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|--|---------------------------------------|-----------------|------------------|---------------|-----------------------------------|
| Responses to these questions have been from the Contact-Intervention Information Tab | Education Service Center (ESC) Number | District Number | District Name | Campus Number | Campus Name |
| | Region 18 | 068901 | Ector County ISD | 068901132 | G.E. Buddy West Elementary School |

Needs Assessment Summary and Improvement Plan

Definition/Purpose: After your data analysis yields a summary of findings that results in a set of problem statements, the next step is to engage in the needs assessment process to identify root causes. The 5 steps of the root causes assessment include:
 Step 1: Clarify and prioritize problem statements
 Step 2: Establish the purpose of assessing root causes and establish the team
 Step 3: Gather data
 Step 4: Review data analysis
 Step 5: Root cause analysis
 The needs assessment process is intended to safeguard against planning or implementing strategies before the root cause of a problem is understood.

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| Problem Statements (PS): <i>Problem statements are carried over from Section VI of the Campus Data Analysis tab OR Section VI of the District Data Analysis Summary tab.</i> | PS 1: | 43% of West students met standard on math STAAR | is occurring because of Root Cause #1 | Root Cause 1: | Teachers were not aware that their instruction was not at the level of rigor indicated by the TEKS |
| | PS 2: | 37% of West students met standard on STAAR science | is occurring because of Root Cause #2 | Root Cause 2: | Teachers were not aware that instruction was not aligned to the TEKS and essence statements. |
| | PS 3: | 45% of West students met standard on reading STAAR | is occurring because of Root Cause #3 | Root Cause 3: | Teachers were not aware that instruction was not aligned to the TEKS and Figure 19 |
| | PS 4: | | is occurring because of Root Cause #4 | Root Cause 4: | <Enter text> |
| | PS 5: | | is occurring because of Root Cause #5 | Root Cause 5: | <Enter text> |
| | PS 6: | | is occurring because of Root Cause #6 | Root Cause 6: | <Enter text> |
| | PS 7: | | is occurring because of Root Cause #7 | Root Cause 7: | <Enter text> |
| | PS 8: | | is occurring because of Root Cause #8 | Root Cause 8: | <Enter text> |
| | PS 9: | | is occurring because of Root Cause #9 | Root Cause 9: | <Enter text> |
| | PS 10: | | is occurring because of Root Cause #10 | Root Cause 10: | <Enter text> |

Identified and Prioritized Root Causes:
 It is important to prioritize your root causes so that your improvement plan is targeted and focused. Although a TEC §11 campus/district improvement plan is critical to overall success, the TEC §39 targeted improvement plan is intended to address the specific reasons for low performance in the state accountability, PBM, or RF system.
If the district or campus would like to identify more than 10 root causes, contact the support specialist assigned to this review.

***** Important Notice! Improvement Required (IR) districts/campuses must complete the following attestation statement to fulfill TEC §39.106 requirements.*****

Attestation Statement: By checking the box, I attest that an on-site needs assessment has been conducted according to TEC §39.106 (b) and recommendations were made by the intervention team when considered appropriate. In addition, these findings have been recorded and are available upon request.

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| | Region 18 | 068901 | Ector County ISD | 06890132 | G.E. Buddy West Elementary School |

Needs Assessment Summary and Improvement Plan

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|---|--|--|--|
| Problem Statement 1: | 43% of West students met standard on math STAAR | Annual Goal: | 65% of West students will meet standard on math STAAR |
| Root Cause 1: | Teachers were not aware that their instruction was not at the level of rigor indicated by the TEKS | Strategy: | Teachers will participate in data driven, guided planning and modeling |
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness | | |
| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers | How will addressing this root cause impact the index/indicator/CSF? | Instructional observations, student work, and state assessment data indicate that students did not receive instruction in all of the grade level TEKS and at the level of rigor and specificity as determined by the TEKS, essence statements and the state assessments. Providing teachers with a deep understanding of the TEKS, TEKS alignment, the state assessment, and a process for effective planning will result in students receiving appropriate instruction and levels of instruction. Monitoring instruction through walk throughs, data, and lesson plans will provide the instructional leaders with the data they need to provide feedback and to modify instruction or planning practices throughout the year. West is a new campus with many teachers new to teaching. Implementing a planning and data monitoring process will create an instructional environment that seeks to align instruction to the TEKS and that monitors closely the impact of instruction on student learning. |

Interventions by Quarter

| Q1 (Aug, Sept, Oct) <small>Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1).</small> | | Q2 (Nov, Dec, Jan) | | Q3 (Feb, Mar) | | Q4 (April, May, June) | |
|--|--|--|---|--|---|--|---|
| Q1 Goal: | All teachers will receive in-depth planning professional development to include process for unpacking TEKS, data analysis and student data folder training | Q2 Goal: | All teachers will use informal and formal assessment data during planning to meet the needs of students while working within the district scope and sequence | Q3 Goal: | Student assessment data will indicate that 55% of all students are meeting assessment standards | Q4 Goal: | Student assessment data will indicate that 65% of all students are meeting assessment standards |
| Q1 Interventions | | Q2 Interventions | | Q3 Interventions | | Q4 Interventions | |
| 1) | Teachers will receive training in : Eduphoria, unpacking TEKS, student data folders | 1) | Teachers will participate in data meetings to analyze SE level data and individual student mastery of the SE. Teachers will work with CCF to design review, reteach, or intervention lessons. | 1) | Teachers will participate in data meetings to analyze SE level data and individual student mastery of the SE. Teachers will work with CCF to design review, reteach, or intervention lessons. | 1) | Teachers will participate in data meetings to analyze SE level data and individual student mastery of the SE. Teachers will work with CCF to design review, reteach, or intervention lessons. |
| 2) | Teachers will participate in weekly planning guided by CCF to ensure instruction is at the level of rigor of the TEKS | 2) | Teachers will conference with students to evaluate progress on student individual goals | 2) | Teachers will conference with students to evaluate progress on student individual goals | 2) | Teachers will conference with students to evaluate progress on student individual goals |
| 3) | Teachers will implement student data folders and conference with students to set personal learning goals | 3) | Campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback and support as evidenced by data to teachers | 3) | Campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback and support as evidenced by data to teachers | 3) | Campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback and support as evidenced by data to teachers |
| 4) | Campus instructional leaders will observe and provide timely feedback to teachers regarding classroom instruction | 4) | | 4) | | 4) | |
| What data will be collected to monitor interventions in Q1? | | What data will be collected to monitor interventions in Q2? | | What data will be collected to monitor interventions in Q3? | | What data was collected to monitor interventions in Q4? | |
| 1) | professional development, sign-in sheets, agendas, training materials; student data folders, expectations for student data folders | 1) | data meeting schedule, student SE data, individual student data, evidence of review and reteach. Intervention schedule and lesson plans | 1) | data meeting schedule, student SE data, individual student data, evidence of review and reteach. Intervention schedule and lesson plans | 1) | campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers |
| 2) | CCF calendar, PLC minutes and agendas, unit and weekly lesson plans | 2) | student folders, student data conference schedule | 2) | student folders, student data conference schedule | 2) | student folders, student data conference schedule |
| 3) | student data folder expectations, student data conference schedule, student data folders | 3) | walk through schedule, walk throughs, evidence of feedback | 3) | walk through schedule, walk throughs, evidence of feedback | 3) | walk through schedule, walk throughs, evidence of feedback |
| 4) | walk through schedule, walk throughs, evidence of feedback | 4) | Station, unit assessments, 9 week assessment data | 4) | Station, unit assessments, 9 week assessment data | 4) | Station, unit assessments, 9 week assessment data |

End of Quarter Reporting

| Q1 Report <small>Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report.</small> | | Q2 Report | | Q3 Report | | Q4 Report | |
|--|---|--|---|--|---|--|---|
| Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> |
| Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select |
| What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> |

End of Year Reporting

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|--|--|--|---|---|--|
| Provide the data that supports your 4th quarter status of this annual goal. | <Enter text> | If you <u>did</u> meet your annual goal, to what do you attribute your success? | <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Data Quality <input type="checkbox"/> Annual Goals <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Training <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Other <input type="checkbox"/> Ongoing Monitoring and Interventions | Please provide additional information for the selection of Other or for any selected elements. | <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will influence your planning for the 2017-2018 school year. | <Enter text> | | | | |
| Problem Statement 2: | 37% of West students met standard on STAAR science | | | Annual Goal: | 65% of West students will meet standard on science STAAR |
| Root Cause 2: | Teachers were not aware that instruction was not aligned to the TEKS and essence statements. | | | Strategy: | Teachers will participate in data driven, guided planning and modeling |

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|---|--|--|--|--|
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness | | | |
| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesign School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers | How will addressing this root cause impact the index/indicator/CSF? | Instructional observations, student work, and state assessment data indicate that students did not receive instruction in all of the grade level TEKS and at the level of rigor and specificity as determined by the TEKS, essence statements and the state assessments. Providing teachers with a deep understanding of the TEKS, TEKS alignment, the state assessment, and a process for effective planning will result in students receiving appropriate instruction and levels of instruction. Monitoring instruction through walk throughs, data, and lesson plans will provide the instructional leaders with the data they need to provide feedback and to modify instruction or planning practices throughout the year. West is a new campus with many teachers new to teaching. Implementing a planning and data monitoring process will create an instructional environment that seeks to align instruction to the TEKS and that monitors closely the impact of instruction on student learning. | |

Interventions by Quarter

| Q1 (Aug, Sept, Oct) <small>Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1).</small> | | Q2 (Nov, Dec, Jan) | | Q3 (Feb, Mar) | | Q4 (April, May, June) | |
|--|---|--|--|--|--|--|--|
| Q1 Goal: | All teachers will receive indepth planning professional development to include process for unpacking TEKS, data analysis and student data folder training | Q2 Goal: | All teachers will use informal and formal assessment data during planning to meet the needs of students while working within the district scope and sequence | Q3 Goal: | Student assessment data will indicate that 55% of all students are meeting assessment standards | Q4 Goal: | Student assessment data will indicate that 65% of all students are meeting assessment standards |
| Q1 Interventions | | Q2 Interventions | | Q3 Interventions | | Q4 Interventions | |
| 1) | Teachers will receive training in : Eduphoria, unpacking TEKS, student data folders | 1) | Teachers will participate in data meetings to analyze SE level data and individual student mastery of the SE. Teachers will work with CCF to design review, reteach, or intervention lessons | 1) | Teachers will participate in data meetings to analyze SE level data and individual student mastery of the SE. Teachers will work with CCF to design review, reteach, or intervention lessons | 1) | Teachers will participate in data meetings to analyze SE level data and individual student mastery of the SE. Teachers will work with CCF to design review, reteach, or intervention lessons |
| 2) | Teachers will participate in weekly planning guided by CCF to ensure instruction is at the level of rigor of the TEKS | 2) | Teachers will conference with students to evaluate progress on student individual goals | 2) | Teachers will conference with students to evaluate progress on student individual goals | 2) | Teachers will conference with students to evaluate progress on student individual goals |
| 3) | Teachers will implement student data folders and conference with students to set personal learning goals | 3) | Campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers | 3) | Campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers | 3) | Campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers |
| 4) | Campus instructional leaders will observe and provide timely feedback to teachers regarding classroom instruction | 4) | | 4) | | 4) | |
| What data will be collected to monitor interventions in Q1? | | What data will be collected to monitor interventions in Q2? | | What data will be collected to monitor interventions in Q3? | | What data was collected to monitor interventions in Q4? | |
| 1) | professional development sign-in sheets, agendas, training materials, student data folders, expectations for student data folders | 1) | campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers | 1) | data meeting schedule, student SE data, individual student data, evidence of review and reteach. Intervention schedule and lesson plans | 1) | campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers |
| 2) | CCF calendar, PLC minutes and agendas, unit and weekly lesson plans | 2) | student folders, student data conference schedule | 2) | student folders, student data conference schedule | 2) | student folders, student data conference schedule |
| 3) | student data folder expectations, student data conference schedule, student folders | 3) | walk through schedule, walk throughs, evidence of feedback | 3) | walk through schedule, walk throughs, evidence of feedback | 3) | walk through schedule, walk throughs, evidence of feedback |
| 4) | walk through schedule, walk throughs, evidence of feedback | 4) | (Station, unit assessments, 9 week assessment data | 4) | (Station, unit assessments, 9 week assessment data | 4) | (Station, unit assessments, 9 week assessment data |

End of Quarter Reporting

| Q1 Report <small>Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report.</small> | | Q2 Report | | Q3 Report | | Q4 Report | |
|--|---|--|---|--|---|--|---|
| Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> |
| Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select |
| What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> |

End of Year Reporting

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|---|--------------|--|---|---|--------------|
| Provide the data that supports your 4th quarter status of this annual goal. | <Enter text> | If you <u>did</u> meet your annual goal, to what do you attribute your success? If you <u>did not</u> meet your annual goal, to what do you attribute your lack of success? | <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Data Quality <input type="checkbox"/> Annual Goals <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Training <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Other <input type="checkbox"/> Ongoing Monitoring and Interventions | Please provide additional information for the selection of Other or for any selected elements. | <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will inform/influence your planning for the 2016-2017 school year. | <Enter text> | | | | |

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|-----------------------------|---|---------------------|---|
| Problem Statement 3: | 45% of West students met standard on reading STAAR | Annual Goal: | 65% of West students will meet standard on the reading STAAR assessment |
| Root Cause 3: | Teachers were not aware that instruction was not aligned to the TEKS and Figure 19 | Strategy: | Teachers will participate in data driven, guided planning and modeling |
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness | | |
| | <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction | | Instructional observations, student work, and state assessment data indicate that students did not receive instruction in all of the grade level TEKS and at the level of rigor and specificity as determined by the TEKS |

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| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <ul style="list-style-type: none"> <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers | How will addressing this root cause impact the index/indicator/CSF? | Instructional leaders at the grade level TEKS and at the level of rigor and specificity as determined by the TEKS, essence statements and the state assessments. Providing teachers with a deep understanding of the TEKS, TEKS alignment, the state assessment, and a process for effective planning will result in students receiving appropriate instruction and levels of instruction. Monitoring instruction through walk throughs, data, and lesson plans will provide the instructional leaders with the data they need to provide feedback and to modify instruction or planning practices throughout the year. West is a new campus with many teachers new to teaching. Implementing a planning and data monitoring process will create an instructional environment that seeks to align instruction to the TEKS and that monitors closely the impact of instruction on student learning. |
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Interventions by Quarter

| Q1 (Aug, Sept, Oct) <small>Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1).</small> | Q2 (Nov, Dec, Jan) | Q3 (Feb, Mar) | Q4 (April, May, June) |
|---|---|--|--|
| Q1 Goal: All teachers will receive indepth planning professional development to include process for unpacking TEKS, figure 19, Guided Reading, data analysis and student data folder training | Q2 Goal: All teachers will use informal and formal assessment data during planning to meet the needs of students while working within the district scope and sequence | Q3 Goal: Student assessment data will indicate that 55% of all students are meeting assessment standards | Q4 Goal: Student assessment data will indicate that 65% of all students are meeting assessment standards |

| Q1 Interventions | Q2 Interventions | Q3 Interventions | Q4 Interventions |
|---|---|---|---|
| 1) Teachers will receive training in : Eduphoria, unpacking TEKS, student data folders, figure 19 and Guided Reading 2) Teachers will participate in weekly planning guided by CCF to ensure instruction is at the level of rigor of the TEKS 3) Teachers will implement student data folders and conference with students to set personal learning goals 4) Campus instructional leaders will observe and provide timely feedback to teachers regarding classroom instruction | 1) Teachers will participate in data meetings to analyze SE level data and individual student mastery of the SE. Teachers will work with CCF to design review, reteach, or intervention lessons. 2) Teachers will conference with students to evaluate progress on student individual goals 3) Campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers 4) Campus leaders and teachers will analyze iStation data to ensure students are meeting grade level expectations for reading levels | 1) Teachers will participate in data meetings to analyze SE level data and individual student mastery of the SE. Teachers will work with CCF to design review, reteach, or intervention lessons. 2) Teachers will conference with students to evaluate progress on student individual goals 3) Campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers 4) Campus leaders and teachers will analyze iStation data to ensure students are meeting grade level expectations for reading levels | 1) Teachers will participate in data meetings to analyze SE level data and individual student mastery of the SE. Teachers will work with CCF to design review, reteach, or intervention lessons. 2) Teachers will conference with students to evaluate progress on student individual goals 3) Campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers 4) Campus leaders and teachers will analyze iStation data to ensure students are meeting grade level expectations for reading levels |

| What data will be collected to monitor interventions in Q1? | What data will be collected to monitor interventions in Q2? | What data will be collected to monitor interventions in Q3? | What data was collected to monitor interventions in Q4? |
|---|---|--|---|
| 1) professional development sign-in sheets, agendas, training materials, student data folders, expectations for student data folders 2) CCF calendar, PLC minutes and agendas, unit and weekly lesson plans 3) student data folder expectations, student data conference schedule, student folders 4) walk through schedule, walk throughs, evidence of feedback | 1) campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers 2) student folders, student data conference schedule 3) walk through schedule, walk throughs, evidence of feedback 4) iStation, unit assessments, 9 week assessment data | 1) data meeting schedule, student SE data, individual student data, evidence of review and reteach. Intervention schedule and lesson plans 2) student folders, student data conference schedule 3) walk through schedule, walk throughs, evidence of feedback 4) iStation, unit assessments, 9 week assessment data | 1) campus instructional leaders will monitor the quality of instruction and student achievement and provide timely feedback to teachers 2) student folders, student data conference schedule 3) walk through schedule, walk throughs, evidence of feedback 4) iStation, unit assessments, 9 week assessment data |

End of Quarter Reporting

| Q1 Report <small>Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report.</small> | Q2 Report | Q3 Report | Q4 Report |
|--|--|--|--|
| Did you meet this quarter's goal? Select | Did you meet this quarter's goal? Select | Did you meet this quarter's goal? Select | Did you meet this quarter's goal? Select |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. <Enter text> |
| Are you on track to meet the annual goal? Select | Are you on track to meet the annual goal? Select | Are you on track to meet the annual goal? Select | Did you meet your annual goal? Select |
| What, if any, adjustments must be made in order to meet the annual goal? <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? <Enter any additional information here> |

End of Year Reporting

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| Provide the data that supports your 4th quarter status of this annual goal. <Enter text> | If you did meet your annual goal, to what do you attribute your success? If you did not meet your annual goal, to what do you attribute your lack of success? | <ul style="list-style-type: none"> <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> Data Quality <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Ongoing Monitoring and Interventions <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Annual Goals <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Training <input type="checkbox"/> Other | Please provide additional information for the selection of Other or for any selected elements. <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will inform/influence your planning for the 2016-2017 school year. <Enter text> | | | |

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| Problem Statement 4: | | Annual Goal: | <Enter text> |
| Root Cause 4: | | Strategy: | <Enter text> |
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness | | |
| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <ul style="list-style-type: none"> <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment | How will addressing this root cause impact the index/indicator/CSF? | <Enter text> |

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Needs Assessment Summary and Improvement Plan

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|---|
| <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers |
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Interventions by Quarter

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|--|--|---|--|---|--|---|--|
| Q1 Goal: | | Q2 Goal: | | Q3 Goal: | | Q4 Goal: | |
| Q1 Interventions | | Q2 Interventions | | Q3 Interventions | | Q4 Interventions | |
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |
| What data will be collected to monitor interventions in Q1? | | What data will be collected to monitor interventions in Q2? | | What data will be collected to monitor interventions in Q3? | | What data was collected to monitor interventions in Q4? | |
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |

End of Quarter Reporting

| Q1 Report <small>Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report.</small> | | Q2 Report | | Q3 Report | | Q4 Report | |
|--|---|---|---|---|---|---|---|
| Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> |
| Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select |
| What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> |

End of Year Reporting

| | | | | | | |
|--|--------------|--|---|---|--|--------------|
| Provide the data that supports your 4th quarter status of this annual goal. | <Enter text> | If you <u>did</u> meet your annual goal, to what do you attribute your success? If you <u>did not</u> meet your annual goal, to what do you attribute your lack of success? | <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> Data Quality <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Ongoing Monitoring and Interventions | <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Annual Goals <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Training <input type="checkbox"/> Other | Please provide additional information for the selection of Other or for any selected elements. | <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will inform/influence your planning for the 2016-2017 school year. | <Enter text> | | | | | |

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|----------------------|--|--------------|--------------|
| Problem Statement 5: | | Annual Goal: | <Enter text> |
|----------------------|--|--------------|--------------|

| | | | |
|---------------|--|-----------|--------------|
| Root Cause 5: | | Strategy: | <Enter text> |
|---------------|--|-----------|--------------|

| | |
|---------------|---|
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness |
|---------------|---|

| | | |
|---|--|---|
| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers | How will addressing this root cause impact the index/indicator/CSF? <Enter text> |
|---|--|---|

Interventions by Quarter

| Q1 (Aug, Sept, Oct) <small>Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1).</small> | | Q2 (Nov, Dec, Jan) | | Q3 (Feb, Mar) | | Q4 (April, May, June) | |
|--|--|--------------------|--|---------------|--|-----------------------|--|
|--|--|--------------------|--|---------------|--|-----------------------|--|

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|--|---------------------------------------|-----------------|------------------|---------------|-----------------------------------|
| Responses to these questions have been from the Contact-Intervention Information Tab | Education Service Center (ESC) Number | District Number | District Name | Campus Number | Campus Name |
| | Region 18 | 068901 | Ector County ISD | 06890132 | G.E. Buddy West Elementary School |

Needs Assessment Summary and Improvement Plan

| Q1 Goal: | Q2 Goal: | Q3 Goal: | Q4 Goal: |
|---|---|---|---|
| 1) <input type="text"/> | 1) <input type="text"/> | 1) <input type="text"/> | 1) <input type="text"/> |
| 2) <input type="text"/> | 2) <input type="text"/> | 2) <input type="text"/> | 2) <input type="text"/> |
| 3) <input type="text"/> | 3) <input type="text"/> | 3) <input type="text"/> | 3) <input type="text"/> |
| 4) <input type="text"/> | 4) <input type="text"/> | 4) <input type="text"/> | 4) <input type="text"/> |
| Q1 Interventions | Q2 Interventions | Q3 Interventions | Q4 Interventions |
| 1) <input type="text"/> | 1) <input type="text"/> | 1) <input type="text"/> | 1) <input type="text"/> |
| 2) <input type="text"/> | 2) <input type="text"/> | 2) <input type="text"/> | 2) <input type="text"/> |
| 3) <input type="text"/> | 3) <input type="text"/> | 3) <input type="text"/> | 3) <input type="text"/> |
| 4) <input type="text"/> | 4) <input type="text"/> | 4) <input type="text"/> | 4) <input type="text"/> |
| What data will be collected to monitor interventions in Q1? | What data will be collected to monitor interventions in Q2? | What data will be collected to monitor interventions in Q3? | What data was collected to monitor interventions in Q4? |
| 1) <input type="text"/> | 1) <input type="text"/> | 1) <input type="text"/> | 1) <input type="text"/> |
| 2) <input type="text"/> | 2) <input type="text"/> | 2) <input type="text"/> | 2) <input type="text"/> |
| 3) <input type="text"/> | 3) <input type="text"/> | 3) <input type="text"/> | 3) <input type="text"/> |
| 4) <input type="text"/> | 4) <input type="text"/> | 4) <input type="text"/> | 4) <input type="text"/> |

End of Quarter Reporting

| Q1 Report <small>Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report.</small> | Q2 Report | Q3 Report | Q4 Report |
|--|---|---|---|
| Did you meet this quarter's goal? Select | Did you meet this quarter's goal? Select | Did you meet this quarter's goal? Select | Did you meet this quarter's goal? Select |
| <Enter text> | <Enter text> | <Enter text> | <Enter text> |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. |
| Are you on track to meet the annual goal? Select | Are you on track to meet the annual goal? Select | Are you on track to meet the annual goal? Select | Did you meet your annual goal? Select |
| <Enter any additional information here> | <Enter any additional information here> | <Enter any additional information here> | <Enter any additional information here> |
| What, if any, adjustments must be made in order to meet the annual goal? | What, if any, adjustments must be made in order to meet the annual goal? | What, if any, adjustments must be made in order to meet the annual goal? | |

End of Year Reporting

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|--|--------------|--|---|---|--|--------------|
| Provide the data that supports your 4th quarter status of this annual goal. | <Enter text> | If you did meet your annual goal, to what do you attribute your success? If you did not meet your annual goal, to what do you attribute your lack of success? | <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> Data Quality <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Ongoing Monitoring and Interventions | <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Annual Goals <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Training <input type="checkbox"/> Other | Please provide additional information for the selection of Other or for any selected elements. | <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will inform/influence your planning for the 2016-2017 school year. | <Enter text> | | | | | |

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|----------------------|--|--------------|--------------|
| Problem Statement 6: | | Annual Goal: | <Enter text> |
| Root Cause 6: | | Strategy: | <Enter text> |

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|--|--|---|--------------|
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness | | |
| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers | How will addressing this root cause impact the index/indicator/CSF? | <Enter text> |

Interventions by Quarter

| Q1 (Aug, Sept, Oct) <small>Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1).</small> | Q2 (Nov, Dec, Jan) | Q3 (Feb, Mar) | Q4 (April, May, June) |
|--|--------------------|------------------|-----------------------|
| Q1 Goal: | Q2 Goal: | Q3 Goal: | Q4 Goal: |
| Q1 Interventions | Q2 Interventions | Q3 Interventions | Q4 Interventions |

| | | | | | |
|--|---------------------------------------|-----------------|------------------|---------------|-----------------------------------|
| Responses to these questions have been from the Contact-Intervention Information Tab | Education Service Center (ESC) Number | District Number | District Name | Campus Number | Campus Name |
| | Region 18 | 068901 | Ector County ISD | 06890132 | G.E. Buddy West Elementary School |

Needs Assessment Summary and Improvement Plan

| | | | | | | | |
|----|--|----|--|----|--|----|--|
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |

| | | | |
|---|---|---|---|
| What data will be collected to monitor interventions in Q1? | What data will be collected to monitor interventions in Q2? | What data will be collected to monitor interventions in Q3? | What data was collected to monitor interventions in Q4? |
|---|---|---|---|

| | | | | | | | |
|----|--|----|--|----|--|----|--|
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |

End of Quarter Reporting

| Q1 Report <small>Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report.</small> | | Q2 Report | | Q3 Report | | Q4 Report | |
|--|---|---|---|---|---|---|---|
| Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> |
| Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select |
| What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> |

End of Year Reporting

| | | | | | | |
|--|--------------|--|---|---|--|--------------|
| Provide the data that supports your 4th quarter status of this annual goal. | <Enter text> | If you did meet your annual goal, to what do you attribute your success? If you did not meet your annual goal, to what do you attribute your lack of success? | <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> Data Quality <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Ongoing Monitoring and Interventions | <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Annual Goals <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Training <input type="checkbox"/> Other | Please provide additional information for the selection of Other or for any selected elements. | <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will inform/influence your planning for the 2016-2017 school year. | <Enter text> | | | | | |

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| Problem Statement 7: | | Annual Goal: | <Enter text> |
|----------------------|--|--------------|--------------|

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|---------------|--|-----------|--------------|
| Root Cause 7: | | Strategy: | <Enter text> |
|---------------|--|-----------|--------------|

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|---------------|---|--|--|--|
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness | | | |
|---------------|---|--|--|--|

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| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers | How will addressing this root cause impact the index/indicator/CSF? | <Enter text> |
|--|--|---|--------------|

Interventions by Quarter

| Q1 (Aug, Sept, Oct) <small>Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1).</small> | Q2 (Nov, Dec, Jan) | Q3 (Feb, Mar) | Q4 (April, May, June) |
|--|--------------------|---------------|-----------------------|
|--|--------------------|---------------|-----------------------|

| | | | |
|----------|----------|----------|----------|
| Q1 Goal: | Q2 Goal: | Q3 Goal: | Q4 Goal: |
|----------|----------|----------|----------|

| Q1 Interventions | Q2 Interventions | Q3 Interventions | Q4 Interventions |
|------------------|------------------|------------------|------------------|
|------------------|------------------|------------------|------------------|

| | | | | | | | |
|----|--|----|--|----|--|----|--|
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |

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|--|---------------------------------------|-----------------|------------------|---------------|-----------------------------------|
| Responses to these questions have been from the Contact-Intervention Information Tab | Education Service Center (ESC) Number | District Number | District Name | Campus Number | Campus Name |
| | Region 18 | 068901 | Ector County ISD | 068901132 | G.E. Buddy West Elementary School |

Needs Assessment Summary and Improvement Plan

| | | | | | | | |
|---|--|---|--|---|--|---|--|
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |
| What data will be collected to monitor interventions in Q1? | | What data will be collected to monitor interventions in Q2? | | What data will be collected to monitor interventions in Q3? | | What data was collected to monitor interventions in Q4? | |
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |

End of Quarter Reporting

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Q1 Report Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report. | | Q2 Report | | Q3 Report | | Q4 Report | |
| Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> |
| Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Did you meet your annual goal? | Select |
| What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | <Enter any additional information here> | <Enter any additional information here> |

End of Year Reporting

| | | | | | | |
|--|--------------|--|---|---|--|--------------|
| Provide the data that supports your 4th quarter status of this annual goal. | <Enter text> | If you did meet your annual goal, to what do you attribute your success? If you did not meet your annual goal, to what do you attribute your lack of success? | <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> Data Quality <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Ongoing Monitoring and Interventions | <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Annual Goals <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Training <input type="checkbox"/> Other | Please provide additional information for the selection of Other or for any selected elements. | <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will inform/influence your planning for the 2016-2017 school year. | <Enter text> | | | | | |

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| Problem Statement 8: | | Annual Goal: | <Enter text> |
| Root Cause 8: | | Strategy: | <Enter text> |

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|--|--|---|--------------|
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness | | |
| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers | How will addressing this root cause impact the index/indicator/CSF? | <Enter text> |

Interventions by Quarter

| | | | | | | | |
|---|--|---|--|---|--|---|--|
| Q1 (Aug, Sept, Oct) Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1). | | Q2 (Nov, Dec, Jan) | | Q3 (Feb, Mar) | | Q4 (April, May, June) | |
| Q1 Goal: | | Q2 Goal: | | Q3 Goal: | | Q4 Goal: | |
| Q1 Interventions | | Q2 Interventions | | Q3 Interventions | | Q4 Interventions | |
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |
| What data will be collected to monitor interventions in Q1? | | What data will be collected to monitor interventions in Q2? | | What data will be collected to monitor interventions in Q3? | | What data was collected to monitor interventions in Q4? | |

| | | | | | |
|---|---------------------------------------|-----------------|------------------|---------------|-----------------------------------|
| <i>Responses to these questions have been from the Contact-Intervention Information Tab</i> | Education Service Center (ESC) Number | District Number | District Name | Campus Number | Campus Name |
| | Region 18 | 068901 | Ector County ISD | 068901132 | G.E. Buddy West Elementary School |

Needs Assessment Summary and Improvement Plan

| | | | | | | | |
|----|--|----|--|----|--|----|--|
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |

End of Quarter Reporting

| Q1 Report <small>Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report.</small> | | Q2 Report | | Q3 Report | | Q4 Report | |
|--|---|---|---|---|---|---|---|
| Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> |
| Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Did you meet your annual goal? | Select |
| What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | <Enter any additional information here> | <Enter any additional information here> |

End of Year Reporting

| | | | | | | |
|--|--------------|---|---|---|--|--------------|
| Provide the data that supports your 4th quarter status of this annual goal. | <Enter text> | <p>If you did meet your annual goal, to what do you attribute your success?</p> <p>If you did not meet your annual goal, to what do you attribute your lack of success?</p> | <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> Data Quality <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Ongoing Monitoring and Interventions | <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Annual Goals <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Training <input type="checkbox"/> Other | Please provide additional information for the selection of Other or for any selected elements. | <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will inform/influence your planning for the 2016-2017 school year. | <Enter text> | | | | | |

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|--|--|---|--------------|
| Problem Statement 9: | | Annual Goal: | <Enter text> |
| Root Cause 9: | | Strategy: | <Enter text> |
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness | | |
| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers | How will addressing this root cause impact the index/indicator/CSF? | <Enter text> |

Interventions by Quarter

| Q1 (Aug, Sept, Oct) <small>Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1).</small> | | Q2 (Nov, Dec, Jan) | | Q3 (Feb, Mar) | | Q4 (April, May, June) | |
|--|--|---|--|---|--|---|--|
| Q1 Goal: | | Q2 Goal: | | Q3 Goal: | | Q4 Goal: | |
| Q1 Interventions | | Q2 Interventions | | Q3 Interventions | | Q4 Interventions | |
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |
| What data will be collected to monitor interventions in Q1? | | What data will be collected to monitor interventions in Q2? | | What data will be collected to monitor interventions in Q3? | | What data will be collected to monitor interventions in Q4? | |
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |

| | | | | | |
|--|---|----------------------------|------------------------------------|-----------------------------|---|
| Responses to these questions have been from the Contact-Intervention Information Tab | Education Service Center (ESC) Number: Region 18 | District Number: 068901 | District Name: Ector County ISD | Campus Number: 068901132 | Campus Name: G.E. Buddy West Elementary School |
|--|---|----------------------------|------------------------------------|-----------------------------|---|

Needs Assessment Summary and Improvement Plan

| | | | | | | | |
|----|--|----|--|----|--|----|--|
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |

End of Quarter Reporting

| Q1 Report <small>Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report.</small> | | Q2 Report | | Q3 Report | | Q4 Report | |
|--|---|---|---|---|---|---|--------------|
| Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> |
| Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Did you meet your annual goal? | Select |
| What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | <Enter any additional information here> | |

End of Year Reporting

| | | | | | | |
|--|--------------|--|---|---|--|--------------|
| Provide the data that supports your 4th quarter status of this annual goal. | <Enter text> | If you did meet your annual goal, to what do you attribute your success? If you did not meet your annual goal, to what do you attribute your lack of success? | <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> Data Quality <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Ongoing Monitoring and Interventions | <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Annual Goals <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Training <input type="checkbox"/> Other | Please provide additional information for the selection of Other or for any selected elements. | <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will inform/influence your planning for the 2016-2017 school year. | <Enter text> | | | | | |

| | | | |
|--|--|--------------|---|
| Problem Statement 10: | | Annual Goal: | <Enter text> |
| Root Cause 10: | | Strategy: | <Enter text> |
| Index Number: | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Index 1: Student Achievement <input type="checkbox"/> Index 2: Student Progress <input type="checkbox"/> Index 3: Closing Achievement Gaps <input type="checkbox"/> Index 4: Postsecondary Readiness | | |
| Critical Success Factors (CSFs) ESEA Turnaround Principles (TPs) Major Systems | <input type="checkbox"/> CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction <input type="checkbox"/> CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction <input type="checkbox"/> CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership <input type="checkbox"/> CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar <input type="checkbox"/> CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement <input type="checkbox"/> CSF 6-School Climate/ESEA TP: Improve School Environment <input type="checkbox"/> CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers | | How will addressing this root cause impact the index/indicator/CSF? <Enter text> |

Interventions by Quarter

| Q1 (Aug, Sept, Oct) <small>Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1).</small> | | Q2 (Nov, Dec, Jan) | | Q3 (Feb, Mar) | | Q4 (April, May, June) | |
|--|--|---|--|---|--|---|--|
| Q1 Goal: | | Q2 Goal: | | Q3 Goal: | | Q4 Goal: | |
| Q1 Interventions | | Q2 Interventions | | Q3 Interventions | | Q4 Interventions | |
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |
| What data will be collected to monitor interventions in Q1? | | What data will be collected to monitor interventions in Q2? | | What data will be collected to monitor interventions in Q3? | | What data was collected to monitor interventions in Q4? | |
| 1) | | 1) | | 1) | | 1) | |
| 2) | | 2) | | 2) | | 2) | |
| 3) | | 3) | | 3) | | 3) | |
| 4) | | 4) | | 4) | | 4) | |

End of Quarter Reporting

| | | | | | |
|--|---------------------------------------|-----------------|------------------|---------------|-----------------------------------|
| Responses to these questions have been from the Contact-Intervention Information Tab | Education Service Center (ESC) Number | District Number | District Name | Campus Number | Campus Name |
| | Region 18 | 068901 | Ector County ISD | 068901132 | G.E. Buddy West Elementary School |

Needs Assessment Summary and Improvement Plan

| Q1 Report <small>Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report.</small> | | Q2 Report | | Q3 Report | | Q4 Report | |
|--|---|---|---|---|---|---|--------------|
| Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select | Did you meet this quarter's goal? | Select |
| Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. | <Enter text> |
| Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Are you on track to meet the annual goal? | Select | Did you meet your annual goal? | Select |
| What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | What, if any, adjustments must be made in order to meet the annual goal? | <Enter any additional information here> | <Enter any additional information here> | |

End of Year Reporting

| | | | | | | |
|--|--------------|---|---|---|---|--------------|
| Provide the data that supports your 4th quarter status of this annual goal. | <Enter text> | <p>If you <u>did</u> meet your annual goal, to what do you attribute your success?</p> <p>If you <u>did not</u> meet your annual goal, to what do you attribute your lack of success?</p> | <input type="checkbox"/> Data Analysis Process <input type="checkbox"/> Data Quality <input type="checkbox"/> Appropriate Strategy <input type="checkbox"/> Identification of Root Cause <input type="checkbox"/> Quarterly Planning Process <input type="checkbox"/> Ongoing Monitoring and Interventions | <input type="checkbox"/> (Specific) Interventions <input type="checkbox"/> Annual Goals <input type="checkbox"/> CSF/ESEA Turnaround <input type="checkbox"/> Training <input type="checkbox"/> Other | <p>Please provide additional information for the selection of Other or for any selected elements.</p> | <Enter text> |
| Provide information as to how the identified elements and their impact on your success, or lack of success, will inform/influence your planning for the 2016-2017 school year. | <Enter text> | | | | | |

FIR Sustainability Questions

If your campus is identified as formerly Improvement Required (FIR), please answer the following questions regarding the sustainability of strategies that led to your success.

| | |
|---|--------------|
| What strategies, processes, and/or systems has the campus identified as making the greatest impact in moving the campus to a Met Standard rating? | <Enter text> |
| What plans are in place to sustain these strategies, processes, and/or systems? | <Enter text> |