

Draft

LCAP Year  2017-18  2018-19  2019-20

# Local Control Accountability Plan and Annual Update (LCAP) Template

## INTRODUCTION

[Addendum](#): General instructions & regulatory requirements.

Links within the document: Instructions for specific sections

[Appendix B](#): Guiding Questions: Use as prompts (not limits)

[LCFF Evaluation Rubrics](#): Essential data to support completion of this LCAP. Please analyze your LEA's full data set; specific links to the rubrics are also provided within the template.

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## 2017-20 Plan Summary

### FOCUS STATEMENT

In 1-3 short sentences, state your focus in serving your students and community. Briefly explain how your LCAP demonstrates your LEA's overall vision for student success.

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### KEY OBJECTIVES OF LCAP

Identify and briefly summarize the key objectives of this year's LCAP that are aligned with at least one of the 8 state priorities.

1

2

3

LEA Name:  
Contact Name & Title:

**DRAFT**

LEA Name:  
Email & Phone:

**SUMMARY OF PROGRESS**

Briefly describe how your progress on the focus areas has affected the development of the goals, actions/services, and expenditures described in this year's LCAP.

**INCREASED OR IMPROVED SERVICES**

If not previously addressed, identify the two to three most significant ways that you will increase or improve services for low-income students, English learners, and foster youth.

**THE GREATEST PROGRESS**

Based on a review of state and local indicators of student performance included in the evaluation rubrics, local self-assessments, stakeholder input, or other information, what progress are you most proud of and how do you plan to maintain or build upon that success?

blue/  
green

**THE GREATEST NEEDS**

Referring to the LCFF Evaluation Rubrics, address any state or local performance indicator where overall performance was in the "Red" or "Orange" performance category or received a "Not Met" or "Not Met for Two or More Years" rating. What steps are you planning to take to address these areas with the greatest need for improvement?

red/  
orange

Additionally, identify any state indicator for which performance of any student group was two or more performance levels below the "all student" performance in the LCFF evaluation rubrics. Identify any modifications to the goals, actions/services and/or expenditures within the LCAP to improve these performance levels.

# equity

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## BUDGET SUMMARY

Complete the table below. You may include additional information or more detail, including graphics.

DESCRIPTION	AMOUNT
Total General Fund Budget for LCAP Year	\$
Total Projected LCFF Funds for LCAP Year	\$
Total Funds Budgeted for Planned Actions/Services to Meet the Goals in the LCAP for LCAP Year	\$

Briefly describe any use(s) of LCFF funding not included in the LCAP.

# 2017-20 Plan Outline

Graphic 1. LCAP Continuous Improvement Cycle



The graphic above provides an **outline** for the remainder of the document that enables stakeholders to more easily navigate to the section that they want to read. Below is a brief explanation of each element.

**Mission:** Identifies the focus of the organization in serving students and community. This element is included on page 1 of the plan summary.

**Engagement:** This section describes the involvement process for the LCAP annual review and analysis.

**Goals, Actions, and Services – Plan the Future:** These elements (in conjunction with measurable outcomes and budgeted expenditures) are the plan for what is intended to occur in the future.

**Goal:** A goal is a broad statement that describes the desired impact and ultimate outcome towards which all actions and services are directed.

**Measurable Outcomes:** The measurable outcome is a metric that documents the progress towards the goal.

**Actions & Services:** The actions and services are the tangible activities that will be deployed throughout the school year to achieve the goal and measurable outcome.

**\$ (Budgeted Expenditure):** This describes the resources that enable the actions and services to be deployed.

**Annual Update – Assess the Past:** This section is a reflection on the plan and assessment of progress.

# Annual Update

Duplicate this page for each Goal.

<b>Goal 1</b>	
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State and/or Local Priorities Addressed by this goal:

STATE  1  2  3  4  5  6  7  8  
COE  9  10 LOCAL \_\_\_\_\_

## ANNUAL MEASURABLE OUTCOMES

**EXPECTED**

**ACTUAL**

1.	1.
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## PLANNED ACTIONS / SERVICES

Duplicate the following for each Action/Service or group of Action/Services.

Action **1.0**


**PLANNED**

**ACTUAL**

Actions/Services		
Expenditures		

**Analysis** Using actual annual measurable outcome data, including performance data from the evaluation rubrics, as applicable

Describe the degree to which the action(s)/service(s) were implemented (i.e., partially, in progress, completed). As applicable, identify any changes to the students or student groups served, or to the planned location of the actions/services provided.



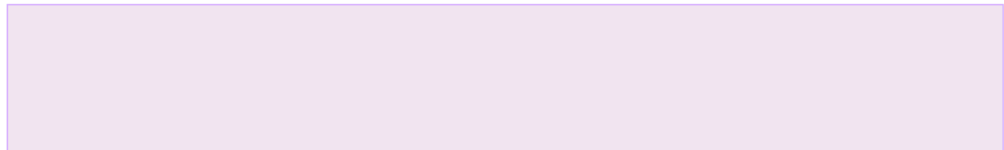
Describe the overall effectiveness of the actions/services to achieve the articulated goal as measured by the LEA.



Explain any differences between Budgeted Expenditures and Estimated Actual Expenditures.



Describe any changes made to this goal, expected outcomes, metrics, or actions and services to achieve this goal as a result of this analysis and analysis provided in the evaluation rubrics, as applicable. Identify where those changes can be found in the LCAP.



# Stakeholder Engagement

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LCAP Year

2017-18  2018-19  2019-20

## INVOLVEMENT PROCESS FOR LCAP AND ANNUAL UPDATE

How, when, and with whom did the LEA consult as part of the planning process for this LCAP/Annual Review and Analysis?

## IMPACT OF LCAP AND ANNUAL UPDATE

How did these consultations affect the LCAP for the upcoming year?

# Goals, Actions, & Services

## Strategic Planning Details and Accountability

Complete a copy of this table for each of the LEA's goals. Duplicate and expand the fields as necessary.

New       Modified       Unchanged

### Goal 1

State and/or Local Priorities Addressed by this goal:

STATE  1  2  3  4  5  6  7  8  
 COE  9  10  
 LOCAL \_\_\_\_\_

Identified Need

### EXPECTED ANNUAL MEASURABLE OUTCOMES

Metrics/Indicators	Baseline	2017-18	2018-19	2019-20

### PLANNED ACTIONS / SERVICES

Action **1.0**



All   
  Students with Disabilities   
  [Specific Student Group(s)] \_\_\_\_\_

Location(s)   
  All schools   
  Specific Schools: \_\_\_\_\_   
  Specific Gradespans: \_\_\_\_\_

Contributes to Increased or Improved Services for:   
  English Learners   
  Foster Youth   
  Low Income

Scope of Services   
 LEA-wide   
 Schoolwide   
**OR**   
 Limited to Unduplicated Student Group(s)

METRICS/INDICATORS	2017-18	2018-19	2019-20
	<input type="checkbox"/> New <input type="checkbox"/> Modified <input type="checkbox"/> Unchanged	<input type="checkbox"/> New <input type="checkbox"/> Modified <input type="checkbox"/> Unchanged	<input type="checkbox"/> New <input type="checkbox"/> Modified <input type="checkbox"/> Unchanged

**BUDGETED EXPENDITURES**

	2017-18	2018-19	2019-20
Amount			
Source			
Budget Reference			

# Demonstration of Increased or Improved Services for Unduplicated Students

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LCAP Year

2017-18  2018-19  2019-20

Estimated Supplemental and Concentration Grant Funds:

\$

Percentage to Increase or Improve Services:

%

Describe how services provided for unduplicated students are increased or improved by at least the percentage identified above, either qualitatively or quantitatively, as compared to services provided for all students in the LCAP year. Identify any of these actions/services being funded and provided on a schoolwide or LEA-wide basis. Include the required descriptions supporting the use of these funds ([see instructions](#)).