack of access to supportive curriculum for students with disabilities and Gen-Ed teachers not having resources to support students with disabilities.

Data Support and Background for Root Cause:

Qualitative data indicates that students with disabilities do not have access to intervention curriculum for Math. Special Education teachers are using the General Education curriculum or creating/using their own materials which leads to an inconsistent scope and sequence.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	**Increase percentage of time included in General Education for Math**
2.	**Ensure all SpEd classrooms have appropriate Tier 1 curricula**
3.	**Trainings for Gen-Ed teachers on disability awareness and on how to read and implement IEPs**

Resources Required (Align numbers with Strategies/Activities for Improvement.)	
1.	Professional Development
2.	Fund curriculum materials for SpEd classes
3.	Funding to stipend teachers for PD participation and Develop trainings on disability awareness and on IEPs for Gen-Ed teachers
Title of Person(s) Responsible for Implementation (Align numbers with Strategies/Activities for Improvement.)	
1.	SpEd case managers, Site administrators, SpEd Leadership
2.	Academic division and SpEd Leadership
3.	SpEd Director, Chief Academic Officer, Sped Dept
Start Date (Align numbers with Strategies/Activities for Improvement.)	
1.	January 2021
2.	January 2021
3.	January 2021
Date of Completion (Align numbers with Strategies/Activities for Improvement.)	
1.	May 2021
2.	May 2021
3.	May 2021
Phase 2: Monitoring of Improvement	
Expected Outcome(s) (Align numbers with Strategies/Activities for Improvement.)	
1.	Improved Test Scores in Math
2.	Improved Test Scores in Math
3.	Improved Test Scores in Math
Methods of Measurement (Align numbers with Strategies/Activities for Improvement.)	
1.	Audit percentage in LRE gen-ed classes on IEPs of a randomized sample of SBAC participants and compare 20-21 and 21-22 Gen Ed. time
2.	Audit SpEd classrooms to determine access to Gen-Ed curricula
3.	Training Participation rate of teachers
Quantifiable Standards of Improvement (Align numbers with Strategies/Activities for Improvement.)	
1.	Analysis of test scores in Math
2.	Analysis of test scores in Math
3.	Analysis of test scores in Math

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Evidence of trainings that have happened in specific curricula for special education teachers. Evidence of implementation of said curricula in special day classes. Documentation of training for general education teachers on disability awareness and how to implement IEPs.

Root Cause 2:

Students not having access to standardized test accommodations as guaranteed in IEP (Missing from IEP or IEP not being followed during testing.)

Data Support and Background for Root Cause:

Per SEIS search: At least 364 students have no accommodations listed in SBAC accommodations for Math. Other students have accommodations listed but at times the accommodations do not correctly match the needs of the student.

Phase 1: Improvement Strategy Development

Strategies/Activities for Improvement

List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)

1.	Holding timely IEPs that include compliant testing status and accommodations
2.	All Case Managers and General Education teachers will be trained on how to address all testing requirements and access accommodations
3.	All General Education teacher will have access to "IEPs at a Glance" which include accommodations
Resources Required (Align numbers with Strategies/Activities for Improvement.)	
1.	Training for Case Managers to calendar their IEP to make sure IEPs are held before testing window
2.	Provide mandatory training sessions on statewide testing and provide opportunities for individualized support at sites with the lowest achievement rates.
3.	Instructional Coach support to ensure all Case Managers distribute "IEPs at a Glance" to General Education teachers at the onset of the school year and again prior to statewide testing window.
Title of Person(s) Responsible for Implementation (Align numbers with Strategies/Activities for Improvement.)	
1.	SpEd leadership, Site Principals, SpEd Department
2.	SpEd leadership, Site Principals, Testing Coordinators
3.	SpEd leadership, Site Principals, Testing Coordinators
Start Date (Align numbers with Strategies/Activities for Improvement.)	
1.	January 2021
2.	January 2021
3.	January 2021
Date of Completion (Align numbers with Strategies/Activities for Improvement.)	
1.	May 2021
2.	May 2021
3.	May 2021
Phase 2: Monitoring of Improvement	
Expected Outcome(s) (Align numbers with Strategies/Activities for Improvement.)	
1.	Improved test scores in Math
2.	Improved test scores in Math
3.	Improved test scores in Math

Methods of Measurement (Align numbers with Strategies/Activities for Improvement.)	
1.	Increase in the achievement of students taking the CAASPP to meet indicators by the close of Spring 2021 testing window.
2.	Pre and Post survey re: knowledge of training
3.	Case manager to cc both Principal and appropriate when sending out the "IEP in a Glace doc" to Gen Ed staff
	Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**
1.	Analysis of test scores
2.	Analysis of test scores
3.	Analysis of test scores

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

-Evidence of calendared IEP meetings for the year from Case Managers.

-Evidence of participation of training on appropriate statewide testing accommodations in IEPs.

-Evidence that General Education teachers have received emailed copies of "IEPs at a Glance".

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland USD

2019–20 Special Education Plan
Element 5b: LRE–Regular Class Less Than 40%

Element 5b: Least Restrictive Environment (LRE)–Regular Class Less Than 40% corresponds to State Performance Plan Indicator (SPPI) 5b: LRE–Regular Class Less Than 40%. The Local Educational Agency (LEA) must address this Element in its 2019–20 Special Education Plan (SEP) if the LEA did not meet the statewide target for SPPI 5b: LRE–Regular Class Less Than 40%, as shown on the LEA's Annual Performance Report (APR) and on the *2019–20 Targeted Review Selection Data* chart linked to the January 31, 2020, *Annual Determination Notification.*

Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

I. Review of APR Data

SPPI 5 measures LRE by calculating the average amount of time students ages six through twenty-one receive their special education or related services in settings apart from their peers in general education settings.

This is a three-part test which:

a. Measures the percentage of students who are in a regular class 80 percent or more of their day;
b. Measures the percentage of students who are in a regular class less than 40 percent of their day;
c. Measures the percentage of students in separate schools, residential facilities, or homebound/hospital placement.

This *Element Form* focuses only on the second part (5b), the percentage of students who are in a regular class less than 40 percent of their day. Using the data from the LEA's APR, complete the chart below and answer the questions for LRE–Regular Class Less Than 40%:

LEA Rate for LRE–Regular Class Less Than 40%	State Target
26.38%	<21.6%

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

Oakland Unified School District has invested in a number of strategies specific to ensuring students' access to the least restrictive environment over the last three years, including strategies put forth in our 2018-19 PIR Plan. These include:

- Adding teaching and support staff to specific campuses to support inclusion-based programming;
- Selecting and implementing multi-sensory literacy curriculum across all mild-moderate programs to reduce literacy-related barriers to general education instruction;
- Providing training for central office personnel and department leaders in Universal Design for Learning (UDL);
- Investing in full continuums of Special Education programs across all grade levels of a school site to allow students with IEPs to build relationships with staff and transition fewer times in their academic careers.

III. Data and Analysis

In order to identify appropriate root causes for the LEA's performance in relation to Element 5b: LRE–Regular Class Less Than 40%, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 5b: LRE–Regular Class Less Than 40%. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
California School Dashboard	X
California School Dashboard—Comparison to All Students or Other Student Groups	
California Longitudinal Pupil Achievement Data System (CALPADS)	
Annual Performance Report (APR)	
Special Education Information System (e.g., SEIS, SIRAS, Welligent)	X
Service Logs and/or Pull-out Schedules	
Student Course Enrollment Data	X
Policies and Procedures	X
Compliance Review Data (Student Record Reviews, SELPA Governance Review, Policies and Procedures Review)	
IEP Placement and Discussion Notes; Pertinent Assessments	X
Transition Plans	
Guidance Counselor Information	
Discipline Information	
Other School Plans (e.g., Local Control Accountability Plan (LCAP), Western Association of Schools and Colleges, (WASC), Technology Plan)	
Parent Input Data	
Other (please state): OUSD District Dashboards, COST Team and SST Records	X

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for students with disabilities, and are they working as intended?

The team identified a need to refine and expand our policies and practices specific to inclusion. For example, while there is a policy that requires IEP teams to consider the LRE when making placement determinations, there is not a current district-wide plan that sets forth goals related to service of students in the LRE along with professional learning and technical assistance opportunities offered by the District to support such progress. Site personnel need much more robust information and support to ensure students can be meaningfully included in the general education setting.

The SEP Team should also consider the novel opportunities and challenges related to inclusion associated with the current closure of schools for in-person instruction and the likelihood of some form of distance or blended learning for months to come.

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 5b: LRE–Regular Class Less Than 40%. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause One:

Materials and professional learning experiences for General and Special Educators are distinct and siloed across the district, which prevents the collaboration and cross-training that is necessary to facilitate quality inclusion.

Data Support and Background for Root Cause:

Currently, the central office teams that prepare professional development experiences and distribute curricular materials for Special and General Education are entirely separate.

Curricular material distribution data indicates that self-contained mild-moderate classrooms do not have general education materials unless provided by individual site leaders, and Williams audit data from recent years underscores this gap in access to the materials utilized in general education classrooms.

An audit of IEPs for students in elementary Special Day Class (SDC) settings indicated that in more than half of opportunities, IEP teams are not discussing the possibility of including the child in general education, even for specific portions of the

day. The goals within these same IEPs demonstrate potential gaps in Special Education teacher understanding of the Common Core State Standards.

Qualitative data collected from school site personnel reinforces that most teachers feel that the collaboration time provided to general and special educators is insufficient. Feedback from general education staff is that they feel unprepared to support students with more complex needs in their classrooms, and feedback from Special Educators indicates that Special Educators do not prefer to have to choose to either participate in Special Ed or General Ed PD activities.

Finally, the Department's professional learning offerings for support staff have focused exclusively on behavioral and functional skill supports with no content specific to instructional strategies or adopted curricula.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	Ensure every mild-moderate special day class has access to all grade level-appropriate general education materials being utilized at their school site.
2.	Create a collaborative partnership between the Academic Innovation team and Special Education team to plan joint professional learning experiences.
3.	Develop and implement a curricular resources training series for paraeduators and instructional support specialists.
4.	Invest in Universal Design for Learning training and Inclusive Best Practices for all staff as a part of OUSD's foundational PD for educators.
5.	Partner with the supervisors of school sites that have mild-moderate programs to ensure site-based PD plans embed disability-centered collaboration time.
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Include Special Educators and students in the budget for all curricular adoptions and distribution during budget development.
2.	Ongoing time to plan joint sessions.
3.	Funds and time for professional learning sessions.
4.	Funds and time for sessions and follow-up mentoring/technical assistance for staff supporting students in general education settings.
5.	Ongoing time to meet with network leaders at the onset of each instructional year.

Title of Person(s) Responsible for Implementation (Align numbers with Strategies/Activities for Improvement.)	
1.	Executive Director, Academics
2.	Executive Director and Coordinators, Academics and Executive Director and Coordinators, Special Education
3.	Executive Director, Special Education
4.	Chief Academic Officer, Executive Director, Academics, and Executive Director, Special Education
5.	Network Superintendents for each network of schools and Coordinators, Special Education
Start Date (Align numbers with Strategies/Activities for Improvement.)	
1.	Spring, 2021 planning for August, 2021 distribution
2.	April, 2021
3.	February, 2021
4.	June, 2021
5.	May, 2021
Date of Completion (Align numbers with Strategies/Activities for Improvement.)	
1.	August, 2021 and each year ongoing
2.	July, 2021
3.	Sessions from August, 2021 to June, 2022
4.	June, 2023
5.	July, 2021

Phase 2: Monitoring of Improvement	
Expected Outcome(s) (Align numbers with Strategies/Activities for Improvement.)	
1.	100% of mild-moderate Special Day Classes will have access to general education curricula and professional learning specific to such materials.
2.	At least four professional learning sessions focused on general and special educator collaboration will be developed at the central department level.
3.	80% of support staff will receive at least four hours of training specific to district-adopted instructional materials and implementation of academic accommodations and modifications.
4.	Targeted elementary and middle schools with mild-moderate programs will participate in tailored professional learning and follow-up support specific to inclusive practices.

5.	**All school sites with mild-moderate programs will have a monthly opportunity for disability-based teacher collaboration.**
Methods of Measurement (Align numbers with Strategies/Activities for Improvement.)	
1.	**Distribution trackers and classroom visits**
2.	**Staff participation in PD**
3.	**Staff training logs/sign-ins**
4.	**Agendas and materials from training**
5.	**Site annual PD plans**
Quantifiable Standards of Improvement (Align numbers with Strategies/Activities for Improvement.)	
1.	**Special Day Class teachers will report improvement in their use and understanding of standards-aligned curriculum, as measured by teacher surveys. There will be a 40%+ increase in use of general education instructional materials in mild-moderate classrooms as evidenced by classroom instructional observations.**
2.	**Staff will report greater satisfaction with collaboration time available, as measured by staff surveys**
3.	**Support staff will report feeling more prepared to support students in general education settings, as measured by staff surveys**
4.	**At least 20% of students in fully self-contained programs at the targeted sites will move into the general education setting for 15% or more of the instructional day, as indicated by student schedules and IEPs.**
5.	**Staff will report greater satisfaction with collaboration time available, as measured by staff surveys**

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).

5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

- We will maintain sign-ins and agendas from professional learning sessions
- We will track curricular distribution
- We will summarize classroom observational data specific to curricular implementation
- We will monitor student IEPs at school sites identified for inclusion-based support
- We will compile site professional development plans to ensure dedicated time to focus on supporting students with disabilities

Root Cause Two:

The district's allocation of inclusion-based programs and general education seat capacity across sites pose logistical barriers to greater inclusion for students served in Special Day Classes and prevents mid-year movement into the LRE.

Data Support and Background for Root Cause:

Teachers and school principals report that lack of physical and roster space in general education classrooms is a barrier to inclusion and/or mainstreaming efforts. When general education classrooms are full, teachers and teams are less likely to welcome additional students into their spaces for all or part of the day.

Schools with fewer special education staff on site (teachers and/or paraeducators) demonstrate less inclusive practices, with students spending more time in separate settings. With less staff to provide supports, students are more often grouped and supported in separate settings. The lack of staff to support mainstreaming or inclusive (i.e. push-in) services makes it less likely that the team will think of or try out a less restrictive setting for a student.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)	
1.	**Work with enrollment department to reserve general education seats across district for students in specialized, inclusive programs**

2.	**Expand and/or reallocate Special Education staff at campuses with self-contained programs to support inclusion into the general education setting**
Resources Required (Align numbers with Strategies/Activities for Improvement.)	
1.	**Meeting time, shared planning tools, potential reallocation of general education faculty based on class sizes**
2.	**Planning time, partnership with HR to notify staff of assignments, funds for increased support staff at targeted campuses**
Title of Person(s) Responsible for Implementation (Align numbers with Strategies/Activities for Improvement.)	
1.	**Directors of Student Welcome Center, Executive Director of Special Education, Coordinators of Special Education**
2.	**Chief Academic Officer, Executive Director of Special Education, Coordinators of Special Education**
Start Date (Align numbers with Strategies/Activities for Improvement.)	
1.	**January, 2021**
2.	**July, 2021**
Date of Completion (Align numbers with Strategies/Activities for Improvement.)	
1.	**Ongoing**
2.	**August, 2021**

Phase 2: Monitoring of Improvement	
Expected Outcome(s) (Align numbers with Strategies/Activities for Improvement.)	
1.	**Dedicated seats for students with IEPs at campuses with MM programs**
2.	**Students will participate in increased general education instruction at target sites**
Methods of Measurement (Align numbers with Strategies/Activities for Improvement.)	
1.	**Shared tracker (between SpEd and Enrollment) and seats held function in Schoolmint enrollment software**
2.	**Staffing report / dashboard**
Quantifiable Standards of Improvement (Align numbers with Strategies/Activities for Improvement.)	

1.	**By June, 2021, at least 25% of students currently served in separate, Special Education classroom settings for 40% or more of their day will have a reserved general education seat, allowing their IEP team to move them into regular education where appropriate based on assessed needs and goals.**
2.	**By August, 2021, a target group of eight school sites with self-contained programs will be provided with augmented staffing and technical assistance in allocating such staff to facilitate the inclusion of their students in special day class settings.**

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

- We will maintain records of our ongoing meetings with Student Welcome Center enrollment personnel and inventory of seats available for students with IEPs across campuses.
- We will monitor IEPs of students at targeted school sites to ensure support staff are being utilized to facilitate greater access to the general education setting.

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Fo*rms, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 6a: Preschool Least Restrictive Environment–Regular Early Childhood Program

Element 6a: Preschool Least Restrictive Environment (LRE)–Regular Early Childhood Program corresponds to State Performance Plan Indicator (SPPI) 6a: Preschool LRE–Regular Early Childhood Program. The Local Educational Agency (LEA) must address this Element in its 2019–20 Special Education Plan (SEP) if the LEA did not meet the statewide target for SPPI 6a: Preschool LRE–Regular Early Childhood Program as shown on the LEA's Annual Performance Report (APR) and on the *2019–20 Targeted Review Selection Data* chart linked to the January 31, 2020, *Annual Determination Notification.*

Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

I. Review of APR Data

SPPI 6a: Preschool LRE–Regular Early Childhood Program measures the percent of children aged 3 through 5 with an Individualized Education Program (IEP) and attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program.

Using the data from the LEA's APR Data, complete the chart below for Preschool LRE–Regular Early Childhood Program.

LEA's Percent of Students with	State Target

IEPs Receiving Services in the Regular Early Childhood Program	
27.74	35.9

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

Last school year, for the 18/19 PIR plan, Element 6A was not targeted by the CDE for monitoring. However, during the 19/20 school year, the district has put into place several strategies that support children's access to being served in a regular early childhood program. This includes:

(1) **Expansion of inclusion options in our district CDCs:** By developing two additional inclusion support positions, we were able to expand our district-wide preschool inclusion programs into four new CDC programs and allow for students to have access to special education supports while attending a CDC classroom.
(2) **Completed application (and award of) IEEEP grant:** Our district in conjunction with other county stakeholders, applied for the IEEEP grant offered by the CDE and was successful in our application. While COVID-19 has shifted our ability to implement the grant as initially intended, we are working with our partners to develop (and access) professional development around inclusive programming as well as utilize IEEEP funds to provide access to adaptive equipment and improving facilities.
(3) Inclusive Classroom Profile: Preschool leaders in OUSD (including general education and special education) are receiving training in implementation of the inclusive classroom profile in November 2020 in order to support district CDC programs in growing their capacity for inclusive practices.

III. Data and Analysis

In order to identify appropriate root causes for the LEA's performance in relation to Element 6a: Preschool LRE–Regular Early Childhood Program, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 6a: Preschool LRE–Regular Early Childhood Program. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
Desired Results Access Project Reports--https://www.draccess.org/	
Desired Results Reports--https://www.desiredresults.us	
California Longitudinal Pupil Achievement Data System (CALPADS)	**X**
Annual Performance Report	
Special Education Information System (e.g., SEIS, SIRAS, Welligent)	**X**
Child Care Data Reports--https://www.cde.ca.gov/sp/cd/re/cdddata.asp	
Service Logs and/or Pull-out Schedules	
Student Course Enrollment Data	**X**
Policies and Procedures	
Compliance Review Data (Student Record Reviews, SELPA Governance, Policy and Procedures Review)	**X**
Parent Input Data	
Other (please state):	

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for children aged 3 through 5 with IEPs, and are they working as intended?

Firstly, OUSD offers preschool programming for 2.5 hours a day. Many children attend additional care centers in addition to our programming. Data that is not currently centrally tracked are students that attend a special day classroom in OUSD and also attend a private PreK setting, family day care, Head Start setting, etc. without district supports. Anecdotally we are aware of these students but they are not tracked through any comprehensive database, which prevents us from understanding the overall picture of each student's access to general education preschool.

Secondly, given that Birth to three early intervention services have been primarily given online since the onset of the pandemic in March of 2019, many children have not received robust early intervention services, or have not been referred to B-3 programs due to lack of access to their primary physician. This may impact the intensity of services that may need to be given to preschool students initially as they are found eligible for an IEP.

Finally, many general education early childhood settings will need to reduce their overall capacity as a safety precaution in response to the COVID-19 pandemic. For instance, as a part of OUSD's reopening plan, our Child Development Centers (CDCs) will only be allowing 12 students per classroom to attend in person. This restriction may impact access to CDCs for all students in Oakland – including those with special needs.

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 6a: Preschool LRE–Regular Early Childhood Program. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause:

SDC teachers may only refer students to inclusion programs during a natural transition

point (like the end of the school year), when the student may be ready for an inclusive environment sooner.

Data Support and Background for Root Cause:

RAD data collected during the 18/19 school year indicates that there are more transitions into inclusive settings at the end of the year vs. the middle of the year.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	Hold change of placement "check ins" with SDC teachers twice a year in order to support transitions to inclusive settings more frequently.
2.	
3.	
4.	
5.	
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Meeting time with individual teachers to review caseloads.
2.	
3.	
4.	
5.	
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
1.	ECE SpEd program specialist, ECE RAD specialist, Preschool Special Education Coordinator
2.	
3.	
4.	
5.	
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
1.	February 1st, 2021; October 1st, 2021
2.	
3.	
4.	
5.	
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
1.	February 28th, 2021; November 1st, 2021

2.	
3.	
4.	
5.	
Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Program specialist will meet with SDC case managers to look at students who are ready to transition to more inclusive settings twice a year.
2.	
3.	
4.	
5.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Data tracking student placement two times a year.
2.	
3.	
4.	
5.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Increased numbers of children transitioning from SDCs to inclusion programs in January and March of each school year.
2.	
3.	
4.	
5.	

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).

2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

--PreK Data Sheet: ongoing placement tracking

--Trimester analysis of data by program and by classroom teacher

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan

Element 6b: Preschool Least Restrictive Environment–Separate Setting

Element 6b: Preschool Least Restrictive Environment (LRE)–Separate Setting corresponds to State Performance Plan Indicator (SPPI) 6b: Preschool LRE–Separate Setting. The Local Educational Agency (LEA) must address this Element in its 2019–20 Special Education Plan (SEP) if the LEA did not meet the statewide target for SPPI 6b: Preschool LRE–Separate Setting as shown on the LEA's Annual Performance Report (APR) and on the *2019–20 Targeted Review Selection Data* chart linked to the January 31, 2020, *Annual Determination Notification.*

Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

I. Review of APR Data

SPPI 6b: LRE–Separate Setting measures the percent of children ages 3 through 5 with an Individualized Education Program (IEP) and attending a separate special education class, separate school, or residential facility.

Using the data from the LEA's APR, complete the chart below for Preschool LRE–Separate Setting.

LEA's Percent of Students with IEPs Attending a Separate Class, School or Facility	State Target
63.11	**31.4**

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

In the 18/19 PIR plan, OUSD identified improvement strategies to reduce the amount of students receiving the majority of their preschool education in a special day classroom. The below strategies were implemented in the 19/20 school year. They included:

(1) **Reduction in inclusive classrooms overall class size:** After determining that one root cause of families not accepting an inclusive setting as an offer of FAPE may be the large size of the overall setting, OUSD capped the amount of special education students that could be placed in our integrated preschool classrooms to reduce class size. This was implemented in August 2020 during distance learning due to COVID-19, so the effectiveness of the strategy cannot be measured at this time.

(2) **Develop internal data tracking to examine inclusive trends over time and across programs:** In order to track students' progression over time from an SDC placement to a more inclusive program, we needed a more detailed way to track students from when they began in our programs to when they graduated. This was developed with OUSD's RAD team in the fall of 2019, Having access to more fine-grain data has allowed us to examine trends in access for inclusive settings and fine-tune our root cause understandings.

(3) **Increased visibility between general education and special education preschool settings:** As a part of our PIR plan, we targeted teachers of special day classrooms to be able to visit inclusive programs in order to increase their overall knowledge of these settings and suggest students who are ready for an LRE with greater confidence. This has continued during the 20/21 school year, with even greater access between programs due to distance learning.

III. Data and Analysis

In order to identify appropriate root causes for the LEA's performance in relation to Element 6b: Preschool LRE–Separate Setting, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 6b: Preschool LRE–Separate Setting. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
Desired Results Access Project Reports--https://www.draccess.org/	
Desired Results Reports--https://www.desiredresults.us	
California Longitudinal Pupil Achievement Data System (CALPADS)	**X**
Annual Performance Report	**X**
Special Education Information System (e.g., SEIS, SIRAS, Welligent)	**X**
Child Care Data Reports--https://www.cde.ca.gov/sp/cd/re/cdddata.asp	
Service Logs and/or Pull-out Schedules	
Student Course Enrollment Data	
Policies and Procedures	
Compliance Review Data (Student Record Reviews, SELPA Governance, Policies and Procedures Review)	
Parent Input Data	
Other (please state):	

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do

the systems, policies, procedures, and/or practices address this Element for children aged 3 through 5 with IEPs, and are they working as intended?

We are concerned that due to the COVID-19 shut down from March 2020 ongoing, that IEP teams (including families) will not feel as comfortable recommending more inclusive settings when in person education returns. Reasons for being concerned with transitions from a special day classroom to an inclusive setting could include a general reduction in progress data due to distance learning; concerns around regression in areas that are challenging to target through online learning (including self-regulation; social skills, etc.); and concerns with pandemic safety in larger class settings.

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 6b: Preschool LRE–Separate Setting. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause:

Access to supportive inclusive settings relies on the training and support of the general education program. We believe a root cause of children with special needs having less access to inclusion programs/settings at the preschool level is the lack of ongoing coaching and professional development that allows general education teachers to expand their practice and meet the needs of a wider scope of students in their classrooms.

Data Support and Background for Root Cause:

Focus group and anecdotal data from general education teachers in OUSD early childhood settings.

Phase 1: Improvement Strategy Development

Strategies/Activities for Improvement List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)	
1.	Survey of teachers and instructional assistants in four selected Child Development Centers (CDCs) on their current skills, knowledge, and comfort in working with children with special needs.
2.	Implement Phase 1 of IEEEP grant including expansion of access and tracking of online professional development on inclusive practices targeting four OUSD CDCs.
3.	Implement Phase 2 of IEEEP grant including a pre-assessment of four OUSD CDCs using the Inclusive Classroom Profile (ICP) assessment.
4.	Implement Phase 2 of IEEEP grant including hiring of in-class inclusion coaches to support general education teachers in the implementation of Universal Design for Learning and common MTSS classroom based accommodations.
5.	Present survey and ICP data to general education teachers at selected sites and begin in person coaching with inclusion staff and general education staff.
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Survey development and implementation
2.	Continued work with Alameda County Office of Education and the IEEEP grant coalition to develop easy access to online professional development.
3.	ICP assessment manuals and in person instruction at selected sites
4.	Use of IEEEP grant award
5.	Staff development time for presenting and considering data
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
1.	PreK Special Education Coordinator, Executive Director of Early Learning, Director of Quality Enhancement & Professional Development for ECE, Early Childhood Research Associate
2.	PreK Special Education Coordinator, Executive Director of Early Learning, Director of Quality Enhancement & Professional Development for ECE
3.	PreK Special Education Coordinator, Site administrators of selected general education programs
4.	PreK Special Education Coordinator, Executive Director of Early Learning, Director of Quality Enhancement & Professional Development for ECE

5.	PreK Special Education Coordinator, Executive Director of Early Learning, Director of Quality Enhancement & Professional Development for ECE; IEEEP inclusion team; CDC Site administrators
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
1.	February 1st, 2021
2.	Began November, 2020
3.	Reliant on in person instruction start date, estimated April 1st, 2021
4.	March 1st, 2021
5.	August 30th, 2021
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
1.	March 1st, 2021
2.	January 15th, 2021
3.	Influenced by In person instruction start date, estimated May 30th, 2021
4.	May 30th, 2021
5.	September 30th, 2021

Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Survey completed and distributed to CDC teachers and instructional assistants.
2.	Development of IEEEP coalition professional development calendar for Spring and Summer of 2021.
3.	Staff trained in the implementation of the Inclusive Classroom Profile will complete observations and scoring for four selected sites.
4.	Multi-disciplinary inclusion support team will be hired including an inclusion teacher; speech and language therapist and occupational therapist.
5.	General education staff will have time for reflection on areas for growth and each classroom will have time each week for in person coaching during instructional hours.
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	80% of CDC teachers and instructional assistants in OUSD will return the survey by March 2021.

2.	100% of staff at selected CDC sites will receive the calendar and will be encouraged to participate in professional development centered on inclusive practices.
3.	Given in person instruction, three out of the four selected CDCs will have ICP observations completed by May, and 100% by end of August.
4.	Three staff will be hired for Fall 2021.
5.	One to three hours of in person coaching per classroom will occur each week across the four centers.
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	General education teachers in CDCs will report feeling more confident and knowledgeable supporting children with special needs in their classrooms.
2.	General education teachers will have attended professional development on inclusive practices to support their knowledge and skill base.
3.	ICP observations will be used for pre and post data to see if in person coaching model has supported the greater implementation of inclusive practices.
4.	Specialists will be hired to spend dedicated time in general education classrooms to coach to support implementation of UDL, MTSS, and common classroom accommodations.
5.	General education classrooms will have weekly, in person coaching to support effective implementation of inclusive practices.

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

(1) Teacher survey data to be collected and stored.

(2) ICP protocols stored for later reference.

(3) Professional development “catalog” with IEEEP partners.

(4) Tracking of OUSD teachers and instructional assistants who participate in inclusive training offered through IEEEP partners.

(5) Schedules of in-class support from the inclusive practices team for each of the four sites.

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 7: Preschool Outcomes–Increased Rate of Growth & within Age Expectations

Element 7: Preschool Outcomes–Increased Rate of Growth & within Age Expectations corresponds to Special Education Plan (SEP) Elements and State Performance Plan Indicator (SPPI 7) and its subparts, as follows:

- 7a1: Preschool Outcomes: Positive Social-Emotional Skills, Increased Rate of Growth;
- 7a2: Preschool Outcomes: Positive Social-Emotional Skills, Functioning within Age Expectations;
- 7b1: Preschool Outcomes: Acquisition and Use of Knowledge and Skills, Increased Rate of Growth;
- 7b2: Preschool Outcomes: Acquisition and Use of Knowledge and Skills, Functioning within Age Expectations;
- 7c1: Preschool Outcomes: Use of Appropriate Behaviors, Increased Rate of Growth; and
- 7c2: Preschool Outcomes: Use of Appropriate Behaviors, Functioning within Age Expectations.

If the Local Educational Agency (LEA) has been identified for Preschool Review, as shown on the January 31, 2020, *Annual Determination Notification* and the *Preschool Review* data sheet linked to that notification, the LEA must complete this *Element Form* and include it in the LEA's 2019–20 SEP. The LEA must complete the information for all subparts of Element 7, irrespective of whether the LEA may have met an SPPI target

applicable to one or more of those subparts. The LEA must complete a minimum of one root cause analysis for Element 7 utilizing data from 7a1, 7a2, 7b1, 7b2, 7c1, and 7c2. The LEA can submit additional root causes and corresponding strategies/activities if the LEA determines there is more than one root cause for Element 7.
Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

I. Review of APR and Annual Determination Data

SPPI 7a1: Preschool Outcomes: Positive Social-Emotional Skills, Increased Rate of Growth measures the percent of preschool children aged 3 through 5, with Individualized Education Programs (IEPs), who entered the preschool program below age expectations in social/emotional skills (including social relationships) and substantially increased their rate of growth by the time they turned 6 years of age or exited the program. SPPI 7a1 uses data from the current reporting year Desired Results Developmental Profile (DRDP).

Using data from the LEA's APR and/or Annual Determination, complete the chart below for Preschool Outcomes: Positive Social-Emotional Skills, Increased Rate of Growth.

LEA Rate	State Target
82.67%	>84.2%

SPPI 7a2: Preschool Outcomes: Positive Social-Emotional Skills, Functioning within Age Expectations measures the percent of preschool children aged 3 through 5, with IEPs, who were functioning within age expectations in social/emotional skills (including social relationships) by the time they turned 6 years of age or exited the program. It uses data from the current reporting year DRDP.

Using data from the LEA's APR and/or Annual Determination, complete the chart below for Preschool Outcomes: Positive Social-Emotional Skills, Functioning within Age Expectations.

LEA Rate	State Target
82.83%	>80.5%

SPPI 7b1: Preschool Outcomes: Acquisition and Use of Knowledge and Skills, Increased Rate of Growth measures the percent of preschool children aged 3 through 5, with IEPs, who entered the preschool program below age expectations in acquisition and use of knowledge and skills (including early language/communication and early literacy) and substantially increased their rate of growth in that area by the time they turned 6 years of age or exited the program. It uses data from the current reporting year DRDP.

Using data from the LEA's APR and/or Annual Determination, complete the chart below for Preschool Outcomes: Acquisition and Use of Knowledge and Skills, Increased Rate of Growth.

LEA Rate	State Target
76.39%	>81.7%

SPPI 7b2: Preschool Outcomes: Acquisition and Use of Knowledge and Skills, Functioning within Age Expectations measures the percent of preschool children aged 3 through 5, with IEPs, who were functioning within age expectations in acquisition and use of knowledge and skills (including early language/communication and early literacy) by the time they turned 6 years of age or exited the program. It uses data from the current reporting year DRDP.

Using data from the LEA's APR and/or Annual Determination, complete the chart below for Preschool Outcomes: Acquisition and Use of Knowledge and Skills, Functioning within Age Expectations.

LEA Rate	State Target
79.08%	>79.57%

SPPI 7c1: Preschool Outcomes: Use of Appropriate Behaviors, Increased Rate of Growth measures the percent of preschool children aged 3 through 5, with IEPs, who entered the preschool program below age expectations in use of appropriate behaviors to meet their needs and substantially increased their rate of growth in that area by the time they turned 6 years of age or exited the program. It uses data from the current reporting year DRDP.

Using data from the LEA's APR and/or Annual Determination, complete the chart below for Preschool Outcomes: Use of Appropriate Behaviors, Increased Rate of Growth.

LEA Rate	State Target
67.69%	>75.7%

SPPI 7c2: Preschool Outcomes: Use of Appropriate Behaviors, Functioning within Age Expectations measures the percent of preschool children aged 3 through 5 with IEPs who, by the time they turned 6 years of age or exited the program, were functioning within age expectations in use of appropriate behaviors to meet their needs. It uses data from the current reporting year DRDP.

Using data from the LEA's APR and/or Annual Determination, complete the chart below for Preschool Outcomes: Use of Appropriate Behaviors, Functioning within Age Expectations.

LEA Rate	State Target
78.65%	>78.45%

II. Current and Recent Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured?

Element 7 was not analyzed prior to the development of this SEP at the preschool level in Oakland Unified. Until the development of this SEP and training through the CDE that occurred early in the 20/21 school year, we were not aware that we could have access to aggregate DRDP data via draccess.org.

III. Data and Analysis

In order to identify appropriate root causes for the LEA's performance in relation to Element 7: Preschool Outcomes–Increased Rate of Growth & within Age Expectations, the LEA must examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 7: Preschool Outcomes–Increased Rate of Growth & within Age Expectations.

Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
Desired Results Access Project Reports--https://www.draccess.org/	X
Desired results Reports--https://www.desiredresults.us	X
California Longitudinal Pupil Achievement Data System (CALPADS)	
Annual Performance Report (APR)	
Special Education Information System (SEIS)	X
Child Care Data Reports--https://www.cde.ca.gov/sp/cd/re/cdddata.asp	
Service Logs and/or Pull out Schedules	
Student Course Enrollment Data	
Policies and Procedures	
Compliance Review Data	
Student Record Reviews	
Parent Survey Data	
Other (please state):	

IV. Additional Factors Affecting Performance

Are there any other factors, both internal and external, that the SEP Team should consider when evaluating performance for this element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for students with disabilities and are they working as intended?

As of March 2020, our district is currently serving our students in a distance learning format due to the COVID-19 pandemic, including all preschool students. The lack of in-person instruction in a setting where our children are impacted by the trauma of a pandemic (including the economic ramifications of the pandemic impacting housing and food stability) could significantly impact the outcomes of the DRDP measures for years to come.
In addition, the DRDP was not administered in the Spring of 2020 due to COVID-19 and the fall DRDP is a modified assessment, using 7 indicators instead of 20. This makes accurate data analysis in the current school year, as well comparing data across school years, a significant challenge.

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 7: Preschool Outcomes–Increased Rate of Growth & within Age Expectations. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause:

Until this process, our district was not aware that we had DRDP outcomes over time for our students. Given that, we have never presented information to our Early Childhood special education teachers around students' areas of strength and need as measured by the DRDP. While teachers are aware of the individual growth of their students – or even their classroom as a whole anecdotally and through IEP goals – there has not been a presentation of data to analyze as a group or to discuss improvement strategies.

Data Support and Background for Root Cause:

Training for administration on DRDP group outcomes was given in September 2020 to Early Childhood leadership. Teachers were informally consulted about prior practice around the analysis of DRDP data and confirmed that data analysis has not been a part of prior practice.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	Analyze DRDP data from the past three years with our ECE Special Education leadership team looking for strengths and areas for improvement.

2.	Present DRDP analysis to preschool special education teachers in OUSD.
3.	Develop teach-alike work groups to develop targeted strategies for improvement in two areas of need.
4.	
5.	
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Time for data analysis going back three years.
2.	Professional development time set aside to present to teachers.
3.	Professional development time set aside for teachers to develop targeted strategies.
4.	
5.	
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
1.	PreK Special Education Coordinator, Executive Director of Early Learning, Director of Quality Enhancement & Professional Development for ECE, Early Childhood Research Associate
2.	PreK Special Education Coordinator, ECE special education staff
3.	PreK Special Education Coordinator, ECE special education staff
4.	
5.	
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
1.	February 1st, 2021
2.	March 15th, 2021
3.	March 16th, 2021
4.	
5.	
Date of Completion (Align numbers with Strategies/Activities for Improvement.)	
1.	March 1st, 2021

2.	March 16th, 2021
3.	May 15th, 2021
4.	

Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Broader and deeper awareness of DRDP scores and trends across different types of special education programs in OUSD over time.
2.	Teachers will be aware of DRDP trends and data from the past three years.
3.	Teachers will identify areas of growth and where we can begin to improve practice and identify areas for training for the school year 21/22.
4.	
5.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Completion of data analysis spreadsheet to allow for comparison as well as continuous data tracking moving forward.
2.	Post assessment of teachers on DRDP data and trends and areas of growth.
3.	Three areas for growth will be identified in order to access professional development to support.
4.	
5.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	Putting into practice systems that allow for in depth analysis and reflection each school year around student progress.
2.	Establishing a baseline for yearly work on DRDP data analysis, trends as a collective staff.
3.	DRDP data analysis will be used to target professional development to support teachers in developing their practice.
4.	

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to collect for the Root Cause strategies/activities and monitoring for Element 7: Preschool Outcomes–Increased Rate of Growth & within Age Expectations, below.

Notes taken from data analysis meetings
Slide deck from professional development presentation with staff
Post assessment reflection data from staff presentation
Work products from ECE teachers in strategies to support areas of growth

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by California Department of Education, July 22, 2020

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 10: Disproportionate Representation of Students with Disabilities by Race or Ethnicity by Disability

Element 10: Disproportionate Representation of Students with Disabilities by Race or Ethnicity by Disability corresponds to State Performance Plan Indicator (SPPI) 10: Disproportionate Representation of Students with Disabilities by Race or Ethnicity by Disability. If the Local Educational Agency's (LEA's) 2018–19 California Longitudinal Pupil Achievement Data System (CALPADS) data calculation exceeds the risk ratio (or alternate risk ratio) threshold for SPPI 10, then the LEA must address Element 10 in the LEA's Special Education Plan (SEP) for implementation in the 2020–21 school year.

Information regarding the LEA's performance and data for this Element may be found in the notification of disproportionality sent by the California Department of Education (CDE) to the LEA on August 14, 2019. As a result of these calculations and preliminary determinations, LEAs were required to complete a Disproportionality Self-Study Review of policies and procedures, as well as evaluate a sample of student records. For the 2019–20 school year, these reviews and evaluations have been completed. The LEA must include this Element in its SEP even if the Disproportionality Self-Study Review revealed no findings of noncompliance.

Please note that a new Disproportionality Self-Study Review will commence in approximately mid-August 2020 for LEAs identified as disproportionate based on the 2019–20 CALPADS data.

I. Review of Disproportionality Data

Use the LEA's 2018–19 Disproportionality Data, previously sent to the LEA on August 14, 2020, to complete the chart below. List each racial or ethnic group for which the LEA has been identified as disproportionate, along with the Risk Ratio Rate and specific

disability category (e.g., students who identify as White, 3.47, Emotional Disturbance; students who identify as African American, 3.39, Autism).

Race or Ethnicity	Risk Ratio Rate	Disability Category
African American	4.59	Emotional Disturbance
African American	2.89	OHI

Note: Add new rows as necessary.

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured?

The district currently uses Restorative Justice practices, PBIS, and counseling services campus as preventative measures. This is monitored through Coordination of Services Team and measured using universal surveys.

III. Data and Analysis

The LEA should examine formal and informal data to identify the potential causes leading to the identification of disproportionality for this Element. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for this Element. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
California School Dashboard—Chronic Absenteeism, Suspension or Graduation Rate for Students with Disabilities	
California School Dashboard—Comparison to All Students or Other Student Groups	**X**
Classroom-level Data—Student Grades, Assignment Grades	
Annual Performance Report (APR)	
Special Education Information System (e.g., SEIS, SIRAS, Welligent), Student IEPs	**X**

Service Logs and/or Pull out Schedules	
Transition Plans	
Student Course Enrollment Data, Transcripts, Courses of Study	
Attendance Records, Discipline Data, BIPs	
Empathy Interview/ Focus Group Data	
Curriculum Guides, Lesson Plans, Syllabi	
Other School Plans, such as the Local Control Accountability Plan (LCAP), Western Association of Schools and Colleges (WASC)	
LEA's implementation of Response to Intervention, Universal Design for Learning, Multi-tiered System of Supports	
Policies and Procedures	**X**
Compliance Review Data (Student Record Review, SELPA Governance Review, Policies and Procedures Review)	**X**
Parent Input Data	
Other (please state):	

***The LEA shall use the findings from the 2018–19 Disproportionality Self-Study in the Root Cause Analysis. However, it is also possible that such analysis may reveal the findings do not have a relationship to the root cause(s).**

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for students with disabilities and are they working as intended?

Policies/procedures around assessment when behavior or emotional concerns are established, but appear to not be as clear as intended (i.e. not looking at all possible reasons for the behaviors and focusing only on possible OHI and/or ED)

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to this Element. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause:

Psychologists are not assessing in all areas of disability at the time of the initial evaluation and may be using assessment tools that are not culturally-responsive, resulting in mis-classifications.

Data Support and Background for Root Cause:

File review; history of psychologists only assessing in the area in which the student was referred which could result in ignoring an underlying disability that is the actual cause of the behavioral/emotional challenges; may be caused by the assessors' implicit bias, and the feelings of being pressured to qualify the student.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	**Development and roll out of Best Practices in ED/OHI assessment for the school psychologists with focus on culturally-responsive assessment tools and thorough ecological analysis**
2.	**Professional Development in culturally responsive ED and OHI assessment**
3.	**Audit of district psychological evaluation reports to identify strengths and weaknesses to improve the evaluation report.**
4.	
5.	
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Time for the team to research and develop the Best Practices in ED assessment procedures**
2.	**Contract with a trainer to provide professional development in culturally responsive ED and OHI assessments/time and cost**

3.	**Independent contractor to do an audit of the psychological evaluations to provide feedback and recommendations to improve the evaluation reports/cost**
4.	
5.	
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**SpEd Coordinator of Psych Services**
2.	**SpEd Coordinator of Psych Services/SpEd Director**
3.	**SpEd Coordinator of Psych. Services/SpEd Director**
4.	
5.	
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Already started**
2.	**August 2021**
3.	**January 2021**
4.	
5.	
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**June 2021**
2.	**December 2021**
3.	**June 2021**
4.	
5.	
Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Reduction of students qualifying as ED/OHI for all of these**
2.	**Psychological evaluations are uniformed and culturally responsive in determining eligibility for ED and OHI for all of these**
3.	

4.	
5.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**SEIS data to calculate risk ratio to compare with 2019-20 risk ratio as baseline for all of these**
2.	
3.	
4.	
5.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**By December 2021, the district will have reduced the risk ratio for African American students qualified as ED or OHI by 25% for all of these**
2.	
3.	
4.	
5.	

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

1. Creation of a Best Practices handbook on ED and OHI assessments
2. Agendas, sign-in sheets, and copies powerpoint slides documenting the professional development
3. Notes from feedback from audit
4. Tracking sheet used to regularly document risk ratio scores

Root Cause 2:

Students identified during preschool under speech and language impairment as the primary classification do not have IEPs developed to properly address behavioral concerns early on which later develop into significant behavioral/emotional challenges and students are re-designated under OHI and/or ED as a result.

Data Support and Background for Root Cause:

IEP case review of selected files of current students under ED designations - many were first eligible under SLI; students with SLI often develop coping skills that are behavioral (and emotional) because of communication deficits and these coping skills are not adequately addressed, or at all, when they are younger, developing into more significant challenges that appear OHI or ED, often because of implicit bias.

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
6.	**Development of a behavioral intervention plan and behavioral goals in addition to speech/language goals to address teaching coping strategies within the IEPs at the preschool level**

7.	**School psychologists, speech pathologists, and special education teachers at the preschool level collaborating on behavioral supports and social skills activities as part of the IEP**
8.	
9.	
10.	
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**Protocol developed for inclusion of BIP and behavioral goals in speech only IEPs**
7.	**Social skills/SEL curriculum for preschool level students for speech pathologists, school psychologists, and special education teachers to use and cost of the curriculum**
8.	
9.	
10.	
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**SpEd Coordinators of Psych Services and Diagnostic Center**
7.	**SpEd Coordinators of Psych Services and Diagnostic Center and SpEd Director**
8.	
9.	
10.	
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**January 2021**
7.	**August 2021**
8.	
9.	
10.	
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**August 2021**
7.	**December 2021**
8.	

9.	
10.	
Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**Preschool students classified as SLI will have an increase in positive coping strategies, reducing the use of negative behaviors.**
7.	
8.	
9.	
10.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**student file reviews (IEPs and psych reports) comparing 2019/20 data as baseline for all of these**
7.	
8.	
9.	
10.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**By December 2021, there will be an increase by 25% in the number of preschool students classified as SLI using positive coping strategies, leading to a reduction in future re-classifications of ED and/or OHI.**
7.	
8.	
9.	
10.	

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

6. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
7. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
8. Evidence that the SEP Team has monitored the implementation of its plan.
9. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
10. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

1. Copy of procedures for establishing BIPs and behavior goals for students initially under SLI only in preschool
2. Tracking system used to monitor use of protocol
3. SEIS records
4. Copy of the Scope and Sequence of social skills curriculum for preschoolers.

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 14a: Post-School Outcomes–Higher Education

Element 14a: Post-School Outcomes–Higher Education corresponds to State Performance Plan Indicator (SPPI) 14a. The Local Educational Agency (LEA) must address this Element in its 2019–20 Special Education Plan (SEP) if the LEA did not meet the statewide target for SPPI 14a: Post-School Outcomes–Higher Education, as shown on the LEA's Annual Performance Report (APR) and on the *2019–20 Targeted Review Selection Data* chart linked to the January 31, 2020, *Annual Determination Notification.*

Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

I. Review of APR Data

SPPI 14 measures post-school outcomes of youth who are no longer in secondary school, had Individualized Education Programs (IEPs) in effect at the time they left school, and within one year of leaving high school were: a) enrolled in higher education, b) enrolled in higher education or competitively employed, or c) enrolled in any higher education or in some other postsecondary education or training program or competitively employed or in some other employment.

SPPI 14: Post-School Outcomes accordingly is divided into three subparts (or categories) as follows:

a. Higher Education
b. Higher Education or Competitively Employed
c. Any Post-Secondary Education or Employment

SPPI 14 is a cumulative count. All students in category “a” are also in category “b,” and all students in category “b” are in category “c.” This *Element Form* focuses only on the first category (14a), responders that are enrolled in higher education.

Using the LEA’s APR data, fill out the chart below for Element 14a: Post-School Outcomes–Higher Education.

LEA Rate	State Target
17.3%	54.3

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

Training teachers on post secondary exit process and forms in collaboration with school counselors.

Form for teachers to complete to gather post secondary contact information and preliminary plans.

Script for staff to complete follow up phone calls to track actual data.

Collaboration with Peralta Community College district to provide dual enrollment courses specifically for high school students with MM IEPs.

Collaboration with Peralta Community College district to provide concurrent enrollment courses specifically for young adult students with IEPs.

III. Data and Analysis

In order to identify appropriate root causes for the LEA’s performance in relation to Element 14a: Post-School Outcomes–Higher Education, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 14a: Post-School Outcomes–Higher Education. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
California School Dashboard	
Ed-data.org—Cohort Graduation	
California Longitudinal Pupil Achievement Data System (CALPADS)	
Annual Performance Report (APR)	
Special Education Information System (e.g., SEIS, Welligent, SIRAS)	**X**
UC/CSU eligibility/enrollment Data	**X**
Transition Plans	
Student Grades, Transcripts	
Guidance Counselor Information	
Other School Plans (e.g., Local Control Accountability Plan (LCAP) Western Association of Schools and Colleges (WASC), Technology Plan)	
Policies and Procedures	
Compliance Review Data (Student Record Reviews, SELPA Governance Review, Policies and Procedures Review)	
Student Summary of Performance Documents	
Parent Survey Data	
Courses of Study, Course Enrollment, Prerequisite Enrollment	
Other (please state)	

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for students with disabilities and are they working as intended?

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 14a: Post-School Outcomes–Higher Education. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone

outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause 1:

SDC students have limited access to general education courses including those that meet A-G requirements

Data Support and Background for Root Cause:

I. Graduation Rates
   A. 17/18 82% of SPED students did not meet A-G (82% of Gen Ed did)
   B. 16/17, 83% of SPED students did not meet A-G (52.6% of Gen Ed did)
   C. 15/16, 83% of SPED students did not meet A-G (56% of Gen Ed did)

II. College Enrollment
   A. 2018, 65% (29/35) Gen Ed enrolled 2/4 year vs 34% (33/8) SPED
   B. 2017, 65% (32/33) Gen Ed enrolled 2/4 year vs 42% (36/7) SPED
   C. 2016, 67% (35/32) Gen Ed enrolled 2/4 year vs 45% (38/7) SPED

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **(List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	**Increase the percent of students who spend 50% or more of their time in gen ed courses to 75%**
2.	**Prepare sites for more inclusive practices**
3.	
4.	

5.	
Resources Required **(Align numbers with Strategies/Activities for Improvement)**	
1.	**Support from counselors, site leads, training for teachers towards curriculum design and implementation**
2.	**Train gen ed staff towards support in Gen Ed. classes, specific training towards modification/accommodation**
3.	
4.	
5.	
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement)**	
1.	**Secondary Special Education Coordinators**
2.	**Secondary Special Education Coordinators, Principals**
3.	
4.	
5.	
Start Date **(Align numbers with Strategies/Activities for Improvement)**	
1.	**11/30/20**
2.	**11/30/20**
3.	
4.	
5.	
Date of Completion **(Align numbers with Strategies/Activities for Improvement)**	
1.	**September 2021**
2.	**September 2021**
3.	
4.	
5.	

Phase 2: Monitoring of Improvement
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement)**

1.	**40% of students with IEPs will meet A-G requirements**
2.	**75% of students in SDCs will be mainstreamed over 50% of their day**
3.	
4.	
5.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement)**	
1.	**Use data dashboard information**
2.	**SEIS data based on case manager and % in and out of gen ed**
3.	
4.	
5.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement)**	
1.	**40% of students with IEPs will meet A-G requirements**
2.	**75% of students in SDCs will participate in general education curriculum for 50% or more of their day**
3.	
4.	
5.	

Root Cause 2:

Credit recovery options are not accessible for students with IEPs including summer school options.

Data Support and Background for Root Cause:

III. Graduation Rates

A. 17/18 82% of SPED students did not meet A-G (82% of Gen Ed did)
B. 16/17, 83% of SPED students did not meet A-G (52.6% of Gen Ed did)
C. 15/16, 83% of SPED students did not meet A-G (56% of Gen Ed did)

IV. College Enrollment

A. 2018, 65% (29/35) Gen Ed enrolled 2/4 year vs 34% (33/8) SPED
B. 2017, 65% (32/33) Gen Ed enrolled 2/4 year vs 42% (36/7) SPED
C. 2016, 67% (35/32) Gen Ed enrolled 2/4 year vs 45% (38/7) SPED

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement (List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)	
6.	Add resource specialists to districts general education summer school program
7.	Add SpEd central credit recovery program
8.	
9.	
10.	
Resources Required (Align numbers with Strategies/Activities for Improvement)	
6.	Additional funding for teachers to support students with credit recovery program throughout the full year including the summer
7.	Train SpEd teachers in credit recovery program
8.	
9.	
10.	
Title of Person(s) Responsible for Implementation (Align numbers with Strategies/Activities for Improvement)	
6.	High School Special Education Coordinator, Summer Learning Coordinator
7.	High School Special Education Coordinator
8.	
9.	
10.	
Start Date (Align numbers with Strategies/Activities for Improvement)	
6.	December 2020
7.	December 2020
8.	
9.	
10.	

Date of Completion (Align numbers with Strategies/Activities for Improvement)	
6.	May 2021
7.	August 2022
8.	
9.	
10.	

Phase 2: Monitoring of Improvement	
Expected Outcome(s) (Align numbers with Strategies/Activities for Improvement)	
6.	100% of district summer programs will include at least one resource teacher
7.	100% of comprehensive high schools will have a Special Education Credit Recovery Lead using the district adopted program with their students
8.	
9.	
10.	
Methods of Measurement (Align numbers with Strategies/Activities for Improvement)	
6.	Employee record for Summer School programs
7.	Evidence of student progress from credit recovery program per site
8.	
9.	
10.	
Quantifiable Standards of Improvement (Align numbers with Strategies/Activities for Improvement)	
6.	21-22 Graduation rates will increase to 30% students with IEPs meeting A-G requirements.
7.	21-22 College enrollment rates will increase to 45% students enrolling in a 2/4 year college
8.	
9.	
10.	

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before and after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Root Cause 1:

- SEIS data regarding percentage of times students are spending in gen-ed settings
- UC/CSU Eligibility data tracking by semester
- Tracking of teachers/ support providers that participate in professional learning around inclusive settings
    - Agendas, powerpoints, etc.,
- Tracking of general education personnel that participate in training around inclusive settings and practices
    - Agendas, powerpoints, etc.

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Root Cause 2:

- Tracking of teachers/ service providers trained to provide A-G aligned credit recovery options to SWD
- Student academic data and tracking of credits recovered through participation in aligned credit recovery programming
- Number of students participating in District provided summer school learning opportunities
- UC/CSU Eligibility data tracking by semester

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

Oakland Unified School District

2019–20 Special Education Plan Element 14b: Post-School Outcomes–Higher Education or Competitively Employed

Element 14b: Post-School Outcomes–Higher Education or Competitively Employed corresponds to State Performance Plan Indicator (SPPI) 14b. The Local Educational Agency (LEA) must address this Element in its 2019–20 Special Education Plan (SEP) if the LEA did not meet the statewide target for SPPI 14b: Post-School Outcomes–Higher Education or Competitively Employed, as shown on the LEA's Annual Performance Report (APR) and on the *2019–20 Targeted Review Selection Data* chart linked to the January 31, 2020, *Annual Determination Notification.*

Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

I. Review of APR Data

SPPI 14 measures post-school outcomes of youth who are no longer in secondary school, had Individualized Education Programs (IEPs) in effect at the time they left school, and within one year of leaving high school were: a) enrolled in higher education, b) enrolled in higher education or competitively employed, or c) enrolled in any higher education or in some other postsecondary education or training program or competitively employed or in some other employment.

SPPI 14: Post-School Outcomes accordingly is divided into three subparts (or categories) as follows:

a. Higher Education
b. Higher Education or Competitively Employed
c. Any Post-Secondary Education or Employment

SPPI 14 is a cumulative count. All students in category “a” are also in category “b,” and all students in category “b” are in category “c.” This *Element Form* focuses only on the first category (14b), responders that are enrolled in higher education or competitively employed.

Using the LEA’s APR data, complete the chart below for Element 14b: Post-School Outcomes–Higher Education or Competitively Employed.

LEA Rate	State Target
21%	**74%**

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured? Did the LEA address this area in a 2018–19 Performance Indicator Review (PIR) Plan?

Training teachers on post secondary exit process and forms.

Form for teachers to complete to gather post secondary contact information and preliminary plans.

Script for staff to complete follow up phone calls to track actual data.

Collaboration with Peralta Community College district to provide dual enrollment courses specifically for high school students with MM IEPs.

Collaboration with Peralta Community College district to provide concurrent enrollment courses specifically for young adult students with IEPs.

Beginning collaboration to include students with IEPs into linked learning transitional career resources and programs.

Targeted employment skills workshops and 1:1 services through Career Transition Services Department

III. Data and Analysis

In order to identify appropriate root causes for the LEA’s performance in relation to Element 14b: Post-School Outcomes–Higher Education or Competitively Employed, the

LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element 14b: Post-School Outcomes–Higher Education or Competitively Employed. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
California School Dashboard	
Ed-data.org—Cohort Graduation	
California Longitudinal Pupil Achievement Data System (CALPADS)	
Annual Performance Report (APR)	
Special Education Information System (e.g., SEIS, SIRAS, Welligent)	**X**
UC/CSU eligibility/enrollment Data	**X**
Transition Plans	**X**
Student Grades, Transcripts, Summary of Performance	
Guidance Counselor Information	
Other School Plans (e.g., Local Control Accountability Plan (LCAP), Western Association of Schools and Colleges (WASC), Technology Plan)	**X**
Policies and Procedures	
Compliance Review Data (*Student Record Review, SELPA Governance Review)	
Parent Input Data	
Other (please state):	

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address the Element for students with disabilities and are they working as intended?

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element 14b: Post-School Outcomes–Higher Education or Competitively Employed. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

If the LEA completed a 2018–19 PIR Plan, the LEA may consider including root causes from the PIR Plan in the LEA's 2019–20 SEP if the root cause is still an issue based on analysis of the LEA's current data.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause 1:

- Limited collaboration with district and external parties providing post secondary training and supports.

Data Support and Background for Root Cause:

Students with IEPs who meet A-G requirements 2018, 65% (29/35) Gen Ed enrolled 2/4 year vs 34% (33/8)

4% of students with IEPs are enrolled in dual enrollment courses
1% of students engage in work experience through workability

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	**Increasing transition opportunities and experiences for SWD by improving partnerships.**
2.	**Increasing transition opportunities and experiences for SWD by improving curricular opportunities/ options.**

3.	
4.	
5.	
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Funding for staff, i.e. additional Transition case manager or coach and collaboration as well as opportunity/ time for collaboration between organizations/ departments**
2.	**Adoption, implementation, and on-going training for targeted Transition Curriculum and professional development**
3.	
4.	
5.	
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Special Education Coordinators**
2.	**Special Education Coordinators**
3.	
4.	
5.	
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**January 2021**
2.	**December 2020**
3.	
4.	
5.	
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**July 2021**
2.	**July 2021**
3.	
4.	
5.	
Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	

1.	**Increased options and access for students to 1) enroll in Dual Enrollment Peralta programming 2) participation in work/ vocational experiences**
2.	**Teachers will be trained to implement selected transition curriculum**
3.	
4.	
5.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Total participants in Linked Learning/ Dual Enrollment courses as well as students participating in work/ vocational experiences**
2.	**Student engagement in transition curriculum**
3.	
4.	
5.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**10% of students with IEPs enrolled in dual enrollment courses and 70% of eligible students participate in a work experience before they leave high school**
2.	**70% engagement of students in courses where curriculum is implemented**
3.	
4.	
5.	

Root Cause 2:

- Limited development of instructional practices directed towards the growth of student Transition Skills

Data Support and Background for Root Cause:

Students with IEPs who meet A-G requirements 2018, 65% (29/35) Gen Ed enrolled 2/4 year vs 34% (33/8) Teachers gathered post secondary data using our internal Google form for 40% of our graduating seniors. 1 % of students engage in work experience

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
6.	**Targeted professional development around Transition and Exit procedures**
7.	**Increasing transition opportunities and experiences for SWD by improving curricular opportunities/ options.**
8.	
9.	
10.	
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**Updated professional development resources**
7.	**Adoption, implementation, and on-going training for targeted Transition Curriculum and professional development**
8.	
9.	
10.	
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**Special Education Coordinators**
7.	**Special Education Coordinators**
8.	
9.	
10.	
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	

6.	**January 2021**
7.	**December 2020**
8.	
9.	
10.	
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**July 2021**
7.	**July 2021**
8.	
9.	
10.	
Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**Case managers complete post secondary forms.**
7.	**Teachers will be trained to implement selected transition curriculum**
8.	
9.	
10.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**SEIS data**
7.	**Student engagement in transition curriculum**
8.	
9.	
10.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**Case managers complete post secondary forms for at least 70% of high school completing students.**
7.	**70% engagement of students in courses where curriculum is implemented**
8.	
9.	
10.	

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms)
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

Root Cause 1:

1. Meeting agendas, notes and slides with participant lists.
2. Log of agency connections and inter-agency growth plans
3. Documentation of programmatic offerings (dual/ concurrent enrollment classes)

Root Cause 2:

1. Meeting agendas, notes and slides with participant lists
    a. Tracking of professional development engagement for case carriers and service providers
2. Engagement data by program/ student to track implementation of approved and adopted Transition Curriculum
3. Post-secondary data form completion numbers/ percentage to ensure correct data for follow-up data collection

Copy and complete the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Local Educational Agency Name:

OAKLAND UNIFIED SCHOOL DISTRICT

2019–20 Special Education Plan Element: Chronic Absenteeism

I. Review of Annual Determination Data

Element: Chronic Absenteeism is a component of the Special Education Plan (SEP) for each Local Educational Agency (LEA) identified to participate in Intensive Review. Using the LEA's *2019–20 Intensive Review Data* sheet, which was linked to the *Annual Determination Notification* sent on January 31, 2020, complete the chart below and answer the questions for Element: Chronic Absenteeism.

LEA Rate	LEA Rank
7.86%	4

Note: The selection process for this Element may vary somewhat from the above, such as for LEAs designated as "smalls." The California Department of Education (CDE) distributed a checklist document in June 2020 entitled *Elements Requiring Review 2019–20 Monitoring Year (Elements Requiring Review)*. The LEA must address in its 2019–20 SEP every Element for which the *Elements Requiring Review* list shows "Yes" in the Review Required column.

II. Current Improvement Strategies

Describe and discuss current or recent improvement strategies, relevant to this Element, that the LEA implemented prior to the development of this SEP. For example: Did the strategies result in improved outcomes for students with disabilities? How is improvement measured?

- All school sites now have attendance teams to focus specifically on attendance
    - Implement Tier 1 Strategies to support improved attendance

    - Analyze, monitor and implement intervention strategies for individual/group of students
- Chronic Absenteeism dashboards at the site level in district that can be broken down into subgroups (like SWD)
- Enhanced partnership with Attendance and SpEd office regarding tier 3 interventions
    - SpEd Coordinators are invited and attempt to attend SARB meetings
    - SpEd Coordinators consult and collaborate with attendance office on specific students
- Redeveloped SART contracts to identify barriers of attendance in order to provide more focused support to increase attendance.
- Utilize outside partners, leverage partnerships at school sites

III. Data and Analysis

In order to identify appropriate root causes for Element: Chronic Absenteeism, the LEA should examine formal and informal data to understand the factors contributing to the challenges the LEA is experiencing. The *Data Source Checklist*, below, should guide the SEP Team in next steps, but the range of data review is within the discretion of the SEP Team.

Data Source Checklist

Identify data sources the SEP Team will use in developing the LEA's 2019–20 SEP for Element: Chronic Absenteeism. Analyze the selected data sources to find connections/relationships between the data and the LEA's performance.

Data Sources	Check if Using
Annual Performance Report (APR)	
Special Education Information System (e.g., SEIS, Welligent, SIRAS)	
California Longitudinal Pupil Achievement Data System (CALPADS)	
Assessment and Evaluations	
The LEA's Local Control Accountability Plan (LCAP)	
Referral Systems, Response to Intervention, Multi-tiered System of Supports (MTSS)	
Interventions and Universal Screening	
Discipline Information and Referrals	**X**
Parent Input	
Compliance Review (Student File Review, SELPA Governance Review, Policies and Procedures Review)	
Policies and Procedures	**X**

Other (please state):District Attendance dashboard, State attendance dashboard	**X**

IV. Additional Factors Affecting Performance

Are there any other factors, internal and/or external, that the SEP Team should consider when evaluating performance for this Element? List in the box below. For example, do the systems, policies, procedures, and/or practices address this Element for students with disabilities, and are they working as intended?

- Examining how district policy for students who have not shown up to school differ between general education and Special Education and if that impacts chronic absenteeism reports.
- Examining intersection of foster/unhoused, SpEd, and chronic Absenteeism.
- Examining suspensions, discipline behaviors and links to absenteeism. Are students with high suspensions also chronically absent?
- Note: Our Data Dashboard breaks down by disability type and ED, MD are the highest chronic absenteeism.

V. Root Cause Analysis and Improvement

Complete the boxes and charts below. In the Root Cause box, identify a root cause for the LEA's performance level specific to Element: Chronic Absenteeism. In the Data Support box, include an explanation of the data and any background information needed for the root cause to be understandable to someone outside the LEA. In the Phase 1 chart, identify the strategies/activities that will address the root cause and provide the required details regarding implementation. In the Phase 2 chart, provide the required details regarding monitoring. In the last chart, list documentation that the LEA intends to keep regarding implementation and monitoring.

Note: The boxes and charts below apply to one, and only one, root cause. Copy and complete a new set of boxes and charts for each additional root cause, if any.

Root Cause:

Students are chronically absent when they are absent 10% or more. Data shows that students with Emotional Disturbances and our AA students have more suspensions than other students and therefore that trigger is easily reached to be chronically absent.

Data Support and Background for Root Cause:

District Suspension and attendance dashboards	
Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement **List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)**	
1.	**Revisions of Discipline and Intervention Matrix;**
2.	**Implementation of Matrix appropriately (by site administrators);**
3.	**Targeted Staff (Culture/Climate ambassadors and assistants, administrators, custodian, food service, etc…) receive training focusing on supporting implementation of student's IEPs/BIPs and deescalation;**
4.	**Create a data dashboard to track and proactively provide information to appropriate departments about inappropriate suspensions/discipline and to serve as an early warning system for attendance challenges for students with IEPs.**
5.	
Resources Required **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**None: In Progress**
2.	**Access to administrators/time in Professional Development to review plans during Principal Professional Learning Time**
3.	**Site PD time for SpEd staff/case manager to inform site staff of student's needs**
4.	**Research Assessment and Data (RAD) personnel time**
5.	
Title of Person(s) Responsible for Implementation **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Coordinator of Attendance and Discipline**

2.	**Coordinators/Directors of Attendance and Discipline & Behavioral Health, Network Superintendents**
3.	**Coordinator SpEd, Site Admin, SpEd teachers**
4.	**Director of RAD**
5.	
Start Date **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Already started**
2.	**August 2021**
3.	**August 2021**
4.	**August 2021**
5.	
Date of Completion **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**January 2021**
2.	**November 2021**
3.	**December 2021**
4.	**September 2021**
5.	
Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Reduction in Suspensions for all of these**
2.	
3.	
4.	
5.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**Suspension dashboard comparing 2019/20 data as baseline**
2.	
3.	
4.	
5.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	

1.	**By December, 2021, the district will have at least 15% decrease in suspension of SWD, leading to a decrease in chronic absence of at least 10%.**
2.	
3.	
4.	
5.	

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).
2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

1. Copies of training slide decks/agendas;
2. Copies of meeting notes from the planning of the absenteeism dashboard;
3. Development and dissemination communication relative to the revised discipline matrix

Root Cause:

Students are chronically absent when they are absent for more than 10% of the school year. One of the leading factors of chronic absenteeism is the inability of schools and sites to develop meaningful relationships and experiences with students.

Data Support and Background for Root Cause:

Phase 1: Improvement Strategy Development	
Strategies/Activities for Improvement List *at least one* Strategy/Activity for this root cause. Insert additional lines if necessary.)	
1.	Trauma Informed Teaching & Culturally Responsive Teaching
2.	UDL Training
3.	Districtwide PBIS implementation with fidelity
4.	Ensuring quality certificated teachers in every special education classroom day 1.
5.	
Resources Required (Align numbers with Strategies/Activities for Improvement.)	
1.	Time and training costs
2.	Time and training costs
3.	Training, Support, and Accountability systems
4.	Robust Recruitment team
5.	
Title of Person(s) Responsible for Implementation (Align numbers with Strategies/Activities for Improvement.)	
1.	Chief Academic Officer
2.	Chief Academic Officer
3.	Chief Academic Officer
4.	Director of Talent and Recruitment
5.	
Start Date (Align numbers with Strategies/Activities for Improvement.)	
1.	January 2021
2.	January 2021
3.	January 2021
4.	February 2021
5.	
Date of Completion (Align numbers with Strategies/Activities for Improvement.)	
1.	December, 2021 (and ongoing for new staff)
2.	December, 2021 (and ongoing for new staff)
3.	December, 2021 (and ongoing for new staff)
4.	Ongoing

5.	
Phase 2: Monitoring of Improvement	
Expected Outcome(s) **(Align numbers with Strategies/Activities for Improvement.)**	
1.	**We expect to see an increase in the use of proactive attendance interventions and a correlated decrease in chronic absenteeism for all strategies**
2.	
3.	
4.	
5.	
Methods of Measurement **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**We will use the Data Dashboard on absenteeism for all strategies**
7.	
8.	
9.	
10.	
Quantifiable Standards of Improvement **(Align numbers with Strategies/Activities for Improvement.)**	
6.	**By December, 2021, there will be a decrease in chronic absence for students with IEPs of at least 15% from the CDE-provided baseline.**
7.	
8.	
9.	
10.	

Documentation of Implementation

Each LEA is required to keep documentation on the implementation and monitoring of the SEP. The documentation should be a record of the strategies/activities and the results of the implementation of the strategies/activities.

The documentation should include the following:

1. Evidence the SEP meetings and strategies/activities have occurred (e.g., agendas, sign in sheets, meeting notes, slide presentations).

2. Indication of changes that have occurred as a result of the strategies/activities (e.g., copy of revised policies and procedures, new tracking mechanisms).
3. Evidence that the SEP Team has monitored the implementation of its plan.
4. Demonstration of the preliminary results of strategies/activities (e.g., surveys, observation notes).
5. Evidence of quantifiable measurement of success, if any (e.g., increasing classroom assessment scores, before-and-after data charts).

List the documentation the SEP Team intends to keep on the above-stated implementation and monitoring activities related to this root cause.

1. Ongoing meeting notes or agendas from Special Education and Talent joint meetings;
2. Copies of training decks and agendas for staff

Copy the above charts for each additional root cause.

VI. Placement of Forms in the SEP PDF

Place each required *Element Form* in numerical order (or alphabetical order thereafter for unnumbered Elements) after the *LEA Identification Form*. Save as one PDF document. If the LEA uses separate *Root Cause Analysis and Improvement Forms*, the placement of those forms should be directly after the corresponding *Element Form*.

Title the single PDF SEP document with the following naming convention: <Name of LEA><SELPA> 2019–20 SEP-<Targeted or Intensive>.

Prepared by the California Department of Education, July 22, 2020.

Board Office Use: **Legislative File Info.**	
File ID Number	20-2326R
Introduction Date	12/18/20
Enactment Number	
Enactment Date	

OAKLAND UNIFIED SCHOOL DISTRICT
Community Schools, Thriving Students

Memo

To Board of Education

From Kyla Johnson Trammell; Superintendent
Sondra Aguilera, Chief Academic Officer
Raquel Jimenez, Executive Director of Equity
Wes Jacques, Executive Director of Academics and Innovation
Andrea Bustamante, Executive Director of Community Schools, Student Services
Jennifer Blake, Executive Director of Special Education

Board Meeting Date December 18, 2020

Subject Approval of the Comprehensive Coordinated Early Intervening Services Plan

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Action Approval by the Board of Education of the Comprehensive Coordinated Early Intervening Services Plan.

Background

Each year, the California Department of Education (CDE) conducts an analysis of the rates associated with identification of Special Education services. As a result, school districts are notified when their rates of special education are disproportionate and in which specific areas of special education they are disproportionate. Oakland Unified has been identified as being disproportionate for the over-identification of African American students that qualify for Special Education services under Emotionally Disturbed and for suspending African American students who have Individualized Education Programs (IEPs) at higher rates than their peers that also receive IEP services. As a District identified as significantly disproportionate, we must devise a Comprehensive Coordinated Early Intervening Services Plan (CCEIS).

Under the Federal Individuals with Disabilities Education Act (IDEA) Determining significant disproportionality requirements, if a LEA is identified as significantly disproportionate, the LEA must reserve 15 percent of its 611 and 619 IDEA grant funds to address factors contributing

to the significant disproportionality (See 34 CFR sections 300.646(c) and (d).) These services are for both students who currently receive special education services and who do not currently receive special education services, but who need additional academic and behavioral supports to succeed in a general education environment. An LEA must develop a CCEIS plan to identify and address the factors contributing to the significant disproportionality in the LEA for the identified category (See 34 *CFR* section 300.646(d)(1).)
CCEIS activities must:

- Include children not currently identified as needing special education or related services but who need additional academic and behavioral support to succeed in a general education environment
- Address the needs of those student subgroups that were identified as the basis for the LEA's identification as significantly disproportionate, but not exclusively, for those student subgroups
- Focus on instructional activities for children age three through twelfth grade with primary focus on age three through third grade
- Allow expenditures on children ages three through five if an LEA has an established preschool program as part of the educational system
- Focus on academic and behavioral instructional services and professional development
- Occur within the allowable CCEIS budget period (27 months)

(See 34 *CFR* sections 300.646(d)(3) and (4).)

Discussion

The CCEIS process includes Four Phases to create and implement the CCEIS Plan. Each Phase consists of milestones that lead to the description of the plan details.

Phase 1 includes:

- Formation of a Leadership Team and a Stakeholders Team. These teams are tasked with completing relevant milestones to design the plan. These teams will also be responsible for future implementation planning and reporting on the progress of our plan.
- Collection of relevant data that provides multiple views on outcomes for our African American students.

Phase 2 includes:

- Examine current initiatives and programs to address racial and ethnic disproportionality;
- Complete a self reflection on relevant data;
- Conduct focus groups so that the qualitative data examined is triangulated with the experiences multiple stakeholders have in our District.
- Use quantitative and qualitative data to form the Root Causes for OUSD.

The Root Causes identified in our process were the following:

1) Cultural Dissonance, Bias, Teacher Expectations and Misconceptions

2) Inconsistent Implementation of District wide Discipline Practices

3) Limited Targeted General Education Interventions for African American Students

4) Lack of Meaningful Engagement with African American Students and Families

5) Absence of Culturally Relevant Assessment and Interventions

6) Inconsistent Staff Instructional Capacity and High Teacher Turnover

7) Curriculum and Instruction

8) Underutilization of Section 504

Once Phase 1 and 2 were complete, the teams worked to identify the Action Plan, the milestone in **Phase 3**. The Action Plan describes the Measurable Outcomes our teams identified to address the above named OUSD Root Causes. It is important to highlight that the Action Plan describes the activities for implementing the Measurable Outcomes and the activities described, largely consisting of school-based training, are reflected in the attached budget form. The Measurable Outcomes are the following:

Measurable Outcome #1: Racial Justice, Equity & Healing- Anti-Racist Training Design & Implementation
Measurable Outcome #2: Multi Tiered Systems of Support (MTSS)
Measurable Outcome #3: Family Partnership with African American students and families

Measurable Outcome #4: Early speech and language screening of students with district literacy measures indicating below-benchmark scores in TK/K.
Measurable Outcome #5: Early Literacy

Part of creating the Action Plan is identifying the target population. He target population is the following:

Elementary schools with two or more of the following data points:
-15% or more of students identify as African American;
-Socioeconomically disadvantaged population of 80% or more;
-Students with a chronic absenteeism rate at 10% or higher;
-Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and**
Students in TK-2 who:
-Do not currently have an IEP;
-Perform 2 grades or lower on our local literacy assessments; and
-Are either chronically absent or have been suspended for two or more days within the last school year
The number of students at these schools must be greater than 7 to receive these interventions.
The number of schools identified to receive support through the CCEIS Plan is 28.

The table below is a summary of how the root causes will be addressed by the Measurable Outcomes and/or other plan areas as described in the Superintendents Work Plan and Local Control and Accountability Plan (LCAP).

Root Cause	**Measurable Outcome**
1) Cultural Dissonance, Bias, Teacher Expectations and Misconceptions	**Measurable Outcome #2:** Racial Justice, Equity & Healing- Anti-Racist Training Design & Implementation
2) Inconsistent Implementation of District wide Discipline Practices	**Measurable Outcome #1:** Multi Tiered Systems of Support (MTSS)
3) Limited Targeted General Education Interventions for African American Students	**Measurable Outcome #1:** Multi Tiered Systems of Support (MTSS)

4) Lack of Meaningful Engagement with African American Students and Families	**Measurable Outcome #3:** Family Partnership with African American students and families
5) Absence of Culturally Relevant Assessment and Interventions	**Measurable Outcome #4:** Early speech and language screening of students with district literacy measures indicating below-benchmark scores in TK/K.
6) Inconsistent Staff Instructional Capacity and High Teacher Turnover	**Measurable Outcome #1:** Multi Tiered Systems of Support (MTSS) **Measurable Outcome #5:** Early Literacy
7) Curriculum and Instruction	**Measurable Outcome #5:** Early Literacy
8) Underutilization of Section 504	**Measurable Outcome #1:** Multi Tiered Systems of Support (MTSS)

Phase 4 describes how the programmatic action plan will be implemented, how we will evaluate effectiveness, and how we are thinking about sustainability of this CCEIS Plan activities after 24 months of implementation. It is in Phase 4 that we will document implementation, make necessary adjustments, and create progress reports to share with the Board and the public on a quarterly basis.

Fiscal Impact

The LEA must reserve 15 percent of its 611 and 619 IDEA grant funds to address factors contributing to the significant disproportionality (See 34 CFR sections 300.646(c) and (d).) For Oakland Unified School District, the amount of funds that have been set-aside is $1,305,415.00.

Attachment

1. Comprehensive Coordinated Early Intervening Services Plan Presentation
2. Comprehensive Coordinated Early Intervening Services Plan (CCEIS)
3. Comprehensive Coordinated Early Intervening Service Plan Targeted Student Population
4. Comprehensive Coordinated Early Intervening Services Plan Budget
5. Comprehensive Coordinated Early Intervening Services Plan Signature Form

OAKLAND UNIFIED SCHOOL DISTRICT
Community Schools, Thriving Students

Comprehensive Coordinated Early Intervening Services Plan (CCEIS)

i am OUSD

Wednesday, December 9, 2020

Outcomes

- Describe how the Comprehensive Coordinated Early Intervening Services Plan was created;
- Review the major areas of our Comprehensive Coordinated Early Intervening Services Plan; and
- Collect feedback.

Formation of the CCEIS Plan
Phases 1-4

Phase 1-2

Phase 1 includes:

- Formation of a Leadership Team and a Stakeholders Team. These teams are tasked with completing relevant milestones to design the plan. These teams will also be responsible for future implementation planning and reporting on the progress of our plan.
- Collection of relevant data that provides multiple views on outcomes for our African American students.

Phase 2 includes:

- Examine current initiatives and programs to address racial and ethnic disproportionality;
- Complete a self reflection on relevant data;
- Conduct focus groups so that the qualitative data examined is triangulated with the experiences multiple stakeholders have in our District.
- Use quantitative and qualitative data to form the Root Causes for OUSD.

OUSD's Risk Ratios

Indicator 9–Disproportionality Overall: Percent of racial and ethnic disproportionality among students ages six through twenty-two which may be due to policies, procedures, or practices.

	American Indian	Asian	African American	Hispanic	Multiple Ethnicities	Pacific Islander	White
Students with Disabilities	24	437	2,023	2,062	300	18	390
Total Enrollment	109	5,735	9,524	15,787	2,420	400	4,348
Risk Ratio (Max 3)	1.61	0.52	1.89	0.92	0.90	0.33	0.63
Disproportionate?	--	--	--	--	--	--	--

Emotional Disturbance	American Indian	Asian	African American	Hispanic	Multiple Ethnicities	Pacific Islander	White
Students with Disabilities	1	3	182	66	27	2	21
Risk Ratio (Max 3)	NC	NC	4.59	0.40	1.46	NC	0.58
Disproportionate?	--	--	OVR	--	--	--	--

Data Collection Activities

Over-identification of African American Students as Emotionally Disturbed, Suspensions

- Program and Policy Inventory and Review;
- File Review Findings;
- Racial Disparity Self-Reflection;
- Data Dives (Suspensions by site, Special Education Referrals, Achievement Data);
- Focus groups; and
- Root cause analysis to identify our target population for CCEIS-funded intervention.

Our Key Findings...

Some of our takeaways from data analyzed:

- Currently, many district interventions lack a clearly-defined Tier II, so students who need additional support may jump to Tier III supports or Special Education referral;
- Students who are eligible under Emotional Disturbance are more likely to change schools frequently, in some cases every 1-2 years;
- Many students within this population had early childhood communication delays that manifested as problem behavior;
- Once a student is in a Special Education program, there is a pattern of general education staff thinking that child now “belongs” elsewhere or should be supported by someone else

Root Cause Analysis

The Root Causes identified in our process were the following:

1) Cultural Dissonance, Bias, Teacher Expectations and Misconceptions

2) Inconsistent Implementation of District wide Discipline Practices

3) Limited Targeted General Education Interventions for African American Students

4) Lack of Meaningful Engagement with African American Students and Families

5) Absence of Culturally Relevant Assessment and Interventions

6) Inconsistent Staff Instructional Capacity and High Teacher Turnover

7) Curriculum and Instruction

8) Underutilization of Section 504

Narrowing in on our Target Population

- No more than 300 students;
- Intersect on multiple data points within the Disproportionality Area (ED and Suspensions, referrals to SpEd, literacy);
- Focus should be on early intervention;
- The overall plan should include Measurable Outcomes for the Target Population.

Target Population

Elementary schools with two or more of the following data points:

-15% or more of students identify as African American;

-Socioeconomically disadvantaged population of 80% or more;

-Students with a chronic absenteeism rate at 10% or higher;

-Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and**

Students in TK-2 who:

-Do not currently have an IEP;

-Perform 2 grades or lower on our local literacy assessments; and

-Are either chronically absent or have been suspended for two or more days within the last school year

The number of students at these schools must be greater than 7 to receive these interventions.

CCEIS Action Plan
Phase 3

Plan Details

CCEIS activities must:

- Include children not currently identified as needing special education or related services but who need additional academic and behavioral support to succeed in a general education environment
- Address the needs of those student subgroups that were identified as the basis for the LEA's identification as significantly disproportionate, but not exclusively, for those student subgroups
- Focus on instructional activities for children age three through twelfth grade with primary focus on age three through third grade
- Allow expenditures on children ages three through five if an LEA has an established preschool program as part of the educational system
- Focus on academic and behavioral instructional services and professional development
- Occur within the allowable CCEIS budget period (27 months)

(See 34 *CFR* sections 300.646(d)(3) and (4).)

Action Plan

3.2a. Action Plan	Description
Measurable Outcome	
Indicator/Element(s)	
Root Cause(s)	
Target Population	

Each **Measurable Outcome** may have multiple Activities.

Activity	
Staff Responsible	
Timeline	
Data Sources/Methods for Evaluating Progress	

Measurable Outcome 1

3.2a. Action Plan	Description
Measurable Outcome #1: Multi Tiered Systems of Support (MTSS)	By September 30, 2022, 100 % of schools with students in our focus population will develop and implement MTSS plans for Behavioral and Academic Expectations and Interventions. Additionally, identified school sites will utilize the Oakland Unified School District's MTSS Framework to build a tiered student support and intervention system resulting in a 5% reduction in suspensions and increase student access to interventions for students that are struggling academically.

Measurable Outcome 1

Activity	-Refine the MTSS Framework to ensure that each tier for instruction and behavioral health expectations are clear. Ensure each Tier is well defined and implementation of Section 504 must be included within our tiered approach.
Activity	-Implement a training and communication campaign of the refined OUSD MTSS Framework.
Activity	-Provide training and coaching to schools to identify and implement Multi-Tiered System of Supports for both Academics and Behavior

Measurable Outcome 2

3.2a. Action Plan	Description
Measurable Outcome #2: Racial Justice, Equity & Healing- Anti-Racist Training Design & Implementation	By September 2022, there will be a 25% increase in students and their families feeling connected to their school site as measured by CHKS Data, chronic absenteeism rates will decrease by 5%, and suspensions will decrease by 3% at our target schools.

Measurable Outcome 2

Activity	-Provide on-going foundational equity learning professional development to teachers and school leaders, integrated with Literacy and MTSS training described above.
Activity	-Coordinate with Literacy and MTSS leads to design integrated content during professional learning
Activity	-Support school leadership and their SSC teams to prioritize funding implementation of multi-tiered systems of support (academic and SEL interventions)

Measurable Outcome 3

3.2a. Action Plan	Description
Measurable Outcome #3: Improve Family Partnerships	By September 2022, there will be a 25% increase in students and their families feeling connected to their school site as measured by CHKS Data, 100% of schools will implement plans for direct teacher-parent academic partnership, communication, and connection with families.

Measurable Outcome 3

Activity	-Provide family partnership professional learning, in coordination with Literacy, MTSS, Equity learning for our targeted schools.
Activity	-Coordinate with Literacy and MTSS leads to design integrated professional content learning that includes equity and family partnership learning
Activity	-Support school leadership and their SSC teams to develop family partnership plans that include activities aligned with their SPSA plan for targeted literacy and MTSS implementation

Measurable Outcome 4

3.2a. Action Plan	Description
Measurable Outcome #4: Early speech and language screening of students with district literacy measures indicating below-benchmark scores in TK/K.	-Early speech and language screening of students with district literacy measures indicating below-benchmark scores in TK/K.

Measurable Outcome 4

Activity	-Identify and adopt a culturally-appropriate universal screening tool
Activity	-Assign and train highly-qualified speech-language pathologists to each network of schools
Activity	-Utilize district assessment data to identify the cohort of students who require screening

Measurable Outcome 5

3.2a. Action Plan	Description
Measurable Outcome #5: Early Literacy	By May 30, 2022, we will reach our early literacy annual goals--Kindergarten: 80% of students will master foundational literacy skills on i-Ready; 1st Grade: More than 50% of students read at/above grade level in i-Ready (30% baseline) with less than 1% multiple years below grade (4% baseline) in i-Ready; 2nd Grade: 50% of read at/above grade level (19% baseline) with less than 5% multiple years below (baseline 27%) for our Targeted Population at specific schools.

Measurable Outcome 5

Activity	-Monitor implementation and support implementation of Tier 1 strategies: including daily foundational literacy with the SIPPS curriculum and i-Ready platform; reading, writing, discussion grounded in complex text.
Activity	-Provide on-going professional development to teachers and school leaders. Use i-Ready universal screener and diagnostic assessment to identify Tier 2 and 3 students at each elementary school.
Activity	-Support school leadership and teachers to assess and manage multi-tiered systems of support by monitoring the implementation of the MTSS systems at target schools.

Phase 4

- Implementation begins after the California Department of Education (CDE) approves the plan;
- Ongoing Stakeholder Meetings; and
- Quarterly Progress Monitoring reported to the CDE.

Board and Community Comments

Quality Schools in Every Neighborhood!

OAKLAND UNIFIED SCHOOL DISTRICT
Community Schools, Thriving Students

1000 Broadway, Suite 300, Oakland, CA 94607

www.ousd.org @OUSDnews

APPENDIX

Supporting Documents

1. Comprehensive Coordinated Early Intervening Services Plan (CCEIS)
2. Comprehensive Coordinated Early Intervening Service Plan Targeted Student Population
3. Comprehensive Coordinated Early Intervening Services Plan Budget
4. Comprehensive Coordinated Early Intervening Services Plan Signature Form

Significant Disproportionality Comprehensive Coordinated Early Intervening Services Plan (CCEIS)

The California Department of Education (CDE) has identified certain local educational agencies (LEAs) as significantly disproportionate based on race or ethnicity with respect to the identification of children with disabilities; the identification of children in specific disability categories; the placement of children with disabilities in particular educational settings; or the incidence, duration, and type of disciplinary actions, including suspensions and expulsions.

The purpose of this document is to describe requirements regarding Significant Disproportionality and Comprehensive Coordinated Early Intervening Services (CCEIS). The CCEIS Requirements and Instructions and budget and plan forms are designed to meet federal requirements for the use of CCEIS funds.

Please refer to the Padlet for forms and other information specific to Significant Disproportionality at the following link:

https://padlet.com/sedmonitoring/1920monitoring

Federal Individuals with Disabilities Education Act Requirements (See Title 34 *Code of Federal Regulations* (34 *CFR*) section 300.647 Determining significant disproportionality)

Under the Federal Individuals with Disabilities Education Act (IDEA) Determining significant disproportionality requirements, if a LEA is identified as significantly disproportionate, the LEA must reserve 15 percent of its 611 and 619 IDEA grant funds to address factors contributing to the significant disproportionality (See 34 CFR sections 300.646(c) and (d).) These services are for both students who currently receive special education services and who do not currently receive special education services, but who need additional academic and behavioral supports to succeed in a general education environment. An LEA must develop a CCEIS plan to identify and address the factors contributing to the significant disproportionality in the LEA for the identified category (See 34 *CFR* section 300.646(d)(1).)

CCEIS activities must:

- Include children not currently identified as needing special education or related services but who need additional academic and behavioral support to succeed in a general education environment
- Address the needs of those student subgroups that were identified as the basis for the LEA's identification as significantly disproportionate, but not exclusively, for those student subgroups
- Focus on instructional activities for children age three through twelfth grade with primary focus on age three through third grade

- Allow expenditures on children ages three through five if an LEA has an established preschool program as part of the educational system
- Focus on academic and behavioral instructional services and professional development
- Occur within the allowable CCEIS budget period (27 months)

(See 34 *CFR* sections 300.646(d)(3) and (4).)

Budget and Allowable Expenditures Information for 2020 (See 34 *CFR* section 300.646(d)(1)(iii).)

The following are required for the development of the CCEIS Budget:

- CCEIS expenses for 2020 must conform to the U.S. Office of Special Education Programs (OSEP) IDEA Part B Regulations Significant Disproportionality (Equity in IDEA). For detailed allowable Comprehensive Coordinated Early Intervening Services (Comprehensive CEIS), please refer specifically to Questions C-3-1 through C-3-10, pages 19 through 24, on the U.S. Department of Education Web page at https://www2.ed.gov/policy/speced/guid/idea/memosdcltrs/significant-disproportionality-qa-2-23-17.pdf.
- Reserve 15 percent of the Fiscal Year 2020–21 IDEA grant funds for CCEIS. (Refer to the OSEP regulations, Questions C-3-6, page 21)
- IDEA funds budgeted for the 2020 CCEIS plan must be exhausted within the 27-month report period: July 1, 2020, through September 30, 2022. Implementation of CCEIS cannot begin until written approval of the CCEIS Plan is provided by the CDE.

- Clarification on appropriate use of CCEIS funds:
    - **Supplement not supplant**: CCEIS funds should only be used to supplement, and not supplant, activities funded with, and implemented utilizing, Part B funds or other federal funds (See 34 *CFR* section 300.266(e).) (Refer to the OSEP regulations, Question C-3-7, Page 21 of 28).
    - **Professional development**: CCEIS professional development events are for preschool through grade twelve personnel who are responsible for students who need additional academic and behavioral supports to succeed in the general education environment. (Refer to the OSEP regulations, Questions C-3-8, page 22)

      Personnel who exclusively serve students with individualized education programs (IEPs) cannot be funded using CCEIS funds. However, special education personnel can be included in professional development activities associated with the implementation of CCEIS under certain circumstances. For example, if they do not increase the cost of the professional development, the quality of the professional development does not decrease, and their participation does not lead to the exclusion of personnel who are serving students defined as needing additional support, then special education personnel may be included in professional development.

CCEIS planning process: Support the CCEIS planning process with a clear relationship to the development of the CCEIS Plan. CCEIS funds may be used to hire a CDE-approved technical assistance facilitator to assist with

development and the implementation of the CCEIS Plan. To the extent that special education personnel are involved in developing the CCEIS Plan, the LEA may use CCEIS funds to pay for this involvement.

Phase 1

1.1 Leadership Team: List members' names, emails, titles/roles, and responsibilities related to the CCEIS Plan. In small LEAs, there may be a group that covers both the leadership and stakeholder functions. Multiple roles may be assigned to one administrator or team member.

Name	Title/Role	CCEIS Team Responsibility for Development and Implementation of CCEIS Plan	Email
Wesley Jacques	Executive Director, Academics and Instructional Innovation	Academic Program Decision Maker, oversee the implementation of the CCEIS plan, and completion of progress reports. Implementation of the plan.	wesley.jacques@ousd.org
Raquel Jimenez	Executive Director, Office of Equity	District Training on Equity, oversee the implementation of the CCEIS plan, and completion of progress reports.	raquel.jimenez@ousd.org
Jerome Gourdine	Director, Targeted Student Supports, Office of Equity	District Training on Equity, oversee the implementation of the CCEIS plan, and completion of progress reports.	jerome.gourdine@ousd.org
Jennifer Blake	Executive Director, Special Education	Special Education program decision maker.	jennifer.blake@ousd.org
Barbara McClung	Director, Behavioral Health	Behavioral Health decision maker, oversee the implementation of the CCEIS plan, and completion of progress reports.	barbara.mcclung@ousd.org
Andrea Bustamante	Executive Director, Community Schools, Student Services	Student Services decision maker, oversee the implementation of the CCEIS	andrea.bustamante@ousd.org

		plan, and completion of progress reports.	
Sondra Aguilera	Chief Academic Officer	Decision maker, oversee the implementation of the CCEIS plan, and completion of progress reports.	sondra.aguilera@ousd.org

Do the members of this team have decision-making authority? What is the process for LEA approval of this CCEIS plan? Type answer here:

Yes, the members of the leadership team have decision making authority.

The CCEIS Leadership Team meets bi-weekly to review academic and behavioral data, review progress on plan creation, implementation, and monitoring. There have been stakeholder meetings since June 2020 to devise the CCEIS Plan in which the Leadership Team leads (details described below). Additionally, the Superintendent included the creation of the CCEIS Plan on her Superintendent Work Plan, therefore raising awareness for the community and our School Board of the CCEIS Plan. A Board progress update on our plan was presented on October 28, 2020 and the final plan was presented on December 9, 2020.

Has your district been previously identified as significantly disproportionate? Yes or No.

YES

If your district has been previously identified as significantly disproportionate, list previous year(s) of identification (please include indicator(s) and race/ethnicity for each year ie 2018 Indicator 10, White Emotional Disturbance):

2016 Indicator 10, African American Emotional Disturbance

1.2 Stakeholder Group: List members' names, roles, and CCEIS related responsibilities.

Name	Title/Role	CCEIS Team Responsibility for Development and Implementation of CCEIS Plan
Sondra Aguilera	Cabinet Level – General Education and Special Education	Leadership Team- Writes and Approves Plan
Wesley Jacques	Director of Curriculum (or Similar)	Reviews/analyzes data, provides feedback and recommendations for content of plan, responsible for specific sections of implementation
Jenn Blake	SELPA Director	Leadership Team- Writes and Approves Plan
Juan Du	Director of Assessment (or Similar)	Provides and analyzes data

Stephanie Jemilo	Appropriate Grade Level General Education Teacher	Reviews/analyzes data, provides feedback and recommendations for content of plan
Tori Partridge	Appropriate Grade Level Special Education Teacher	Reviews/analyzes data, provides feedback and recommendations for content of plan
Melisha Linzie	Community Member	Reviews/analyzes data, provides feedback and recommendations for content of plan
Various	Parent (diverse representation)	Reviews/analyzes data, provides feedback and recommendations for content of plan
Kyla Johnson-Trammell	Superintendent	Reviews/analyzes data, provides final feedback and approval of the plan before submission
Anita Comelo, Jorge Wagner	Site Level Administrator	Reviews/analyzes data, provides feedback and recommendations for content of plan
Alva Leung	Fiscal Services Representative	Reviews/analyzes data, provides feedback and recommendations for content of plan, commits funds in accordance with CCEIS requirements
Jeff Dillon	Human Resources Administrator (optional)	Reviews/analyzes data, provides feedback and recommendations for content of plan
	Bargaining Unit Representative (optional)	
Lucia Moritz	Other: Network Superintendent	Reviews/analyzes data, provides feedback and recommendations for content of plan, responsible for specific sections of implementation
Misha Karigaca	Other: Discipline and Attendance Lead	Reviews/analyzes data, provides feedback and recommendations for content of plan, responsible for specific sections of implementation
Elizabeth Paniagua	Other: Scheduling/Counseling Lead	Reviews/analyzes data, provides feedback and recommendations for content of plan

Note: Team composition requires a diverse group of parents and community members, including representatives of the identified racial/ethnic category.

Provide the dates the Stakeholder group met and a summary of the work completed by the Stakeholder Group:

6/1/2020, 7/14/2020, 9/28/2020, 10/26/2020, 11/9/2020, 11/30/2020, 12/7/2020

The stakeholder group provided input and feedback on the milestones within the CCEIS planning. Each meeting, there was a sharing of work completed on the milestones, feedback collected on the work, and requested next steps. After each meeting, the Leadership Team reviewed the feedback collected during the Stakeholder Meetings to adjust and add to the completion of the milestones. Attached are examples of the work completed and associated agendas:

Annotated Checklist for Addressing Racial Disproportionality

The annotated checklist provides information on 3 major areas of our District, 1. district and school resource issues, 2. system policy, procedure, and practice issues at district, school and classroom levels, and 3. environmental factors to identify possible root causes of disproportionality. The checklist helped

our stakeholders examine the three areas as it pertains to their views on our disparities concerning the role race plays in our special education identification, restrictive settings, and discipline.

OUSD Policies, Practices, Procedures Matrix

Review of the policies, practices, and procedures allowed both the Leadership Team and the stakeholder group to realize that many of our District policies are out of date and have not been updated for some time. In examining the policies, we also identified key policies that need to be revised to reflect current, more updated practices we have been working on to improve our District services.

Agenda 11/9/2020

Agenda 11/30/2020

1.3 List the activities the LEA has completed to support the development of the CCEIS Plan*:

Communicated with CDE FMTA via two virtual meetings and email communication, participated in all required workshops (Workshop A and B facilitated by SPP/TAP), participated in high leverage huddles, convened stakeholder meetings and leadership meetings, established attendees for focus groups, held a data review session, completed requisite forms for phases 1-3.

*Communicated with CDE FMTA Consultant and Technical Assistance Facilitator; Participated in virtual Community of Practice (CoP) meetings; Attended CCEIS Workshop Phase 1 and 2; Attended CCEIS Workshop Phase 3 and 4

1.4 Choose Technical Assistance (TA) Facilitator(s)

Name the TA Facilitator(s) and describe current and anticipated services. LEAs are required to contract for a minimum of 10 hours or TA Facilitation for each area of identification. You must supply a copy of the contract or MOU for each TA facilitator. If you are using a non-SPP-TAP TA facilitator you must obtain prior permission from the CDE and supply a copy of the TA facilitator's resume and contract to the FMTA consultant.

Name	Current Service	Anticipated Service
Gary Mc Henry	Met with CAO and ED of Special Education to review progress.	
Dr. Mildred Browne	Met with CAO and ED of Special Education to review progress.	
Suwinder Cooper	Conducted Focus Groups and Root Cause Analysis	
Dr. Laura Savage	Conducted Focus Groups and Root Cause Analysis	

1.5 Gather Relevant Data

List the relevant sources of data that are used to inform decision-making. Are there any additional data sources that would be beneficial but data was not available (e.g., Referral data by teacher, etc.)? *(See State Performance Plan Technical Assistance Project's website: https://spptap.org/significant-disproportionality/sd-ceis-guidance-documents-and-forms/ for additional information*.)

The following data sets from 2017-2020 were utilized in creation of the CCEIS Plan from our OUSD Data Dashboard:

- Suspensions of African American Students with IEPs by school, disaggregated by gender, 2017-2020
- Referrals for Special Education assessment by school, disaggregated by race, 2017-2020
- Student referral data by school, by offense, by race and gender, 2017-2020
- Literacy data, disaggregated by race, by school, 2017-2020
- Mathematics data, disaggregated by race, by school, 2017-2020
- File Reviews- highlighted speech and language screening
- Inventories highlighting qualitative data- Initiatives, Self Reflection
- Focus Group- Qualitative Data;
- Section 504 Data 2019-2020 and 2020 to date;
- Stakeholders referenced past experiences and practices to provide feedback on planning milestones and the CCEIS Plan.
- Overall Data used is located in our comprehensive data spreadsheet. This data reflects data sets from 2017-2018, 2018-2019, 2019-2020.

Phase 2

2.1 Complete a Local Educational Agency (LEA) Initiative Inventory

Enter your LEA initiatives that align or have some areas of integration with the efforts to address disproportionality.

Initiative and Funding Source	**Relationship to LCAP and other Initiative Goals/Priorities**	**Target Group**	**Leaders and Responsible Staff**	**Educational Areas: Curriculum and Instruction, Behavior, Family and Community Engagement, Climate, Social-Emotional Learning, Other**
Multisensory Literacy for All	6500- Special Ed	SwDs with dyslexia/related	Special Education Leadership	X Curriculum and Instruction Behavior

Purchase, allocation and training on AB1369-compliant curriculum [Spire for K-8 and Voyager-Sopris for 9-12] 2017-2020 LCAP Goal 3 2020-2021 LCP		print-based disabilities and phonological processing disorders		Family and Community Engagement Climate Social-Emotional Learning Other: _____
Positive Behavior Intervention Planning PBIP development and consultation by behavior specialists (BCBAs) 2017-2020 LCAP Goal 5 2020-2021 LCP	6500- Special Ed	New(er) teachers with students with intensive needs	Special Education Leadership	Curriculum and Instruction X Behavior Family and Community Engagement Climate Social-Emotional Learning Other: _____
Coordination of Services Team (COST) Referral & triage process for students with academic or behavioral concerns (Tiers 2-3) 2017-2020 LCAP Goal 5 2020-2021 LCP	Multiple	Students with academic or behavioral concerns	Community Schools Student Services	Curriculum and Instruction Behavior Family and Community Engagement Climate Social-Emotional Learning Other: _Mental Health Services_____
Positive Behavior Intervention Supports (PBIS) (Tiers 1-3) Universal Prevention, Targeted Intervention, Intensive Services for behavior 2017-2020 LCAP Goal 5 2020-2021 LCP	Multiple - 0000, SIGG	Principals/Teachers/Staff in general to develop school wide MTSS	CSSS/Behavioral Health	Curriculum and Instruction Behavior Family and Community Engagement Climate Social and Emotional Learning (SEL) curriculum: ● Early Childhood-Gr. 2—SEEDS of Learning ● Elementary—Caring School Community, 2nd ed.

				● Middle School—EL Education, Caring School Community, 2nd ed. ● High School—Engaging Schools Professional Development: ● Beginning of year curriculum implementation ● Monthly professional development and coaching Other: _____
Restorative Justice - Professional Learning - Onsite circles - Peer Education (Tiers 1-3) 2017-2020 LCAP Goal 5 2020-2021 LCP	Multiple 0000, 0002, 0003, 9121, 9277, 9337	Principals/Teachers/Staff.Students/Parents/Community Partners/School police and SSO's Training on restorative practices at three Tiers - 1)Community/Relationship Building, 2) Conflict Resolution/ Repairing Harm, 3) Supported Re-Entry	CSSS/Behavioral Health	Curriculum and Instruction Behavior Family and Community Engagement Climate Social and Emotional Learning (SEL) curriculum: ● Early Childhood-Gr. 2—SEEDS of Learning ● Elementary—Caring School Community, 2nd ed. ● Middle School—EL Education, Caring School Community, 2nd ed. ● High School—Engaging Schools Professional Development:

				● Beginning of year curriculum implementation ● Monthly professional development and coaching Other: Violence Prevention_____
School Based Mental Health Services (Gen Ed) Clinical counseling services for students with identified MH needs (Tiers 2-3) 2017-2020 LCAP Goal 5 2020-2021 LCP	Alameda County Medi-Cal, 0000	Students/Families with MH needs Staff via PD on MH first aid and other trauma informed practices	CSSS/Behavioral Health	Curriculum and Instruction Behavior Family and Community Engagement Climate Social-Emotional Learning Other: Violence Prevention_____ Other: Mental Health Services_____
Tobacco Use Prevention and Education Mentoring and Intervention for student identified with tobacco or substance use (Tiers 1-2) 2017-2020 LCAP Goal 5 2020-2021 LCP	CDE and 3010	Student for substance abuse prevention and intervention; staff for PD on screening and referral	CSSS/Behavioral Health	Curriculum and Instruction Behavior Family and Community Engagement Climate Social-Emotional Learning Other: Violence Prevention_____ Substance Abuse Prevention
Transitional Students and Families Case management, advocacy, transportation assistance, expedited enrollment (Tiers 1-3) 2017-2020 LCAP Goal 5 2020-2021 LCP	3010, 9283	Homeless and Foster Youth - social services and academic support	CSSS/Behavioral Health	Curriculum and Instruction Behavior Family and Community Engagement Climate Social-Emotional Learning Other: Violence Prevention_____

Early Behavioral Intervention (Gen Ed) BCBA's providing consultation and behavior plans (Tier 3) 2017-2020 LCAP Goal 5 2020-2021 LCP	0000, SIGG	Elementary age students with behaviors posing risk to self or other	CSSS/Behavioral Health	Curriculum and Instruction Behavior Family and Community Engagement Climate Social-Emotional Learning Other: Violence Prevention_____
African American Male Achievement/African American Female Excellence 2017-2020 LCAP Goal 5 2020-2021 LCP	3010, 0000	Students who identify as Black/AA-elective courses that offer a space for students to learn their history and build leadership and advocacy skills	Office of Equity	Curriculum and Instruction Behavior Family and Community Engagement Climate Social-Emotional Learning Other: _____
Attendance Improvement 2017-2020 LCAP Goal 5 2020-2021 LCP 2020-2021 Superintendent Work Plan	LCFF Supplemental Funding	Students who are chronically absent	Community Schools, Student Services	Curriculum and Instruction Behavior Family and Community Engagement X Climate Social-Emotional Learning Other: _____
Literacy Instruction 2017-2020 LCAP Goal 3 2020-2021 LCP	LCFF Supplemental	Students who are reading below grade level	Academics & Instructional Innovation	XCurriculum and Instruction Behavior Family and Community Engagement Climate Social-Emotional Learning Other: _____
Staff Retention 2017-2020 LCAP Goal 5	LCFF Supplemental	Examination of practices	Talent Department	Curriculum and Instruction Behavior

		that can support staff to stay in OUSD		Family and Community Engagement XClimate Social-Emotional Learning Other: Job Satisfaction

2.2 Complete a Programmatic Self-Assessment

Identify one or more of the approved Self-Assessment Tools used:

X Annotated Checklist for Addressing Racial Disproportionality

- X Preventing DISPROPORTIONALITY by Strengthening District Policies and Procedures — An Assessment and Strategic Planning Process (Linked Above)
- X Racial/Ethnic Disproportionality in Special Education/Data Analysis Workbook (Linked Above)

Identify other relevant Self-Assessment Tools used:

- Quality Standards for Inclusive Schools: Self-Assessment Instrument
- Addressing the Root Causes of Disparities in School Discipline: An Educator's Action Planning Guide
- Other:_____

Identify the programmatic self-assessment tool(s) used and describe process of completion:

The Adapted Annotated Checklist for Addressing Racial Ethnic Disproportionality in Special Education (also referred to as the Wisconsin Checklist) was utilized as the programmatic self-assessment tool.

The Annotated Checklist (Wisconsin) provides three checklists that address: 1) district and school resource issues 2) system policy, procedure, and practice issues at district, school and classroom levels 3) environmental factors to identify possible root causes of disproportionality. This checklist helps stakeholders analyze racial and ethnic disparities in Special Education identification, restrictiveness of setting, and discipline. It is also useful in identifying inappropriate policies and practices that may be contributing to the disparities. The Wisconsin checklist and the article by Catherine Kramarczuk Voulgarides & Natalie Zwerger, *Identifying the Root Causes of Disproportionality,* were used in an inquiry format as self-assessment tools to identify root causes and highlights some of the common policies, practices, and beliefs that place African American students at a disadvantage to their peers in Oakland Unified School District.

During the self-assessment process, the CCEIS Team conducted focus group sessions to determine the root cause of areas of disproportionality with regard to the 1) overrepresentation of African American students in the category of Emotional Disturbance; 2) overrepresentation of African American students in the category Other Health Impairment and 3) disciplinary actions such as office referrals and suspensions resulting in less than ten days out of school.

Between October and November 2020, a total of 9 focus groups were co-facilitated by Technical Assistant Facilitators, as part of stage two data collection phase of the programmatic improvement process. Ninety minute focus groups were conducted virtually, via zoom with the following groups:

10/27/20	Psychologists
10/28/20	Paraeducators & Instructional Support Personnel
10/28/20	Speech Pathologists
10/29/20	Two Focus Groups with Board Members
10/30/20	Social Workers
10/31/20	Coordination of Services Team
11/02/20	Teachers
11/18/20	Site Administration

Sondra Aguilera, The Chief Academic Officer, provided an introduction and overview of the data with regard to the significant disproportionality of African American - discipline and the over identification of African American students in the disability category of Emotional Disturbance. The Technical Assistant Facilitators provided the context and the use of the identified self-assessment tool to formulate potential hypotheses around the contributing factors. The conversations were focused using specific questions from the Annotated Checklist that relate to the various role groups from the three checklists which include: district and school resources; system policy, procedures & practice issues at the district, school and classroom levels and environmental factors.

Anecdotal data was captured through written notes and compiled into summaries for root cause analysis. The data was organized using categories from evidence based research outlined in the article, *Identifying the Root Causes of Disproportionality, New York University Technical Assistance Center on Disproportionality, by Catherin Kramarczuk & Natalie Zwerger.* Review of the anecdotal data from groups revealed common themes and patterns across the focus groups.

The key themes that emerged to inform the root causes include the following:

1) Cultural Dissonance, Bias, Teacher Expectations and Misconceptions

2) Inconsistent Implementation of District wide Discipline Practices

3) Limited Targeted General Education Interventions for African American Students

4) Lack of Meaningful Engagement with African American Students and Families

5) Absence of Culturally Relevant Assessment and Interventions

6) Inconsistent Staff Instructional Capacity and High Teacher Turnover

7) Curriculum and Instruction

8) Underutilization of Section 504

The following are some notable quotes for each theme:

Cultural Dissonance, Bias, Teacher Expectations and Misconception

"Almost all of the issues can be traced back to implicit bias."

"Adultification of Black and Brown boys. Some teachers view them as "more aggressive."

"The causes are things we know. It's racism and we as teachers are perpetuating it like in society."

"Too much focus on 'controlling Black bodies'!"

"There is a belief and a way of thinking about Blacks as aggressive and scary and this collective belief is being perpetuated through time."

"You can hear the teachers say, " I am concerned, I am out of ideas and I did my best." And now it is time for COST."

"Teachers may not understand cultural background."

"Veteran teachers are stuck in their ways."

"[It's a] matter of mindset, as much as [it is a matter of] resources."
"[Perception is that] there is something wrong with you [black students], it is all [their] fault. We look at the behavior of African American students as criminal."

"Pathologizing behavior in an attempt to do something that is not in the child's best interest"

"[There's a] degree of benevolence." [Staff are] Not thinking about the harm that [an] Emotional Disturbance label can cause, particularly with Black/African American boys and girls."

"When the kids are being funneled through special education, teachers do not think of the inherent harm they are doing to the child."

"There is a clear lack of tiered interventions that mesh with implicit bias and this leads to differential access to resources across sites."

"Special education is a place for a child to go. Now they don't have to deal with them."

"Educators have predisposed notions about what students can do."

"Special Day Classes aren't seen as for higher income students. They are seen as a program to place students of color, so they aren't seen."

Inconsistent Implementation of District wide Discipline Practices

"Discipline records of the students color the lenses of the next teacher that gets the student. The kid never gets a fresh start at the beginning of the next school year. [They] Just look at the paperwork. The teacher has a vision of the student before she even meets the kid."

"Schools are referring for behavior, not really academics for Black students."

"Use of suspensions to support SPED referrals."

"If a principal wants to expel, then questions about interventions may come up."

"[OUSD has a] Reactive [approach], not proactive."

"Documentation not being done with fidelity (if student sent home for discipline, it may be documented as absent)"

"Teachers don't have support, which could lead to students being suspended."

Limited Targeted General Education Interventions for African American Students

"Target Strategies or Black/African American students are necessary and not sufficient."

"Lacking Tier 2 support: "A lot of these things haven't been systematized!"

"There are clearly denied levels of support teacher."

"There's no target intervention for Black students."

"Mental Health Services = Special Education. Special education can't be the only game in town!"

"There is a big need to invest in RtI. We have a cookie-cutter approach."

"We don't invest in prevention [academic and behavior] in OUSD."

Lack of Meaningful Engagement with African American Students and Families

"OUSD culture hasn't supported or embedded the expectation that educators/staff build trusting relationships with Black families that have a foundation of respect, value and empowerment."

"Research on disproportionality in special education reveals the race and class of students with disabilities and their parents affect how practitioners interact with them and the quality of services and education they receive (Harry, Allen, & McLaughlin, 1995)."

"The transition from middle to high school is not well addressed and parents are not informed of what it all means for their students who are on a different track."

"The African American kid feels like my school doesn't want me there. The families feel like that don't belong in the district."

"Teachers must want to communicate with students and families."

"Lack of positive parent engagement with African American families is a huge barrier. Often the first time they speak to the teacher or the school is when they get the negative phone call home. This is time consuming and not productive."
"Parents don't trust us!"

"Many of the families do not have good experience with the school system."

"OUSD needs to address community relations; bridge a gap between parents."

Absence of Culturally Relevant Assessment and Interventions Inconsistent Staff

"In meetings, I have seen teachers grasping at the straws to get the kid to qualify. Let's look at this, how about this, will this qualify the kid? The attitude and demand is one of "get them out of class!"

"Majority of educators and assessors are White; there is a bias of testers."

"There is no template for reports (ERMHS) and emotional disturbance (ED) assessment. No cultural or environmental factors included in template."

"Students aren't given time to respond to interventions. [Staff] don't give them a chance. 6-8 weeks is the duration that interventions should be tracked."

"There are 'racially biased tests in Speech."

"A comprehensive evaluation
Is difficult when there is not enough time to look at every area. Only when I have taken the time to build rapport with a student and thoroughly interview parents to get a full background."

"[It] Starts with the referral process: Black students [are] referred first [and not given intervention] because of initial perceptions of students."

"Data [is] not being tracked in a systematic way. Staff are not tracking interventions they say are implemented"

"It is easy to refer a kid to SPED. It is easy to suspend a kid. As Admin, I have been there. I saw myself getting caught in the trap and I had to stop and try a different approach. I had to change."

"New teachers, younger teachers with the least amount of experience, project their fear onto the child, especially the bigger kids."

"SPED is often the only tree to bark up. It is the only mandated program at every site, so you know it will always be there."

"OUSD has a diagnostic team that does all initial assessments. They are all White."

"There is a social agreement that penalizes the kid. The Psych report and the teacher report can get you an easy Emotional Disturbance label. The ED label gets you the social worker and the therapist."

"It's like I'm the mailman to put the stamp on the referral!"

Psychologists are under pressure to find students eligible to remove students under ED out of class or school.

"You should rely on yourself more than the assessment."

"The CELF 4 uses IQ tests scores. Grammar portion of the tests make them invalid because they are based on Standard English."

"Take a closer look at the trend of psychologists that keep labeling kids."

"Behavior is a problem: What is normal behavior? What are the expectations for behavior with Black kids?"

"Inequitable access to resources - not enough early academic interventions."

"They will put them in Intellectual disability [ID] and not Autism [ASD]!!"

"Students are missing early interventions [which is key for Autism]."

"COST team
Has been difficult to ask staff to keep track of interventions (write things down about what they have done)."

"Starts with the referral process: Black students referred first [not given intervention] because of initial perceptions of students."

"Lots of COST referrals but not a ton of services in the district, not a ton of quality markers that are reproducible across the sites."

"COST is a good place for OUSD to do an audit!"

"Nothing to mitigate racist, discussion and process. Need to do an audit of what is the experience of going through the COST process. Who is the teacher? What is the students experience? Who are the leaders? Parents?"

Instructional Capacity and High Teacher Turnover

"When talking about equity, we must talk about staffing. Under-qualified staff get moved to under-performing schools; the most qualified should be at the sites with the most need."

"District has taken its eye off A-G preparation. Poor instruction is happening along with the high teacher turnover."

"There is high teacher turnover and burnout."

"The classroom is a White space and teaching staff is getting Whiter. White experience approach to things instead of saying "I will meet you (the student) where you are."
"Really high turnover. New teachers come to Oakland to get the training and they leave. They do not have the necessary classroom behavior management skills."

"It is appalling that special education teachers come into the district without credentials, no mentoring, no coaching and no supervision. There is a revolving door of turnover in special."
"We are not explicitly taught how to build relationships."

"As a teacher I have never received any training on how to become a cultural builder, how to check my own biases and how to unpack them. To really listen and engage in self-reflection about what we do."

Curriculum and Instruction

"The reason we qualify kids is because we are not teaching kids how to read. Then they feel dumb and the cumulative behaviors start to add up to a suspension. In trying to be compassionate they get referred to SPED."

"Ripple effect of not being able to read. Not a lot of options. Students struggle and the gap widens This is the culture and the norm in the district."
"We had a reading clinic but you had to be in special education in order to get the services. We know the tools are there. A few schools receive district services but most rely on site based resources."
"Oakland tends to lag behind in academics."

"Lack of interesting curriculum to keep students engaged - it needs improvement; It helps to build rapport with students."

"Not focusing on SEL, became more focused on test scores."

"Hard for kids to pay attention anyway especially if not interested in what's being learned."

"General education and special education teachers don't get to talk (collaborate)." "There's a lot of separation!"

"Lack of differentiation in teaching is at the root of the problem. Teachers are not taught to teach at three different levels."

"Hill schools get access to reading interventions. Flatland schools get access through special education. You should not have to qualify for special education in order to get reading interventions."

Underutilization of Section 504

"*African American/Black students are not given access to Section 504 Plans, which would keep them supported in general education. These are reserved for white and Asian American students."*

"The result is a thrust into Special Education for any interventions (supports)."

"People are not suggesting Section 504 to African American parents. When it comes to Black kids, the schools are implementing IEP's while Section 504 is being offered to more White families then African American families."

"Section 504, interventions are proposed but not followed up on."

"Section 504 should be addressed for Other Health Impairments."

Results from the focus groups and root cause analysis from the qualitative data was presented to the Leadership Team on November 24, 2020 and to the Stakeholder Group on November 30, 2020.
Root Cause Presentation

2.3 Complete Reflective Data Analysis

Describe the processes used to collect, analyze, and interpret data. Include data sources. Note: The description of findings from this analysis should validate the selected: root causes; measurable outcomes and related activities; target populations; and policies, practices and procedures that are reviewed and revised.

Oakland Unified School District (OUSD) serves many students and families from many backgrounds which makes us a vibrant and lively city and school district. OUSD is a medium-sized TK-12 school district serving approximately 35,239 students who are culturally and linguistically diverse. OUSD consists of 47 elementary schools, 5 K-8 schools, 11 middle schools serving grades 6-8, 19 high schools, 7 of which are alternative education (continuation school, community day school and an independent study school) and 3 that serve grades 6-12. In addition, the District has an extensive child development and preschool program at 17 sites and adult school education which serves 700 adults.

The quantitative data below regarding absenteeism, literacy, math (State and Local Assessments), suspension rates, and positive school culture engagement data will validate the anecdotal data that was

collected in focus groups and our stakeholder meetings. As we focus on our root causes, it is clear that five areas will drive the work of this plan and support our District to implement thoughtful practices that will result in more equitable outcomes for our African American students.

Our student population is: 22% African-American, 1% American Indian, 12% Asian, .7% Filipino, 44.3% Latino, 1% Pacific Islander, 11.2% White and 6% two or more races. Additionally, 29.3% of our students are English Language Learners, 77% are on the Free or reduced lunch program, 14.6 % Special Education, 2% Unhoused, and 0.5% are Foster youth.

This school year, 2020-2021, there are 6,300 students in special education, along with almost 600 students who are awaiting initial evaluation to determine their eligibility (an increase of over 300 students when compared to levels of pending students 2015-2019) due to the interruptions in assessment caused by the COVID-19 pandemic and consequent closure of school campuses.

There are six goals within our Local Control Accountability Plan(LCAP) and supporting actions and services. Oakland Unified School District's goals are as follows:

GOAL 1: GRADUATES ARE COLLEGE AND CAREER READY

GOAL 2: STUDENTS ARE PROFICIENT IN STATE ACADEMIC STANDARDS

GOAL 3: STUDENTS ARE READING AT OR ABOVE GRADE LEVEL

GOAL 4: ELLS ARE REACHING LANGUAGE FLUENCY

GOAL 5: STUDENTS ARE ENGAGED IN SCHOOL EVERY DAY

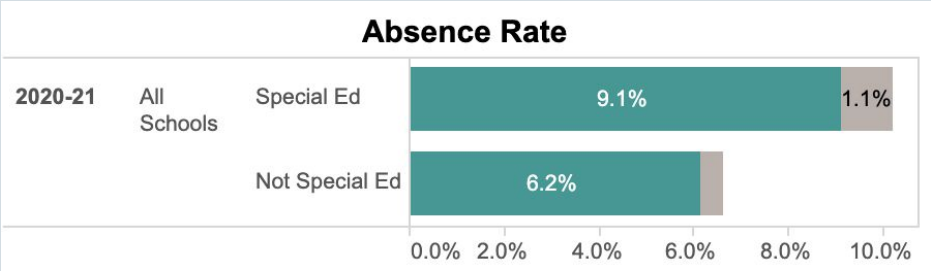
GOAL 6: PARENTS & FAMILIES ARE ENGAGED IN SCHOOL ACTIVITIES

Oakland Unified School District believes in sharing quality data with staff members and community. The Research, Assessment, and Data (RAD) Department produces many comprehensive and valuable data dashboards that are available to staff and community at https://ousddata.org. We used the data sets below to examine our practices with our stakeholders. In our stakeholder meetings, the reflection tools sparked valuable and reflective conversations and created a snow-balll effect, or the examination of one data set prompted questions that the group wanted to dive deeper into. The OUSD Data Dashboards allowed us to access data and request additional ways of looking at our data as a result of our milestone tasks. The data sets referenced below supported us to narrow-in on our identified target population. The data sets we examined were:

- General Demographic Information district-wide;
- Indicator 10 influenced data about African American students in OUSD;
- Attendance data district-wide and by race;
- Literacy data, disaggregated by race, by school;
- Mathematics data district-wide and disaggregated by race, by school;
- Referrals for Special Education assessment district-wide and by school, disaggregated by race and eligibility status after the convening of an initial IEP;
- File Reviews- highlighted speech and language screening;
- Suspensions of African American Students with IEPs district-wide and by school, disaggregated by gender, and compared to suspension data from other racial/ethnic groups;
- Student referral district-wide and data by school, by offense, by race and gender;
- Inventories highlighting qualitative data- Initiatives, Self Reflection (Section 2.1);
- Analysis of trends from focus groups with diverse stakeholders, including teachers, district leaders, families, students, and central office staff (Section 2.2).

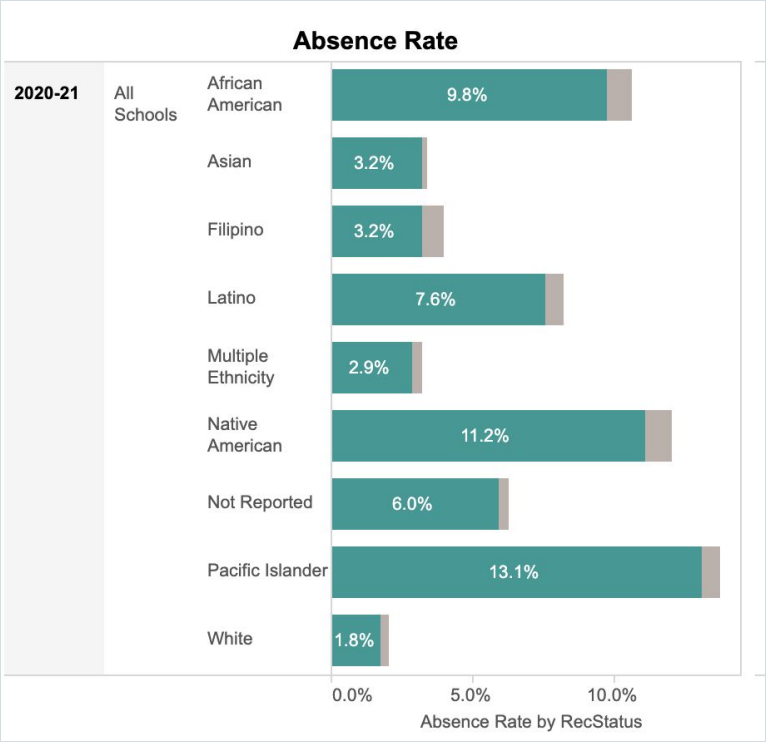
The following data aim to demonstrate our outcomes for African American students as compared to their peers. Taken altogether, African American students perform at lower rates academically, attend school at lower rates than their peers and are disciplined and referred to special education at higher rates. Consequently, African American Students were less likely to participate in the 504 Plan process to access additional resources prior to special education assessment and resources.

Attendance



For the 20-21 school year, compared to students without IEPS, students with disabilities are more likely to be absent or not engaging in school as defined by participating in a virtual learning session, submitting an assignment, or connecting directly with their teacher via email/school communication tools. (9.1 v 6.2%)

Absence Rate by Race for Students with Disabilities



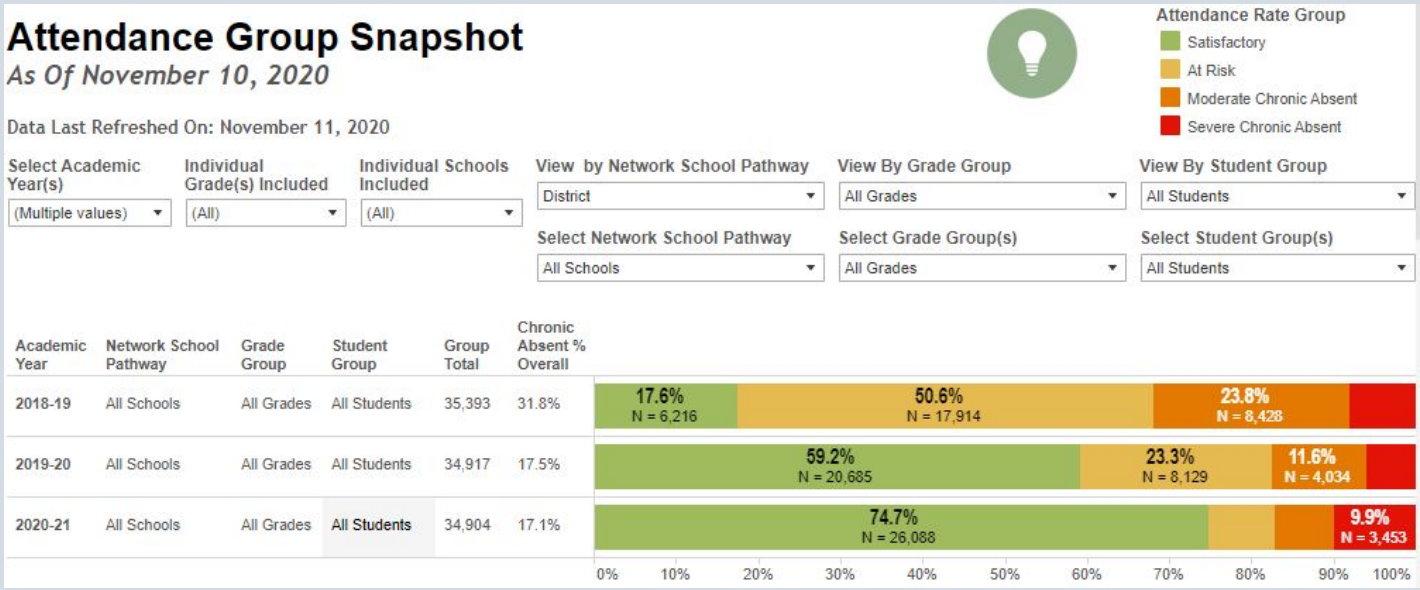
For Oakland students with disabilities African American, Native American and Pacific Islanders are most likely to be absent compared with other ethnic groups. 9.8% of African American students with disabilities have been absent this academic year.

Chronic Absenteeism

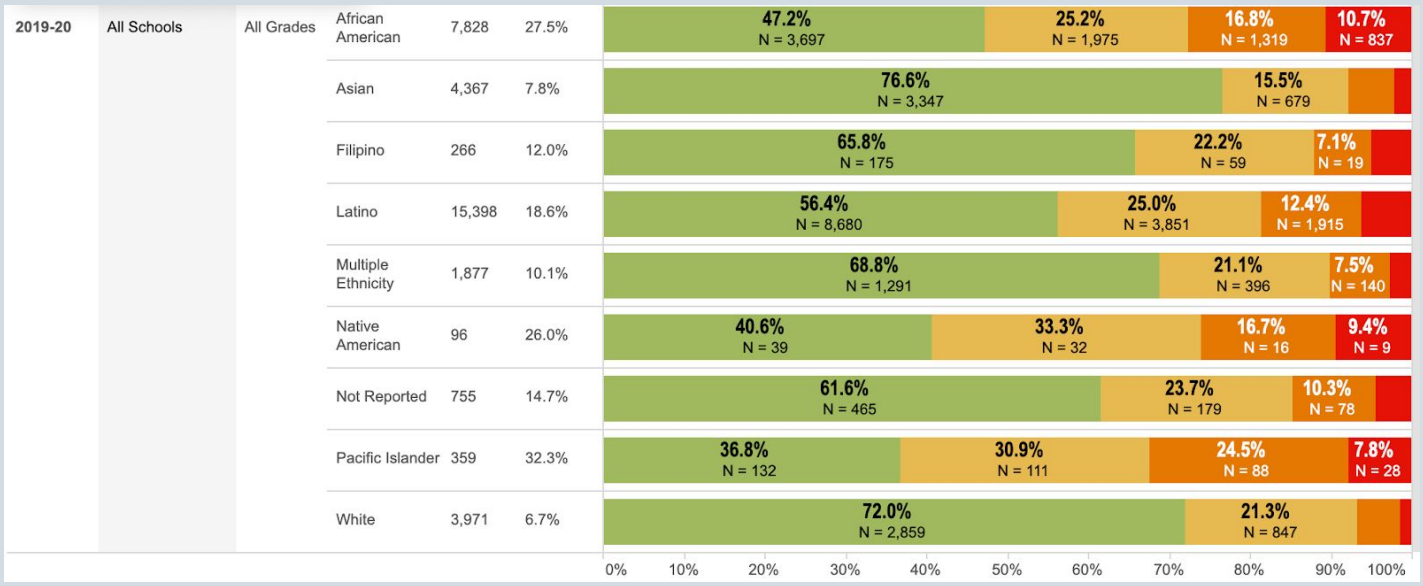
In OUSD, we monitor the Chronic Absenteeism rate to ensure that our students are attending school regularly. We consider a student to have a high chronic absenteeism rate if a student has missed 10% or more of the school year. Below is a snapshot of our Chronic Absenteeism rates since 2018. It is important to note that in the Spring 2019, there was a strike initiated by our teachers union that resulted in a higher absenteeism rate for students due to the strike. Leading up to the strike, students at the secondary level participated in teacher-led actions resulting in lower attendance rates and the strike itself lasted 7 days.

Although the strike lasted 7 days, analysis of attendance after the strike was over showed that our community continued to attend school at lower rates than in previous years.

Additionally, our attendance rate was less accurate from March 2019 to June 2019 due to school closures as a result of COVID-19.



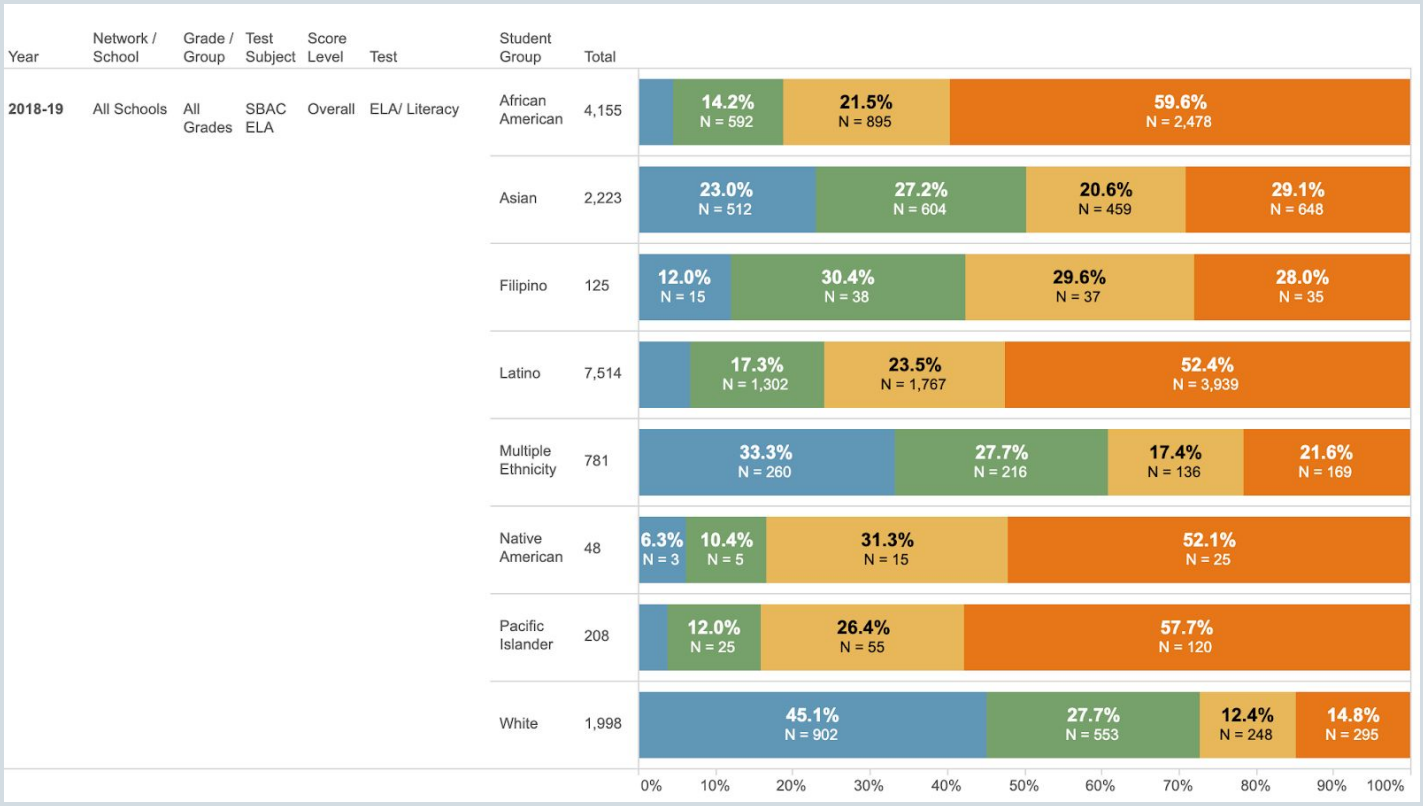
Chronic Absenteeism by Race - focus on African American students



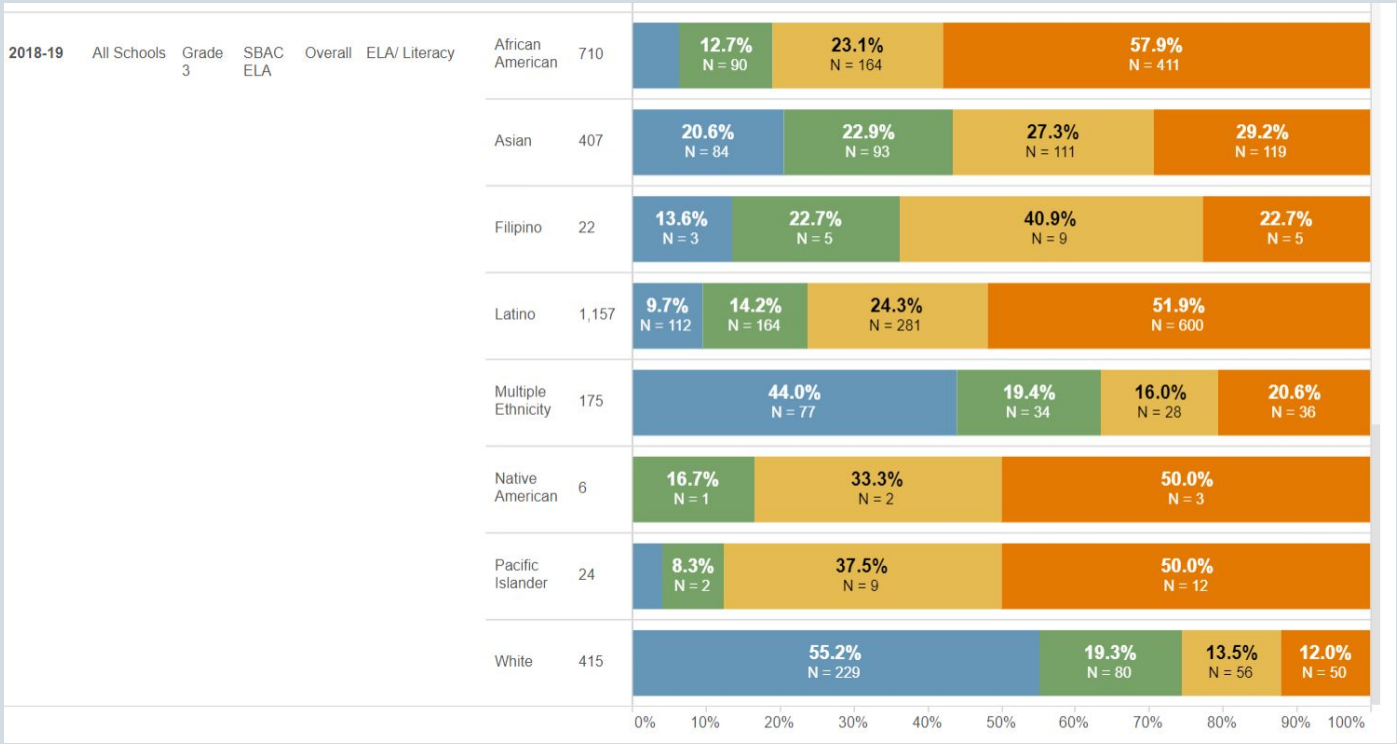
Oakland uses chronic absence rates - defined as missing 10% or more of school for any reason) to gauge engagement in school and learning. Pacific Islander (63%), Native American (60%) and African American (53%) students have the highest chronic absence over the last three years. In contrast Asian American and White students are most likely to have satisfactory attendance.

Literacy/English Language Arts

SBAC 3-8, 11: ELA Performance by Ethnicity (2018-19) - Exceeding, Meeting, Near, and Below Standard

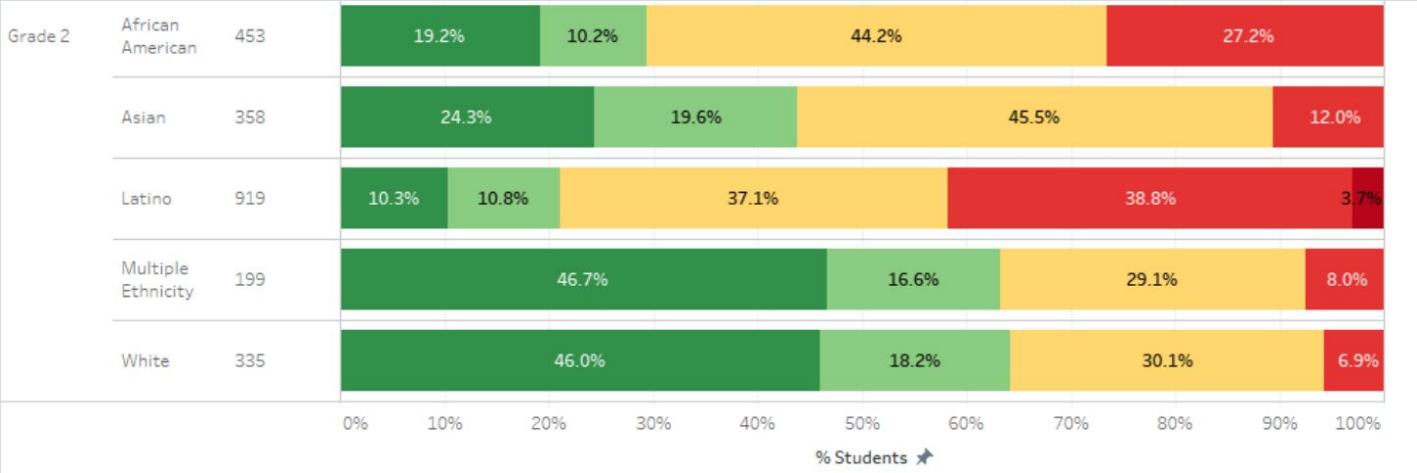


SBAC Grade 3: ELA Performance by Ethnicity (2018-19) - Exceeding, Meeting, Near, and Below Standard



Grade 1 i-Ready Reading by Ethnicity (2020-21)

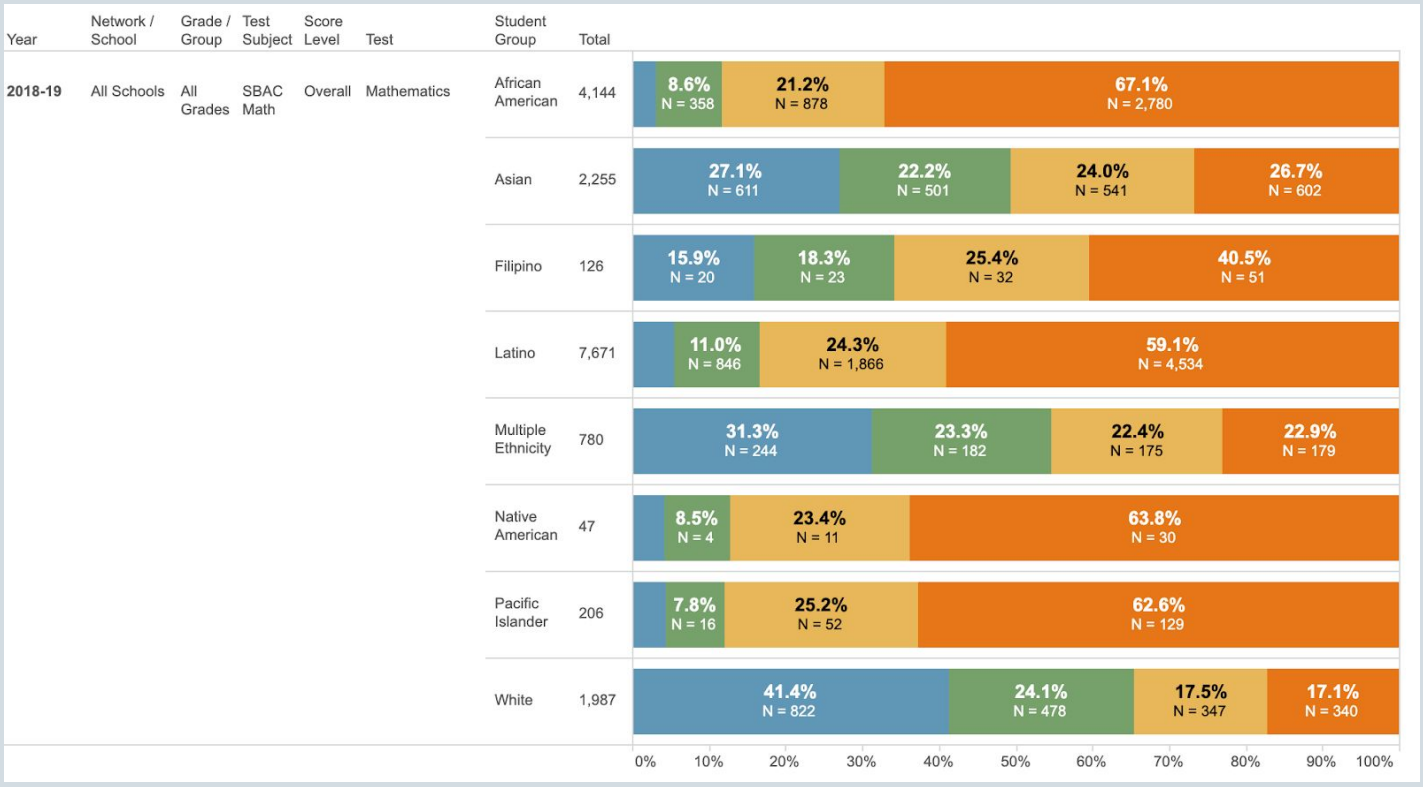
Grade 2 i-Ready Reading by Ethnicity (2020-21)



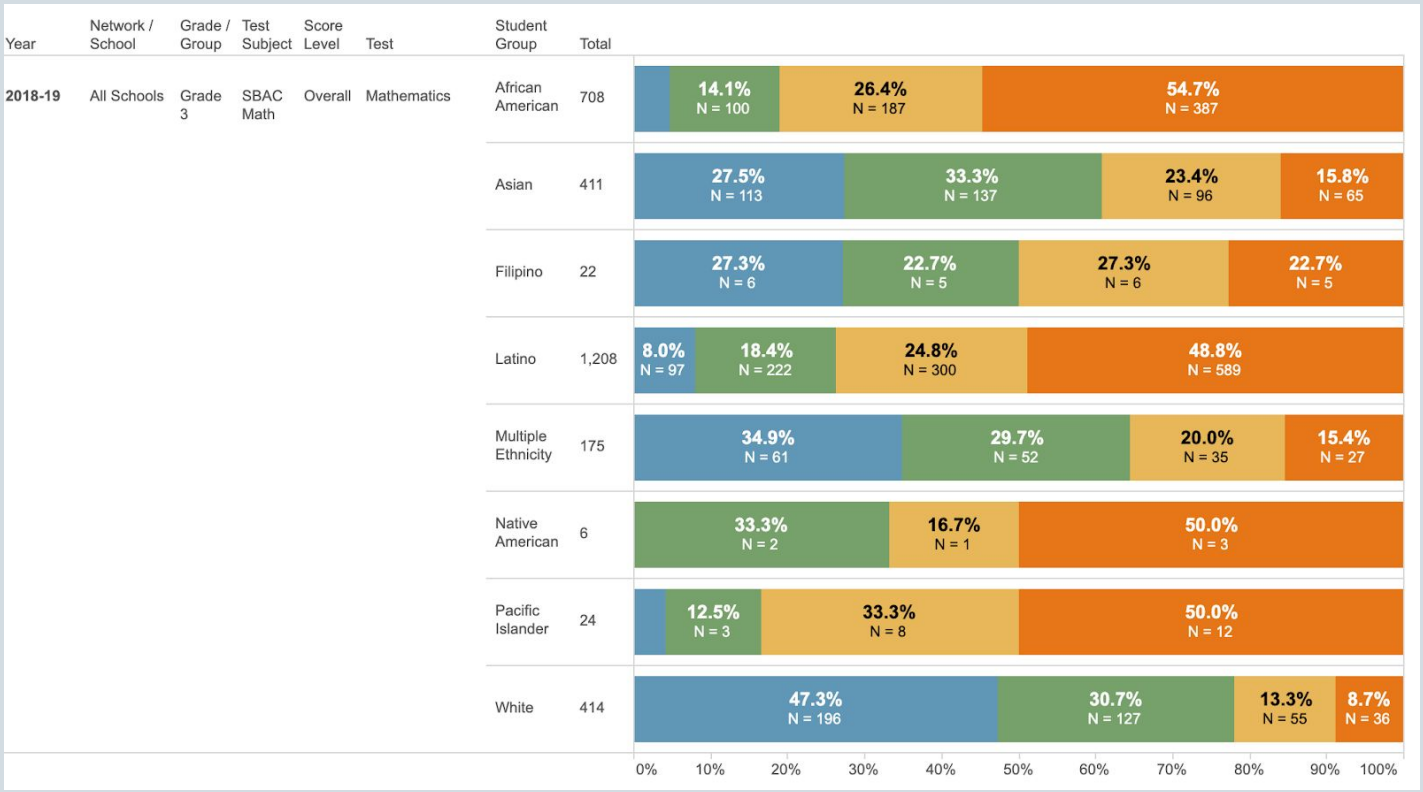
We completed file reviews, including an educational benefit analysis, for a group of African American students eligible under Emotional Disturbance or suspended often, which revealed that 70% of students had reading concerns at the time of their initial referral for evaluation, in addition to behavioral and social emotional challenges (e.g. 100% had experienced trauma). Analysis of 2018-19 SBAC English language arts data show large equity gaps between the performance of African American students (in addition to Latino, Native American, and Pacific Islander students) and other groups (White, Asian, Multiple ethnicity). These gaps are formed in the earliest years as evidenced 1st and 2nd grade reading data from the first administration of the i-Ready as a universal screener in 2020-21 and increase over time. Insufficient curriculum, assessment and professional development for PK-2 teachers have contributed to inconsistent implementation of tier 1 practices and lack of coordinated MTSS have meant that many students have not received necessary supports to learn to read and write proficiently before state testing begins in 3rd grade. It is our belief that lack of literacy skills have hampered the development of academic identity and engagement for many of our students who have been referred to Special Education.

MATH

SBAC 3-8, 11: Math Performance by Ethnicity



SBAC 3-8, 11: Math Performance by Ethnicity



Similar to literacy/ELA, inconsistent instruction and insufficient targeted supports have contributed to significant achievement gaps for African American students in Mathematics. Therefore it is our belief that improving math teaching and learning through culturally responsive practices will increase engagement and reduce referrals to special education.

Special Education Services

Referrals for Special Education Services

Almost 870 students became eligible for Special Education between the onset of the 2019-20 school year and November 1, 2020. Oakland Unified School District's overall eligibility rate for initials is approximately 79%. The Special Education Department tracks initial referrals by several demographic and outcome factors, including race/ethnicity, grade level, eligibility status, gender, and placement (if eligible).

Referrals by School Site

As mentioned above, the Special Education Department monitors the referrals for Special Education evaluation across each of our public school sites, as well as our preschool diagnostic center and charter schools within our SELPA. Over the course of the 2019-20 school year, the sites with the highest numbers of completed initial referrals are indicated in the table below.

School	Enrollment	Total Initials
BELLA VISTA ELEMENTARY SCHOOL	467	19
BRIDGES ACADEMY	434	9
EAST OAKLAND PRIDE ELEMENTARY SCHOOL	344	9
EMERSON ELEMENTARY SCHOOL	321	7
ESPERANZA	369	15
FUTURES ELEMENTARY SCHOOL	333	9
GLOBAL FAMILY SCHOOL	448	10
INTERNATIONAL COMMUNITY ELEMENTARY SCHOOL	283	13
JOAQUIN MILLER ELEMENTARY SCHOOL	435	7
LAUREL ELEMENTARY SCHOOL	484	9
LINCOLN ELEMENTARY SCHOOL	732	10
MADISON PARK ACADEMY SECONDARY	732	13
NEW HIGHLAND ACADEMY	349	13
REDWOOD HEIGHTS ELEMENTARY SCHOOL	360	16
THORNHILL ELEMENTARY SCHOOL	403	8

File Review Findings

At the commencement of our data dive into Indicator 10, we conducted a file review of 16 students that are from our target population or African American and hold an Individualized Education Program (IEP) for Emotional Disturbance/ Other Health Impaired. The file review included all IEPs from initial eligibility and any data around pre-referral intervention and family context. Each team member presented two cases to the group over 4 consecutive meetings. After all cases were presented, the analysis was summarized revealing a few patterns:

Communication Delays

Files showed early concerns with communication that manifested as behavioral challenges over time.

Movement between Schools

It is common for students in our mental health programs to move between schools or programs every year or two years.

Exposure to Trauma

Many students were exposed to trauma throughout their childhood.

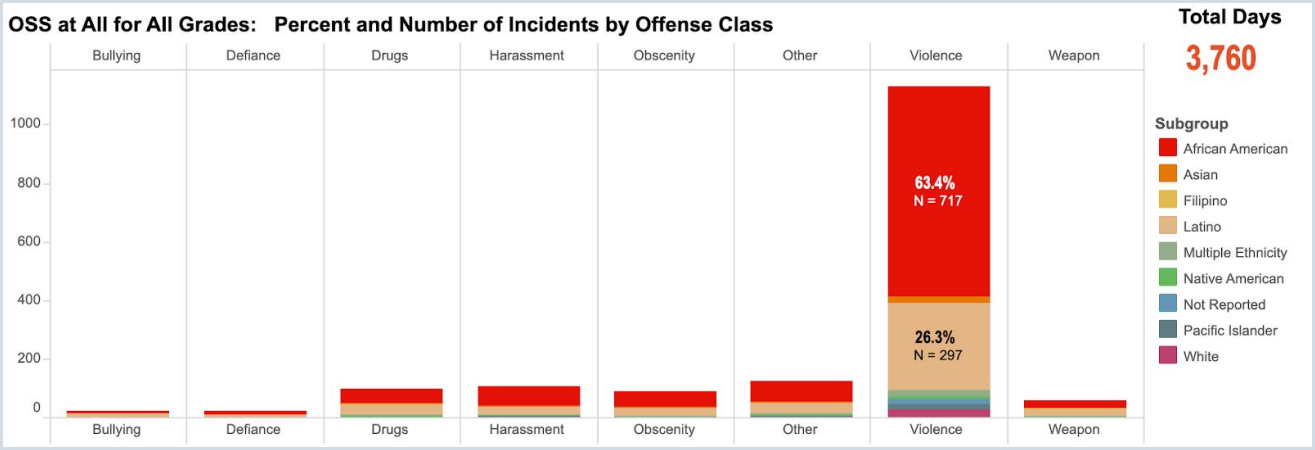
Lack of Academic Progress

While many students entered special education close to or at grade level, most students stagnated or regressed after placement into a self-contained CEC.

Suspensions & Referrals

OUSD has focused over the last several years on reducing our suspensions and discipline referrals for all students with a particular focus on reducing disproportionate referrals for African American students. Despite that focus OUSD continues to disproportionately suspend students with IEPS and who are African American.

District-wide



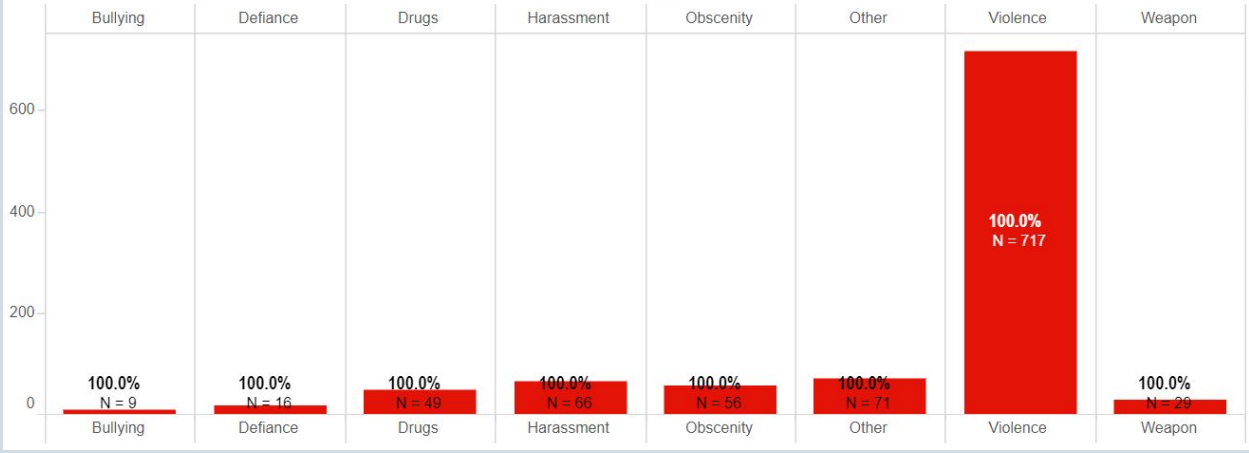
African American specific

OSS at All for All Grades: Percent and Number of Incidents by 'Ethnicity' Subgroup

African American	Grand Total
1,013	1,013
100.0%	100.0%

1,013

OSS at All for All Grades: Percent and Number of Incidents by Offense Class



Total Days

2,344

Subgroup

African American

AA w/IEPs

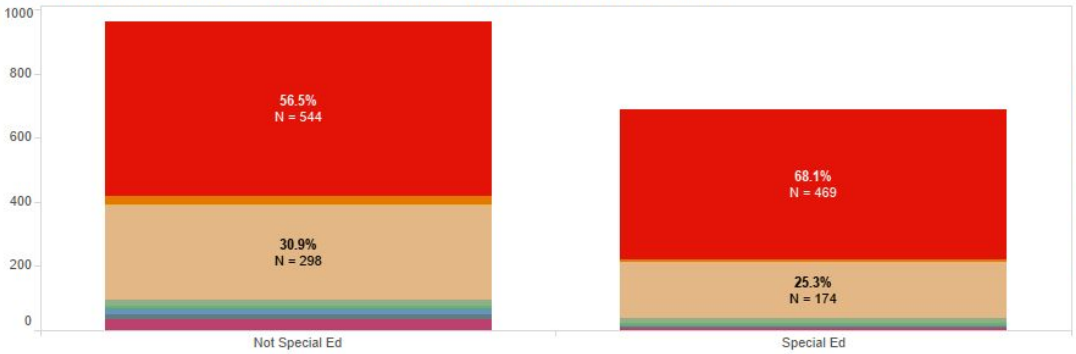
OSS at All for All Grades: Percent and Number of Incidents by 'Ethnicity' Subgroup

Special Ed S..	African Ame..	Asian	Filipino	Latino	Multiple Eth..	Native Amer..	Not Reported	Pacific Islan..	White	Grand Total
Not Special Ed	544	26	1	298	18	6	19	18	33	963
	56.5%	2.7%	0.1%	30.9%	1.9%	0.6%	2.0%	1.9%	3.4%	100.0%
Special Ed	469	8		174	14	8	3	2	11	689
	68.1%	1.2%		25.3%	2.0%	1.2%	0.4%	0.3%	1.6%	100.0%

Total # of Incidents

1,652

OSS at All for All Grades: Percent and Number of Incidents by Offense Class



Total Days

3,760

Subgroup

- African American
- Asian
- Filipino
- Latino
- Multiple Ethnicity
- Native American
- Not Reported
- Pacific Islander
- White

Data demonstrate that there are far more suspensions for violence than any other category for all subgroups. Across all classes of suspension, Black/AA students are most likely to be suspended, followed by Latino/a/x. Although African American students only make up 22% of the total district enrollment, they make up 63% of suspensions for violence and 57% of suspensions overall. Our elementary suspension data indicate that of the suspensions for violence Tk-5 72% of the students suspended were African American.

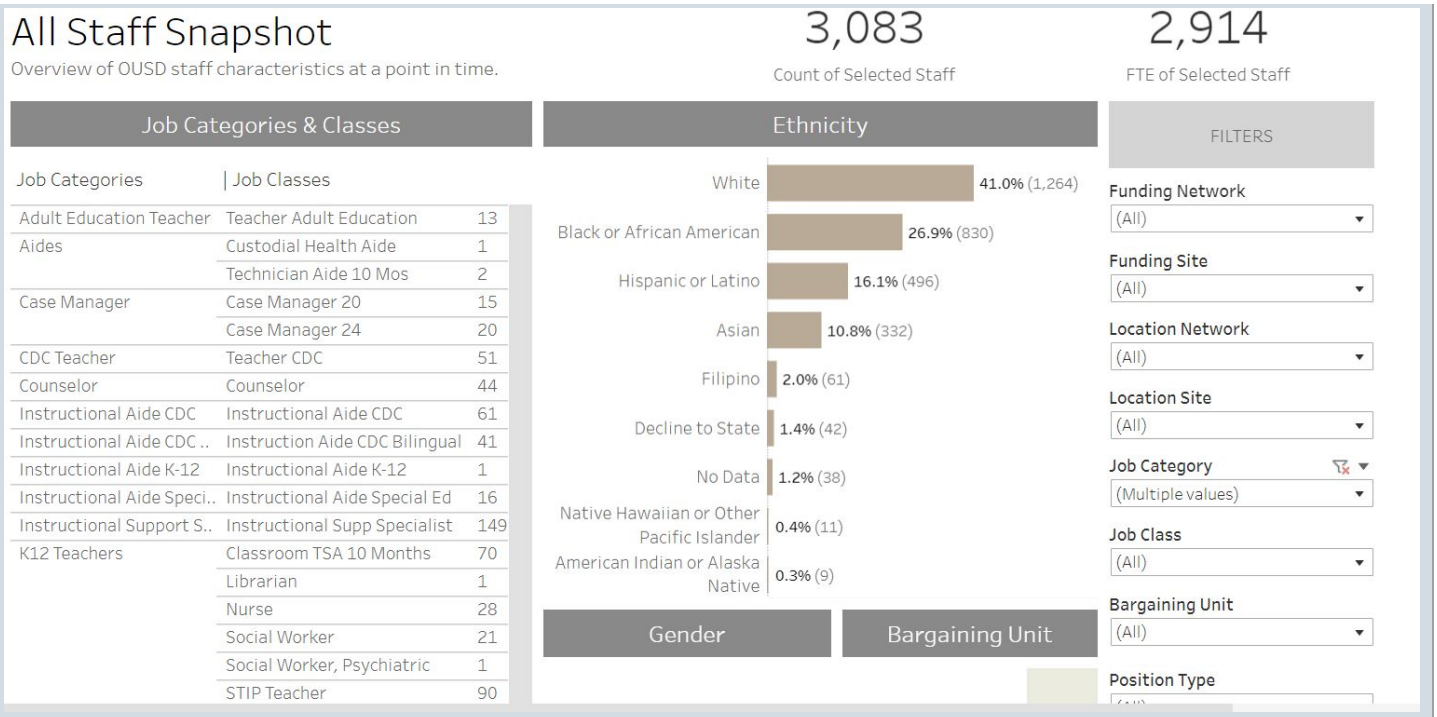
Family Partnership

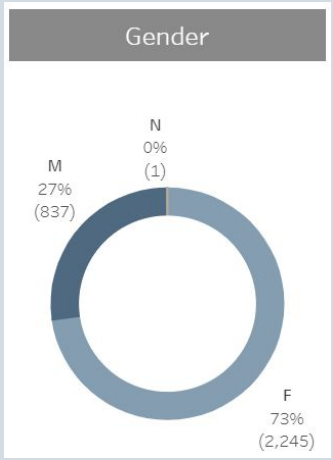
CHKS 2019-20 data snapshot of our parent survey shows overall, most families feel connected to their child's school: 80% or more families feel welcomed to participate at their child's school, feel their concerns are taken seriously, feel their child's ethnicity is valued, and feel treated with respect. When we disaggregate

responses by ethnicity, African American families feel slightly less strongly across all connectedness indicators, especially in 11th grade where 36.5% strongly agree they feel welcomed to participate at their child's school, compared to 46.5% in 1st grade.

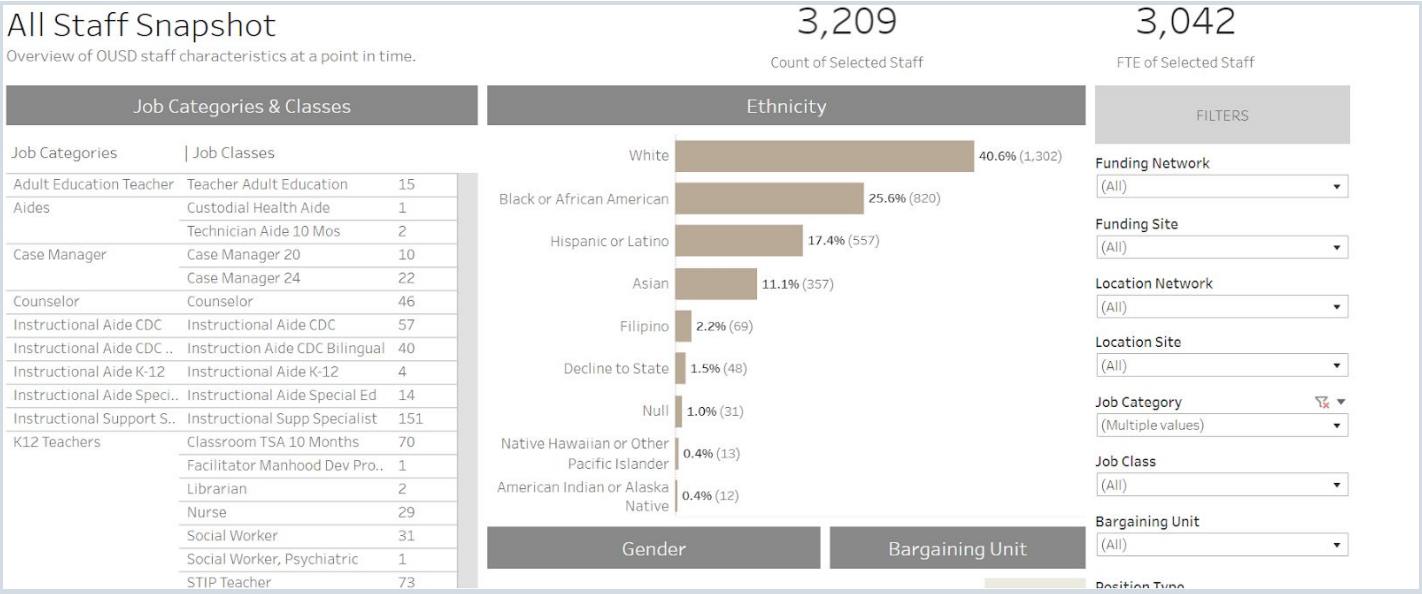
Staffing

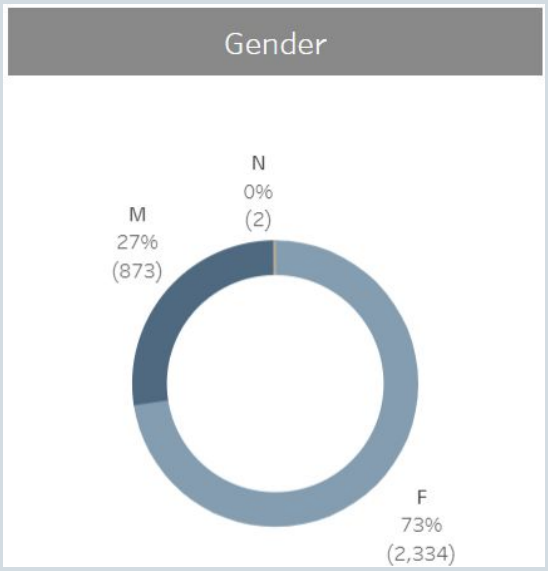
2019-2020 Staffing Data





2020-2021 Staffing Data





2018-2019 data: There are 3209 education category positions this academic year of which 312 were new hires or 10% turnover rate.In 2018-2019, there were 406 Special Education Teachers and 85 (or 21%) did not return in 2019-2020.

2019-2020 data: 3083 total staff of which 392 were new hires, or 13% turnover rate. This rate includes the various staff that interact with students, including paraprofessionals and instructional support specialists. In 2019-2020, there were 430 Special Education Teachers and 75 (or 17%) did not return in 2020-2021.

Staff retention is currently being addressed in the 2020-2021 Superintendent's Work Plan.

504 Plan Data

In the 2020-2021 school year there are a total of 1048 students with an active 504 plan; of those students:

- 72% non Hispanic/Latino;

- 27% Hispanic/Latino;

-31% African American - There are a total of 327 African American students with a 504 plan (elementary 10% secondary 21%)

- 68% of students with a 504 plan are in the secondary population; most 504 referrals are related to academic concerns (~40%).

In the 2019-2020 school year there were a total of 768 students with an active 504 plan; of those students:

- 74% non Hispanic/Latino;

- 25% Hispanic/Latino;

-30% African American - There are a total of 231 African American students with a 504 plan (elementary 10% secondary 20%)

- 67% of students with a 504 plan are in the secondary population; most 504 referrals are related to academic concerns (~43%).

2.4 Determine Root Cause(s) Based on Data

Provide the identified Root Cause of disproportionality and describe the Root Cause (including supporting data).

Root causes of disproportionality include an intersection between beliefs and practices.

Root Cause	Description of Root Cause with Supporting Data
1) **Cultural Dissonance, Bias, Teacher Expectations and Misconception**: Lack of Job Embedded Anti-Racist Training	Equity is named as an element in our teacher and leader evaluation system, yet there is a lack of embedded equity learning within existing professional development structures, to guide anti-racist leadership, culturally relevant pedagogy, and instructional asset based practices. This root cause is also reflected in our suspension data. Across all classes of suspension, Black/AA students are most likely to be suspended, followed by Latino/a/x. Although African American students only make up 22% of the total district enrollment, they make up 63% of suspensions for violence and 57% of suspensions overall. Our elementary suspension data indicate that of the suspensions for violence Tk-5 72% of the students suspended were African American. *Notable Quotes:* ● *"Almost all of the issues can be traced back to implicit bias."*

	• *"Adultification of Black and Brown boys. Some teachers view them as "more aggressive."* • *"The causes are things we know. It's racism and we as teachers are perpetuating it like in society."* • *"Too much focus on 'controlling Black bodies'!"* • *"There is a belief and a way of thinking about Blacks as aggressive and scary and this collective belief is being perpetuated through time."* • *"You can hear the teachers say, " I am concerned, I am out of ideas and I did my best." And now it is time for COST."* • *"Teachers may not understand cultural background."* • *"Veteran teachers are stuck in their ways."* • *"[It's a] matter of mindset, as much as [it is a matter of] resources."* • *"[Perception is that] there is something wrong with you [black students], it is all [their] fault. We look at the behavior of African American students as criminal."* • *"Pathologizing behavior in an attempt to do something that is not in the child's best interest"* • *"[There's a] degree of benevolence." [Staff are] Not thinking about the harm that [an] Emotional Disturbance label can cause, particularly with Black/African American boys and girls."* • *"When the kids are being funneled through special education, teachers do not think of the inherent harm they are doing to the child."* • *"There is a clear lack of tiered interventions that mesh with implicit bias and this leads to differential access to resources across sites."* • *"Special education is a place for a child to go. Now they don't have to deal with them."*

	• *"Educators have predisposed notions about what students can do."* • *"Special Day Classes aren't seen as for higher income students. They are seen as a program to place students of color, so they aren't seen."*
2) Inconsistent Implementation of District wide Discipline Practices: Lack of consistent implementation of positive classroom routines including pre-referral strategies, discipline procedures and practices.	100% of students dealing with trauma and 50% experience with the justice system; Lack of clear strategies to build positive classroom and school culture resulting in increased referrals and suspensions. Lack of consistent support for teachers and schools on the impact of trauma on student learning. OUSD has focused over the last several years on reducing our suspensions and discipline referrals for all students with a particular focus on reducing disproportionate referrals for African American students. Despite that focus OUSD continues to disproportionately suspend students with IEPS and who are African American. The data referenced above reflects that we discipline African American students at higher rates than their peers, closely followed by our Latino students. Notable Quotes • *"Discipline records of the students color the lenses of the next teacher that gets the student. The kid never gets a fresh start at the beginning of the next school year. [They] Just look at the paperwork. The teacher has a vision of the student before she even meets the kid."* • *"Schools are referring for behavior, not really academics for Black students."* • *"Use of suspensions to support SPED referrals."* • *"If a principal wants to expel, then questions about interventions may come up."* • *"[OUSD has a] Reactive [approach], not proactive."*

	• *"Documentation not being done with fidelity (if student sent home for discipline, it may be documented as absent)"* • *"Teachers don't have support, which could lead to students being suspended."*
3) Limited Targeted General Education Interventions for African American Students: Multi-Tiered System of Support (MTSS)	OUSD has not consistently implemented a comprehensive approach to Multi Tiered System of Support (MTSS) to monitor behavioral and academic progress. There is significant learning that is needed for many stakeholders of our District. Additionally, there is a lack of clarity of Tier 2 and 3 strategies to implement prior to a Special Education referral. Lastly, the underutilization of Section 504 (Root Cause 8) has led to significant increases in referrals to Special Education. The referral data referenced above demonstrates that we have high rates of referrals by particular schools while the use of Section 504 plans was significantly less utilized for African American Students. Notable Quotes • *"Target Strategies or Black/African American students are necessary and not sufficient."* • *"Lacking Tier 2 support: "A lot of these things haven't been systematized!"* • *"There are clearly denied levels of support teachers."* • *"There's no target intervention for Black students."* • *"Mental Health Services = Special Education. Special education can't be the only game in town!"* • *"There is a big need to invest in RtI. We have a cookie-cutter approach."* • *"We don't invest in prevention [academic and behavior] in OUSD."*
4) **Lack of meaningful engagement with African American Students**	While we have adopted family engagement standards, our schools and classrooms do not consistently implement guidance for direct

and families: Lack of Parent-Teacher Academic Partnership with African American Families	parent-teacher academic partnership. 30% of sites have embedded site structures for partnership and shared decision making: weekly parent-teacher communication, relational parent-teacher home visits, classroom workshops for families to support student learning. Our CHKS Data above reflect that our African American Families and students struggle to feel connected to their school sites and attend school wide engagement events at lower frequency. This root cause was most notable during the creation of our CCEIS Plan. We struggled to interact with African American Families as part of our Stakeholder Group on a consistent basis. We attempted to utilize existing meeting structures to ensure that families would feel comfortable participating. While we shared data information about our data collection with an existing parent group and collected feedback on our milestones from the same group, the parent group did not consistently represent African American Families. Additionally, we attempted to form a smaller setting for focus groups twice and did not attract more than one parent from over 30 calls to invite families to participate. Lastly, in one Stakeholder Group where we did have parents from the target group, we received feedback from the parents that attended that they did not feel comfortable interacting and sharing their thoughts in a group setting. They felt unsure of sharing that their child had an IEP for emotional disturbance. This root cause area is a major focus for the work ahead. We value parent voice and are struggling to connect with parents, especially with families when their student needs more support. This topic became a discussion after we struggled with sustaining consistent family participation in our Stakeholder Meetings. The people present identified key next steps (school focus rather than District)

	and those next steps are reflective of the Measurable Outcome that addresses this growth area. **Notable Quotes:** ● *"OUSD culture hasn't supported or embedded the expectation that educators/staff build trusting relationships with Black families that have a foundation of respect, value and empowerment."* ● *"Research on disproportionality in special education reveals the race and class of students with disabilities and their parents affect how practitioners interact with them and the quality of services and education they receive (Harry, Allen, & McLaughlin, 1995)."* ● *"The transition from middle to high school is not well addressed and parents are not informed of what it all means for their students who are on a different track."* ● *"The African American kid feels like my school doesn't want me there. The families feel like that don't belong in the district."* ● *"Teachers must want to communicate with students and families."* ● *"Lack of positive parent engagement with African American families is a huge barrier. Often the first time they speak to the teacher or the school is when they get the negative phone call home. This is time consuming and not productive."* ● *"Parents don't trust us!"* ● *"Many of the families do not have good experience with the school system."* ● *"OUSD needs to address community relations; bridge a gap between parents."*
5) **Absence of Culturally Relevant Assessment and Interventions:** Lack of early screening for African	A file review process yielded data that over 60% of the students selected had early childhood language delays that were reported as a concern from parents/guardians. Despite this, only 10% of

American students in speech and language	students eligible under Emotional Disturbance received speech-language services throughout the 2019-20 school year. Currently, OUSD has no process for screening students for potential language delays in early childhood, TK, and K. Research shows that communication and behavior are closely linked, and anecdotal behavioral data from our early childhood through kindergarten programs indicate that students who cannot communicate their needs and feelings are more likely to engage in externalizing behaviors. The data referenced above reveals how individual schools referred students for special education assessments at higher rates than other schools.
6) Inconsistent Staff Instructional Capacity	Lack of a consistent pedagogical approach to instruction to serve our Diverse Learners. Additionally, as our teaching staff are trained, we have high rates of turn-over. Our rate of teacher turn-over was 13% in 2019-2020 and 10% in 2020-2021. As part of our Superintendent's Work Plan, this area is being addressed and measured through satisfaction surveys and school by school retention rates.
7) **Curriculum and Instruction**: Lack of consistent Early Literacy Practices for African American Students	70% of the file reviews psychological testing indicate concerns in reading for the targeted populations; reading far below grade level that led to referral for special ed; Analysis of 2018-19 SBAC English language arts data show large equity gaps between the performance of African American students (in addition to Latino, Native American, and Pacific Islander students) and other groups (White, Asian, Multiple ethnicity). These gaps are formed in the earliest years as evidenced 1st and 2nd grade reading data from the first administration of the i-Ready as a universal screener in 2020-21 and increase over time. OUSD has lacked a comprehensive screener and interim assessment system grounded in reading research and has had inconsistent implementation of curriculum,

	particularly with foundational literacy skills (phonics, phonemic awareness, and fluency).
8) High number of student absences.	Although this was identified as a root cause, we are currently addressing this area of concern in a few ways. The Superintendent's Work Plan, the LCAP Goal 5 from 2017-2020 and the 2020-2021 LCP all reflect the goal of increasing student engagement. THis goal area is reported on at every School Board Meeting in the Superintendent's Report and we break down this data by multiple groups that represent our District. This root cause will not be a notable Measurable Outcome in the Action Plan due to this area being a goal in the mentioned plans.

Phase 3

3.1 Complete Review of Policies, Practices, and Procedures

Guidance: (Upon identification of significant disproportionality, an LEA must) Provide for the annual review and, if appropriate, revision of the policies, practices, and procedures used in identification or placement in particular education settings, including disciplinary removals (to ensure compliance.) 34 *CFR* Section 300.646

Has your LEA completed a review of the related policies, practices, and procedures? Yes or No.

Yes

Has your LEA revised the reviewed policies, practices, or procedures? Yes or No.

No

If any policies, practices, and/or procedures have been revised, document revisions and describe how revisions will be shared (e.g., School Board meeting minutes, posting on LEA website).

Plans to update over 10 policies reviewed during this process are being implemented according to our Board Meeting timelines and processes beginning in January 2021. It is important to note that we are involved in a number of important plans being devised and implemented. We have our Safety Plan which is our approach to decreasing the policing of our students in OUSD schools in order to create positive school and classroom cultures. We are also participating in the FPM process, which has also highlighted the need to review and revise key District policies. As a result of preparing our improvement plans, we have found significant overlap in the policies needing revising, especially through our qualitative and quantitative data reviews. The need to revise key District policies has created a high level of synergy within District Departments with a focus on improving the support to schools through an interconnected approach.

Additionally, our District is also undergoing a Systemic Instructional Review conducted by the California Collaborative for an Excellent Education (CCEE) scheduled to be complete by the commencement of January 2021. Please see OUSD Policies, Practices, Procedures Matrix for a complete listing.

3.2a Develop Programmatic Improvement Action Plan

Complete information below for each measurable outcome (cut and paste empty boxes for additional outcomes).

Describe how the budget allocation aligns with the Programmatic Improvement Action Plan. *(See Section 3.2b.)*

Measurable Outcome #1: Multi Tiered Systems of Support (MTSS)

By September 30, 2022, 100 % of schools with students in our focus population will develop and implement MTSS plans for Behavioral and Academic Expectations and Interventions. Additionally, identified school sites will utilize the Oakland Unified School District's MTSS Framework to build a tiered student support and intervention system resulting in a 5% reduction in suspensions and increase student access to interventions for students that are struggling academically.

Indicator/Element(s):

African American - Emotional Disturbance

African American - Other Health Impairment

African American - Discipline resulting in less than 10 days out of school

Root Cause(s):

2-Inconsistent Implementation of District Wide Discipline Practices: Sites lack systems and staff to implement early behavioral support resulting on dependency on Special Education for intervention

3-Limited Targeted General Education Interventions for African American Students: MTSS has not been systematically monitored resulting in some schools having clear MTSS plans while some do not. OUSD has a strong referral system (COST) for Tier III interventions but lacks investment in Tier II interventions for both academics and behavior.

Target Population:

Elementary schools with two or more of the following data points:

-15% or more of students identify as African American;

-Socioeconomically disadvantaged population of 80% or more;

-Students with a chronic absenteeism rate at 10% or higher;

-Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and**

Students in TK-2 who:

-Do not currently have an IEP;

-Perform 2 grades or lower on our local literacy assessments; and

-Are either chronically absent or have been suspended for two or more days within the last school year

The number of students at these schools must be greater than 7 to receive these interventions.

There are 28 schools identified through this criteria.

You may wish to duplicate the four shaded boxes below to add additional activities for each measurable outcome.

Activity:

-Refine the OUSD MTSS Framework to ensure that each tier for instruction and behavioral health expectations are clear. Ensure each Tier is well defined and implementation of Section 504 must be included within our tiered approach.

-Implement a training and communication campaign of the refined OUSD MTSS Framework.

-Provide training and coaching to schools to identify and implement Multi-Tiered System of Supports for both Academics and Behavior

-Invest in MTSS coaches and provide professional support / coaching to administrators in developing MTSS plan.

-Select or design an MTSS site planning tool that is part of the Site Plan for Student Achievement (SPSA).

-Schools develop school based MTSS routines, structures, and services based on the OUSD MTSS Framework that include the following:

Tier I:

Sites to develop an MTSS/PBIS plan that emphasizes Tier I classroom practices, includes school-wide safety plan, consistent responses to unexpected behaviors, and progress monitoring

Site to assign/fund staff to lead training and teacher coaching in culturally responsive Tier I practices in SPSA

UDL

Tier II:

Sites to develop an Early Behavioral Support (EBS) lead team

Lead team to receive training in CPI

Lead team to develop and implement Tier II EBS interventions

Support provided to school sites to achieve the above:

-Access to central staff from Academics and Instructional Innovation and Community School Student Services Behavioral Health Team at least weekly

-Development of clear intervention plans for students identified as needing Tier 2 and Tier 3 interventions from the Academics and Instructional Innovation and Community School Student Services Behavioral Health Team. Each learning plan will be based on each of the students individual needs, examples of what may be offered to the students include tutoring, anger management, and social skills lessons. Student progress will be monitored and reported quarterly.

-Central office staff from Academics and Instructional Innovation and Community School Student Services Behavioral Health Team will attend listening sessions with parents of target group students to identify needs for support. The information gathered during these sessions will be shared with targeted site leadership teams.

- Academics and Instructional Innovation and Community School Student Services Behavioral Health Team, and Network Team will receive additional leadership training and coaching in the OUSD MTSS Framework

Staff Responsible:

Andrea Bustamante, Executive Director Community Schools Student Services

Barbara McClung, Director, Behavioral Health

Wesley Jacques, Executive Director of Community Schools Student Services

Elementary Network Administrators

Elementary MTSS/PBIS Coaches, Elementary Behavior Specialists

Elementary Site administrators

Elementary Site based EBS lead teams

Timeline:

-January 2021: Refine OUSD's MTSS Plan

-February 2021: Develop a schedule of training and coaching for identified schools (PBIS, RJ, CPI, UDL). Devise training plan for site based lead teams that include site administration

-February 2021: Sites develop school-based systems and routines for implementing OUSD MTSS Framework, including the design and funding within the SPSA

-March 2021: Assess level of staffing to support schools sites (Behavior Specialists, Instructional Support Specialists, MTSS Coaches aligned to schools)

- School Plans begin implementation Fall 2021-2022

Data Sources/Methods for Evaluating Progress:

# of target population referred Tier II interventions

# of target populations referred to SPED prior to EBS

# of staff trained in OUSD MTSS Framework

sites with functioning EBS lead teams

of students receiving EBS subsequently referred for ED

pre and post intervention data for students referred to services (i.e., URFs/suspensions, attendance, universal screening data), quarterly

-# of Elementary schools implementing early behavioral supports (EBS) prior to referring to SPED for ED

-Reduction in referrals for suspensions and referrals to special education for targeted population

-Increase access to academic interventions at Tiers 2 and 3

-Decrease in the amount of referrals for assessment in special education without clear documentation of Tier 2 and 3 interventions prior to a referral

Measurable Outcome #2: Racial Justice, Equity & Healing- Anti-Racist Training Design & Implementation

By September 2022, there will be a 25% increase in students and their families feeling connected to their school site as measured by CHKS Data, chronic absenteeism rates will decrease by 5%, and suspensions will decrease by 3% at our target schools.

Indicator/Element(s):

-African American - Emotional Disturbance

-African American - Other Health Impairment

-African American - Discipline resulting in less than 10 days out of school

Root Cause(s):

1-Cultural Dissonance, Bias, Teacher Expectations and Misconceptions: Equity training offered so far has been optional, and not embedded within existing professional learning structures for teachers and staff at the site and district level. And, staff that have engaged with existing equity learning does not have the opportunity to practice asset based language, and culturally responsive practice within established content learning spaces.

Target Population:

Elementary schools with two or more of the following data points:

-15% or more of students identify as African American;

-Socioeconomically disadvantaged population of 80% or more;

-Students with a chronic absenteeism rate at 10% or higher;

-Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and**

Students in TK-2 who:

-Do not currently have an IEP;

-Perform 2 grades or lower on our local literacy assessments; and

-Are either chronically absent or have been suspended for two or more days within the last school year

The number of students at these schools must be greater than 7 to receive these interventions.

There are 28 schools identified through this criteria.

Activity:

-Provide on-going foundational equity learning professional development to teachers and school leaders, integrated with Literacy and MTSS training described above.

-Coordinate with Literacy and MTSS leads to design integrated content during professional learning

-Support school leadership and their SSC teams to prioritize funding implementation of multi-tiered systems of support (academic and SEL interventions)

-Design and implement nine hours of professional development for administration and certificated staff in strategies to build an inclusive school culture and increasing diverse representation across the site, building collective capacity to have courageous conversations and interrupting both implicit and explicit inequities, and build Anti- Racist/ Anti Bias Instruction within the curriculum. Participants will explore their personal and institutional biases and identify more culturally relevant approaches for serving the identified students by June 2020. The professional development will include actions of the staff to create improvement cycles for their grade level/department focused on the African American students population and the identified students. This is linked to a careful examination of discipline actions taken and strategies to address patterns of concern. Professional Development for classified staff with a focus on cultural responsiveness and skill building will be held with culturally responsive strategies to be used outside the classroom. Other professional development will be offered to all staff to support staff in moving along their equity journey that is differentiated and based on the cultural awareness of the staff member.

-Support the above mentioned school sites to create equity teams (Classified, Certificated, Parents, Administration, District admin support), linked to their existing SSC team and process, who will assist in systematizing site level conversations around equitable practices as well as anti-racist/antibias actions. Each site will use equity walks/ audits that will be recommended by the district to determine areas of growth for their site. From this data, each site will determine site specific actionable goals to implement and progress monitor through the year, and reflected in their SPSAs. Coaching and mentoring will be made available upon request. The Equity site team will support the implementation of actions that may include improving inclusive classroom culture, integrating multiple perspectives in the curriculum and will monitor levels of implementation of actions and will share with staff, parents and families at least 2 times through the year.

-Target schools will expand and prioritize family and student voice in making decisions about the best ways to support students both academically and behaviorally. Sites will invite all community stakeholders of the

identified students (teachers, support staff, students, families) in listening sessions at least 2 times a year to report progress in activities of the CCEIS plan and provide a forum for continuing conversations about institutional and structural racism. This data will be shared with the site and CCEIS leadership teams, site equity team, whole staff and at District Stakeholder meetings to determine if adjustments need to be made to current actions.

Staff Responsible:

Raquel Jimenez, Executive Director, Office of Equity

Jerome Gourdine, Director of Targeted Strategies

Romy Trigg-Smith, Early Literacy Coordinator

Barbara McClung, Director of Behavioral Health

Timeline:

-January 2021: Develop training/coaching plan, aligned and integrated with Literacy, MTSS, and Family-Partnership.

-January -March 2021: Implement training. Winter/Spring 2021

- February-May 2021: SSCs incorporate targeted literacy and MTSS equity goals into SPSA's.

- Fall 2021-2022: Sites implement SPSAs (targeted culturally relevant literacy and MTSS practices, with embedded site based professional learning and family partnership structures).

- March 2021: Site based Equity teams, with SSC representation, are developed.

Data Sources/Methods for Evaluating Progress:

-100% of sites implementing SPSAs with aligned targeted literacy, MTSS, equity learning, and family partnership activities for our targeted population

-Quarterly data sets (African American, Latino, API, Middle Eastern) student literacy, access to academic-SEL interventions, suspension rates, and attendance) shared with community-district governance bodies: Committee for Educational Excellence for Black Student Education (CEEBSE), PSAC.

-Minutes of team meetings at Target Schools

-Samples of the Equity Site Walks and Inventories and meeting minutes capturing the summary of the discussion at our focus school sites.

-Evidence that staff are engaging in culturally responsive instructional practices will be demonstrated by:

-More targeted group students receiving the academic, social emotional interventions described in this plan

-More targeted group students gaining access to 504 plan services instead of being referred for special education assessment

-Less targeted group students receiving discipline and suspensions

- 100% of staff serving our target population will complete foundational professional development in equity and incorporate our equity learning frames within existing site based professional learning structure(s).

Measurable Outcome #3: Improve Family Partnership

By September 2022, there will be a 25% increase in students and their families feeling connected to their school site as measured by CHKS Data, 100% of schools will implement plans for direct teacher-parent academic partnership, communication, and connection with families.

Indicator/Element(s):

African American - Emotional Disturbance

African American - Other Health Impairment

African American - Discipline resulting in less than 10 days out of school

Root Cause(s):

Lack of Meaningful Engagement with African American Students and Families: While we have adopted family engagement standards, our schools and classrooms do not consistently implement guidance for direct parent-teacher academic partnership. 30% of sites have embedded site structures for partnership and shared decision making: weekly parent-teacher communication, relational parent-teacher home visits, classroom workshops for families to support student learning

Target Population:

Elementary schools with two or more of the following data points:

-15% or more of students identify as African American;

-Socioeconomically disadvantaged population of 80% or more;

-Students with a chronic absenteeism rate at 10% or higher;

-Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and**

Students in TK-2 who:

-Do not currently have an IEP;

-Perform 2 grades or lower on our local literacy assessments; and

-Are either chronically absent or have been suspended for two or more days within the last school year

The number of students at these schools must be greater than 7 to receive these interventions.

There are 28 schools identified through this criteria.

Activity:

-Provide family partnership professional learning, in coordination with Literacy, MTSS, Equity learning for our targeted schools.

-Coordinate with Literacy and MTSS leads to design integrated professional content learning that includes equity and family partnership learning

-Support school leadership and their SSC teams to develop family partnership plans that include activities aligned with their SPSA plan for targeted literacy and MTSS implementation (such as PTHVs, APTT, Weekly communication cadence structure, Affinity committees)

-Coordinate with community partners to provide African American and Latino equity family navigators at targeted sites (TBD)

Staff Responsible:

Raquel Jimenez, Executive Director, Office of Equity

Jerome Gourdine, Director of Targeted Strategies

Sara Nuno, Family-Community Specialist, with Elementary District Family Engagement Specialists and Targeted Student Intervention Specialists

Timeline:

-January-March 2021: Develop training/coaching plan, aligned and integrated with Literacy, MTSS, and Family Partnership.

-March-May 2021: Implement training.

-January -February 2021: SSCs incorporate targeted literacy, MTSS, family partnership and equity goals into SPSA's.

- Fall 2021-2022: Sites implement SPSAs (targeted culturally relevant literacy and MTSS practices, with embedded site based professional learning and family partnership structures).

Data Sources/Methods for Evaluating Progress:

Evidence that teachers are meaningfully engaging with targeted group families is demonstrated by:

-More targeted group students receiving the academic, social emotional interventions described in Measurable Outcomes , collect baseline data and update quarterly.

-More targeted group students gaining access to 504 plan services

-Less targeted group students receiving suspensions

-Number of target school sites implementing relational and academic communication structures: PTHV model, weekly communication platforms, quarterly parent-teacher academic learning opportunities aligned to trimester reporting periods

-Number of target school sites implementing School Governance Standards for Shared Decision making: Parent Action Teams, affinity committees linked to SSC, SSC Rubric scores of "developing" practices

Measurable Outcome #4: Early speech and language screening of students with district literacy measures indicating below-benchmark scores in TK/K.

By June 30, 2022, the District will provide universal screening specific to early communication skills for all students in TK/K programs whose district literacy assessment scores indicate below-benchmark performance and provide short-term service through a MTSS approach for students for whom screener data and family/caregiver feedback indicates an area of potential speech or language concern, yielding screening data for at least 95% of all TK/K students in OUSD public schools.

Indicator/Element(s):

African American- Emotional Disturbance

Root Cause(s):

5) Absence of culturally relevant assessment and interventions. School site personnel may attribute student behaviors in early childhood populations to maladaptive factors and overlook an underlying delay in communication that is causing the unexpected behaviors. File reviews indicated that the majority of students eligible under ED who are Black struggled with communication and language challenges in early childhood. Additionally, focus group qualitative data revealed that site teams may mistake behavioral challenges for as either a conduct issue or emotional disturbance when the actual cause of the behavior is an inability to communicate.

Target Population:

All students in grades TK or K who have a district literacy assessment measure indicating below-benchmark performance, within their first year on an OUSD campus.

Activity:

1. Identify and adopt a culturally-appropriate universal screening tool;
2. Assign and train highly-qualified speech-language pathologists to each network of schools;
3. Utilize district assessment data to identify the cohort of students who require screening; and

4. Convene monthly team meetings with staff to review screener results and therapy progress for students participating in short-term service.

Staff Responsible:

1. Executive Director, Special Education
2. Coordinator of Related Services, Special Education
3. Executive Director, Community Schools

Timeline:

- By March, 2021: Identify recommended universal screening tool
- By May, 2021: Field test universal screening tool
- By August, 2021: Adopt universal screening tool
- By August, 2021: Assign SLP to each network of schools
- By October, 2021: Convene monthly team data review meetings
- By June, 2022: Complete initial screening of all students in target population

Data Sources/Methods for Evaluating Progress:

Quarterly review of screener data, review of speech therapy notes for students receiving short-term therapy, review of discipline records for students within target population.

Measurable Outcome #5: Early Literacy

By May 30, 2022, we will reach our early literacy annual goals--Kindergarten: 80% of students will master foundational literacy skills on i-Ready; 1st Grade: More than 50% of students read at/above grade level in i-Ready (30% baseline) with less than 1% multiple years below grade (4% baseline) in i-Ready; 2nd Grade: 50% of read at/above grade level (19% baseline) with less than 5% multiple years below (baseline 27%) for our Targeted Population at specific schools.

Indicator/Element(s):

African American - Emotional Disturbance

African American - Other Health Impairment

African American - Discipline resulting in less than 10 days out of school

Root Cause(s):

6- Inconsistent Staff Instructional Capacity & 7-Curriculum and Instruction: We have had inconsistent Tier 1 literacy literacy instruction for African American students, namely lack of systematic foundational literacy instruction (phonics, phonemic awareness, fluency) and access standards-based

texts and tasks. We have not sufficiently monitored implementation of these Tier 1 elements and believe the pandemic has increased inequities in the quality of literacy instruction. We have also lacked the data and systems to track and provide targeted interventions to students in need of tier 2 and tier 3 support.

Target Population:

Elementary schools with two or more of the following data points:

-15% or more of students identify as African American;

-Socioeconomically disadvantaged population of 80% or more;

-Students with a chronic absenteeism rate at 10% or higher;

-Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and**

Students in TK-2 who:

-Do not currently have an IEP;

-Perform 2 grades or lower on our local literacy assessments; and

-Are either chronically absent or have been suspended for two or more days within the last school year

The number of students at these schools must be greater than 7 to receive these interventions.

There are 28 schools identified through this criteria.

You may wish to duplicate the four shaded boxes below to add additional activities for each measurable outcome.

Activity:

MTSS Coordinators, Literacy, Office of Equity Staff, and Elementary Network staff will coordinate supports for target schools and students meeting the criteria above:

-Monitor implementation and support implementation of Tier 1 strategies: including daily foundational literacy with the SIPPS curriculum and i-Ready platform; reading, writing, discussion grounded in complex text sets through newly adopted curriculum; collection and monitoring of formative assessment data.

-Provide on-going professional development to teachers and school leaders. Use i-Ready universal screener and diagnostic assessment to identify Tier 2 and 3 students at each elementary school. Ensure Tier 2 students are provided additional small group instruction and communicate with data, goals and plans with families. Tier 3 interventions will include student study team meetings with family members, academic mentoring, and additional assessment to target supports (e.g. i-Ready dyslexia screener).

-Support school leadership and teachers to assess and manage multi-tiered systems of support by monitoring the implementation of the MTSS systems at target schools.

-Mentor and advocate for students at focal schools (Men of Color Mentors) through the MTSS System implemented at each target school.

Staff Responsible:

Romy Trigg-Smith, Early Literacy Coordinator

Jerome Gourdine, Director of Targeted Strategies

Wesley Jacques, Executive Director, Academics and Instructional Innovation

Timeline:

Implement assessment systems and professional development in Fall of 2020-21. Focus target supports by January 2020-21.

Data Sources/Methods for Evaluating Progress:

-Reach our early literacy annual goals--Kindergarten: 80% of targeted group students will master foundational literacy skills on i-Ready; 1st Grade: More than 50% of targeted group students read at/above grade level in i-Ready (30% baseline) with less than 1% multiple years below grade (4% baseline) in i-Ready; 2nd Grade: 50% of targeted group Students read at/above grade level (19% baseline) with less than 5% multiple years below (baseline 27%) for our Targeted Population at specific schools.

-Increase in reading outcomes between 1 and 2 reading levels and progress towards annual targets on -I-Ready diagnostic and interim assessments (administered 3-4 times per year for all K-2 students.

-Process measures: consistent implementation of Tier 1, 2 and 3 MTSS practices and interventions for reading support

-Reduction of students meeting target population criteria

-SIPPS mastery tests and/or Curriculum embedded assessment in new ELA adoption

-Process Measures related to implementation of MTSS (e.g. curriculum implementation; i-Ready usage, analysis of data, etc.)

Note: Information described in the section above will be monitored through quarterly progress reporting

3.2b Complete Budget Forms

Step 1: Download the following documents from the padlet section specific to Significant Disproportionality.

- 2020 Budget Allocation and 2020 Allowable Costs Budget
- 2020 Target Student Population

Step 2: Complete both documents.

Step 3: Save each document with your district's name or initials in the file name.

Phase 4

4.1 Implement Programmatic Improvement Action Plan

List staff responsible for oversight of CCEIS activities (including submission of Progress Report and Quarterly Expenditure Reporting Forms). If these are submitted from different departments (such as business and program), two individuals may be identified.

Staff Name	Reports to Submit (Progress, Budget, or Both)	Email
Sondra Aguilera	Progress	sondra.aguilera@ousd.org
Lisa Grant-Dawson	Budget	lisa.grantdawson@ousd.org
CCEIS Leadership Team	Progress	see list above

4.2 Evaluate Effectiveness

Describe process for ongoing collection and analysis of data related to the measurable outcomes outlined in the Programmatic Improvement Action Plan. This includes tracking of target students, sending out feedback surveys, gathering and sharing data with stakeholders, and adapting the action plan based on data.

The CCEIS Leadership Team and Stakeholders Team will be responsible for collecting, reviewing, and analyzing data on a quarterly basis to make informed decisions and adjust the plan as appropriate. Tracking our progress to better serve our target population will utilize relevant data to our plan- suspension data, chronic absenteeism data, local assessment data in literacy, MTSS Interventions tracking, and special education referrals data from our OUSD Data Dashboards.

add stakeholder quarterly meetings

4.3 Build Supports and Sustainability

Describe the process for adding support for sustainability of CCEIS activities that demonstrate success in reducing disproportionality. Consider LCFF/LCAP, blended funding, grant writing, and other funding sources.

While designing the CCEIS Plan, we heavily considered the district's LCAP goals to ensure we were thinking about sustainability and the connection to sustained funding through both central and site-based resources. Previously, we implemented a CCEIS plan and many of the interventions established at that time diminished due to lack of sustained funding. The alignment of SPSAs to the CCEIS plan will help ensure sustainability at the site level so resources are prioritized to fund site based tiered interventions.

Stakeholder meetings held quarterly to discuss data on the implementation of the sites intervention plans and activities will assist us to continue to shape LCAP actions and services, so interventions are prioritized in the formation of that plan.

Funding will be reviewed in regards to the CCEIS plan's measurable outcomes' success in addressing disproportionality. Target data will be collected, reviewed, and analyzed on a quarterly basis to determine that measurable outcomes have been achieved to reduce disproportionality.

We must also consider the multiple plans in our District so that schools experience the support of a central office to coordinate the implementation of multiple plans. We would also be remiss in omitting the impact that the COVID 19 pandemic has had on our ability to implement our instructional program and meeting structures as we have adjusted to implementing service virtually while identifying ways to implement services in person when possible and safe.

4.5 Complete and Submit CDE Feedback survey

List staff responsible for completing and submitting survey provided by CDE at the end of the CCEIS period.

Staff Name/Title	LEA/Agency	Email
Sondra Aguilera Chief Academic Officer	OUSD	sondra.aguilera@ousd.org
Wesley Jacques Executive Director Academics and Instructional Innovation	OUSD	wesley.jacques@ousd.org
Raquel Jimenez Executive Director, Office of Equity	OUSD	raquel.jimenez@ousd.org
Andrea Bustamante Executive Director, Community Schools Student Services	OUSD	andrea.bustamante@ousd.org
Jennifer Blake Executive Director, SPecial Education	OUSD	jennifer.blake@ousd.org

Submit the following final documents to the CDE by email to: IntensiveMonitoring@cde.ca.gov.

Significant Disproportionality CCEIS Plan Form

2020 Budget Allocation and 2020 Allowable Costs Budget Form

2020 Target Student Population Form

Contract or memorandum of understanding for technical assistance

CCEIS Plan Signature Form

Prepared by California Department of Education January 2020

2020 Target Student Population

The Comprehensive Coordinated Early Intervening Services (CCEIS) are to be provided to a targeted population.

The purpose of this document is to assist the local educational agency (LEA) to define the target student population to receive CCEIS and estimate the number of students to receive such services.

Reporting on this activity requires the following:

- The definition of the target student population to receive the CCEIS and CCEIS expenses for 2020 must conform to the U.S. Office of Special Education Programs (OSEP) IDEA Part B Regulations Significant Disproportionality (Equity in IDEA). Please refer specifically to Questions C-3-2 and C-3-3, pages 19 and 20, on the U.S. Department of Education Web page at https://www2.ed.gov/policy/speced/guid/idea/memosdcltrs/significant-disproportionality-qa-2-23-17.pdf.

- The estimated number of students expected to receive CCEIS during the 27-month period within which the local educational agency (LEA) must expend the 15 percent set aside of IDEA funding for CCEIS. The total estimated number of students for the entire 27-month period must be an unduplicated student count.

Targeted Student Population Reporting

The LEA must complete the following Targeted Student Population Reporting Charts based on current student data.

The estimated student numbers:

- Must be greater than zero
- Must represent the students expected to receive CCEIS services
- Cannot equal the number of all students

Local Educational Agency (LEA) Name:	**Oakland Unified School District**
Special Education Local Plan Area Name:	**Oakland Unified School District**

Directions: Complete the following Target Student Population Charts for the 2020 CCEIS Service Period. Please feel free to add additional pages as needed.

Students Currently Not Identified as Needing Special Education 2020 CCEIS Service Period: July 1, 2020 to September 30, 2022		
Report Periods	**Description of Targeted Student Population**	**Number of Students Currently Not Identified as Needing Special Education Receiving CCEIS Initiatives**
First 12 months: 7/1/2020 to 6/30/2021	Executive Director of Community Schools, Student Services, Director of Behavioral Health, and the Executive Director of Academics and Instructional Innovation will create a districtwide plan for early intervention that provides intensive academic, behavior, and social emotional interventions for student's. The development of the plan includes Restorative Practices, push in support, PBIS, and academic interventions. The MTSS team will track interventions and offer targeted support based on students' individual behavior. Criteria for selection of Target students include: Elementary schools with two or more of the following data points: -15% or more of students identify as African American; -Socioeconomically disadvantaged population of 80% or more; -Students with a chronic absenteeism rate at 10% or higher; -Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and** Students in TK-2 who: -Do not currently have an IEP; -Perform 2 grades or lower on our local literacy assessments; and	Allendale 21 Bella Vista 7 Brookfield 9 Burkhalter 14 Carl Munck 7 Emerson 10 Encompass 9 Franklin 11 Fruitvale 17 Futures 21 Garfield 16 Grass Valley 8 Hoover 13 Horace Mann 13 Howard 14 La Escuelita 10 Laure; 20 Madison Primary 11 Manzanita Community 10 Markham 16 MLK 24 Parker 15 Piedmont 17 Prescott 16 Pride 9 Reach 20 Rise 10 Sankofa 15

	-Are either chronically absent or have been suspended for two or more days within the last school year The number of students at these schools must be greater than 7 to receive these interventions. Data sources for monitoring progress will include: Attendance, classroom office referrals, suspension, observational data, and MTSS plans.	
Second 12 months: 7/1/2021 to 6/30/2022	Executive Director of Community Schools, Student Services, Director of Behavioral Health, and the Executive Director of Academics and Instructional Innovation will create a districtwide plan for early intervention that provides intensive academic, behavior, and social emotional interventions for student's. The development of the plan includes Restorative Practices, push in support, PBIS, and academic interventions. The MTSS team will track interventions and offer targeted support based on students' individual behavior. Criteria for selection of Target students include: Elementary schools with two or more of the following data points: -15% or more of students identify as African American; -Socioeconomically disadvantaged population of 80% or more; -Students with a chronic absenteeism rate at 10% or higher; -Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and** Students in TK-2 who: -Do not currently have an IEP; -Perform 2 grades or lower on our local literacy assessments; and -Are either chronically absent or have been suspended for two or more days within the last school year	Allendale 21 Bella Vista 7 Brookfield 9 Burkhalter 14 Carl Munck 7 Emerson 10 Encompass 9 Franklin 11 Fruitvale 17 Futures 21 Garfield 16 Grass Valley 8 Hoover 13 Horace Mann 13 Howard 14 La Escuelita 10 Laure; 20 Madison Primary 11 Manzanita Community 10 Markham 16 MLK 24 Parker 15 Piedmont 17 Prescott 16 Pride 9 Reach 20 Rise 10 Sankofa 15

	The number of students at these schools must be greater than 7 to receive these interventions. Data sources for monitoring progress will include: Attendance, classroom office referrals, suspension, observational data, and MTSS plans.	
Last 3 months: 7/1/2022 to 9/30/2022	Executive Director of Community Schools, Student Services, Director of Behavioral Health, and the Executive Director of Academics and Instructional Innovation will create a districtwide plan for early intervention that provides intensive academic, behavior, and social emotional interventions for student's. The development of the plan includes Restorative Practices, push in support, PBIS, and academic interventions. The MTSS team will track interventions and offer targeted support based on students' individual behavior. Criteria for selection of Target students include: Elementary schools with two or more of the following data points: -15% or more of students identify as African American; -Socioeconomically disadvantaged population of 80% or more; -Students with a chronic absenteeism rate at 10% or higher; -Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and** Students in TK-2 who: -Do not currently have an IEP; -Perform 2 grades or lower on our local literacy assessments; and -Are either chronically absent or have been suspended for two or more days within the last school year The number of students at these schools must be greater than 7 to receive these interventions. Data sources for monitoring progress will include: Attendance, classroom office	Allendale 21 Bella Vista 7 Brookfield 9 Burkhalter 14 Carl Munck 7 Emerson 10 Encompass 9 Franklin 11 Fruitvale 17 Futures 21 Garfield 16 Grass Valley 8 Hoover 13 Horace Mann 13 Howard 14 La Escuelita 10 Laure; 20 Madison Primary 11 Manzanita Community 10 Markham 16 MLK 24 Parker 15 Piedmont 17 Prescott 16 Pride 9 Reach 20 Rise 10 Sankofa 15

	referrals, suspension, observational data, and MTSS plans.	
Total Target Students served during this 27 month period		**383**

Students Currently Identified as Needing Special Education 2020 CCEIS Service Period: July 1, 2020 to September 30, 2022		
Time Periods	**Description of Targeted Student Population**	**Number of Students Currently Identified as Needing Special Education Receiving CCEIS Initiatives**
First 12 months: 7/1/2020 to 6/30/2021	Executive Director of Community Schools, Student Services, Director of Behavioral Health, and the Executive Director of Academics and Instructional Innovation will create a districtwide plan for early intervention that provides intensive academic, behavior, and social emotional interventions for student's. The development of the plan includes Restorative Practices, push in support, PBIS, and academic interventions. The MTSS team will track interventions and offer targeted support based on students' individual behavior. Criteria for selection of Target students include: Elementary schools with two or more of the following data points: -15% or more of students identify as African American; -Socioeconomically disadvantaged population of 80% or more; -Students with a chronic absenteeism rate at 10% or higher; -Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and** Students in TK-2 who: -Do not currently have an IEP; -Perform 2 grades or lower on our local literacy assessments; and -Are either chronically absent or have been suspended for two or more days within the last school year	None

	The number of students at these schools must be greater than 7 to receive these interventions. Data sources for monitoring progress will include: Attendance, classroom office referrals, suspension, observational data, and MTSS plans.	
Second 12 months: 7/1/2021 to 6/30/2022	Executive Director of Community Schools, Student Services, Director of Behavioral Health, and the Executive Director of Academics and Instructional Innovation will create a districtwide plan for early intervention that provides intensive academic, behavior, and social emotional interventions for student's. The development of the plan includes Restorative Practices, push in support, PBIS, and academic interventions. The MTSS team will track interventions and offer targeted support based on students' individual behavior. Criteria for selection of Target students include: Elementary schools with two or more of the following data points: -15% or more of students identify as African American; -Socioeconomically disadvantaged population of 80% or more; -Students with a chronic absenteeism rate at 10% or higher; -Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and** Students in TK-2 who: -Do not currently have an IEP; -Perform 2 grades or lower on our local literacy assessments; and -Are either chronically absent or have been suspended for two or more days within the last school year The number of students at these schools must be greater than 7 to receive these interventions.	None

	Data sources for monitoring progress will include: Attendance, classroom office referrals, suspension, observational data, and MTSS plans.	
Last 3 months: 7/1/2022 to 9/30/2022	Executive Director of Community Schools, Student Services, Director of Behavioral Health, and the Executive Director of Academics and Instructional Innovation will create a districtwide plan for early intervention that provides intensive academic, behavior, and social emotional interventions for student's. The development of the plan includes Restorative Practices, push in support, PBIS, and academic interventions. The MTSS team will track interventions and offer targeted support based on students' individual behavior. Criteria for selection of Target students include: Elementary schools with two or more of the following data points: -15% or more of students identify as African American; -Socioeconomically disadvantaged population of 80% or more; -Students with a chronic absenteeism rate at 10% or higher; -Have a Special Education referral rate above the average number of referrals across elementary school campuses; **and** Students in TK-2 who: -Do not currently have an IEP; -Perform 2 grades or lower on our local literacy assessments; and -Are either chronically absent or have been suspended for two or more days within the last school year The number of students at these schools must be greater than 7 to receive these interventions. Data sources for monitoring progress will include: Attendance, classroom office referrals, suspension, observational data, and MTSS plans.	None

Total Target Students served during this 27 month period	0

Please ensure to indicate the Total Target Students served on the Quarterly Progress Reports.

Please verify, scan, and submit electronically with the CCEIS Programmatic Improvement Plan to SigDisp@cde.ca.gov.

2020 BUDGET ALLOCATION

Significant Disproportionality
Comprehensive Coordinated Early Intervening Services (CCEIS)

Individuals with Disabilities Education Act of 2004, Part B Grant

Complete the required information for the identified local educational agency (LEA).

LEA Name :Oakland Unified School District	County District Code:
LEA Contact Name:Sondra Aguilera	LEA Contact Email:sondra.aguilera@ousd.org
SELPA Contact Name:Jennifer Blake	SELPA Contact Email:jennifer.blake@ousd.org

Provide the Fiscal Year 2019–20 allocation awarded for Resource Codes 3310 and 3315:

2019 Resource **3310** Allocation	2019 Resource **3315** Allocation
$8,573,838	$241,634

Provide the Fiscal Year 2020–21 allocation awarded for Resource Codes 3310 and 3315:
Provide the 2020 allocations the SELPA provided to the identified LEA for resource codes 3310 and 3315. The 15 percent set-aside for CCEIS expenditures will be determined from these two resource codes.

2020 Resource **3310** Allocation	2020 Resource **3315** Allocation
$9,031,448	$240,184

In the box below, indicate the 15 percent set aside for each of the Fiscal Year 2020–21 allocations the LEA was awarded for resource codes 3310 and 3315:

2020 CCEIS Resource 3312 **3312 = 15% of 3310**		2020 CCEIS Resource 3318 **3318 = 15% of 3315**		**Total 2020 CCEIS Budget (3312 plus 3318)**
$1,269,387	**plus**	**$36,028**	**equals**	**$1,305,415**

The above 15 percent set-aside amounts will be the 2020-21 CCEIS allocations for resource codes 3310 (CEIS Resource Code 3312) and 3315 (CEIS Resource 3318) and should be expended and reported accurately in quarterly CCEIS Progress and Expenditure Reports.
Please use the Total 2020 CCEIS Budget indicated above to complete the 2020 Allowable Costs Budget.

2020 ALLOWABLE COSTS BUDGET
Significant Disproportionality Comprehensive Coordinated Early Intervening Services (CCEIS) Individuals with Disabilities Education Act of 2004 (IDEA), Part B Grant

Complete the table below to reflect the **Total 2020 CCEIS Budget** as reported on the 2020 Budget Allocation. CCEIS expenses for 2020 must conform to the U.S. Office of Special Education Programs (OSEP) IDEA Part B Regulations Significant Disproportionality (Equity in IDEA). For detailed allowable CCEIS expenditures, please refer specifically to Questions C-3-1 through C-3-10, pages 19 through 24, on the U.S. Department of Education Web page at https://www2.ed.gov/policy/speced/guid/idea/memosdcltrs/significant-disproportionality-qa-2-23-17.pdf.

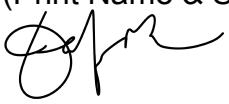
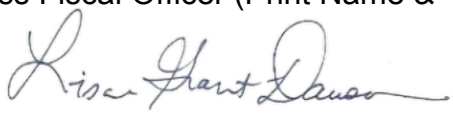
The 2020 CCEIS period is from July 1, 2020, through September 30, 2022. The CCEIS 15 percent set-aside must be fully expended by September 30, 2022.

Local Educational Agency (LEA) Name:	Oakland Unified School District
Special Education Local Plan Area Name:	Oakland Unified School District

2020 Budget Line Items	Brief Description of 2020 CCEIS Activities	Amount for each CCEIS Activity
1000–Certified Salaries	Intervention Support	**$ 540,000**
2000–Classified Salaries	Intervention Support	**$220,800**
3000–Employee Benefits	Payroll Taxes and Benefits	**$329,527**
4000–Materials and Supplies	Supplies to support interventions	**$15,000**
5000–Services and Other Operating Costs	Staff Training	**$15,000**
5100 and 5800 Contract Services	Staff Training	**$130,000**
7300–Indirect Cost Rate (ICR) CDE-approved rate of _4.22____ percent) Note: ICR cannot be used for Object Codes 5100 or 5800		**$55,088**
Total Amount for 2020 CCEIS Activities. The amount must equal the Total 2020 CCEIS Budget as indicated on the 2019 Budget Allocation Summary.		**$1,305,415**

The authorized agents validate the accuracy of the information reported:

LEA Superintendent (Print Name & Signature) Kyla Johnson-Trammell	Date Signed: Contact Phone:
LEA Special Education Director (Print Name & Signature) Jennifer Blake	Date Signed: Contact Phone: 12.14.2020

SELPA Director (Print Name & Signature) Jennifer Blake 	Date Signed: 12.14.2020 Contact Phone: 925-285-9082
SELPA/LEA Business Fiscal Officer (Print Name & Signature) Lisa Grant Dawson 	Date Signed: Contact Phone: December 15, 2020

Please verify, sign, and email directly to the SigDisp@cde.ca.gov.

Significant Disproportionality Comprehensive Coordinated Early Intervening Services (CCEIS)
2020 Plan Form Signature Page

Local Education Agency (LEA) Name
Oakland Unified School District

Significant Disproportionality Comprehensive Coordinated Early Intervening Services (CCEIS) Plan

Form Due to CDE: **December 15, 2020**

Progress Report Due to CDE: **January 10, 2021**

By signing this form, the authorized personnel validate the accuracy of the information reported and agree to implement the CCEIS Plan.

Kyla Johnson-Trammel	
LEA Superintendent (Print Name and Sign)	Date
Jennifer Blake	12.14.2020
SELPA Director (Print Name and Sign)	Date
Jody London	
School Board Chairperson (Print Name and Sign)	Date

Please email signed form to: SigDisp@cde.ca.gov