

IDEA Part B Comprehensive Coordinated Early Intervening Services (CCEIS) Plan Template

## Federal Fiscal Year (FFY) 2025 State Fiscal Year (SFY) 2026

### Division of Early Intervention and Special Education Services March 2025

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# SFY2026 CCEIS Plan Key Dates and Resources

## SFY2026 CCEIS SUBMISSION AND APPROVAL TIMELINE

*Note: Dates are subject to change.*

* **January 28, 2025:** CCEIS Monthly Content Meeting, with focus on providing guidance for developing an SFY2026 CCEIS Plan
* **February 25, 2025:** CCEIS Monthly Content Meeting, with focus on providing guidance for developing an SFY2026 CCEIS Plan
* **March 5, 2025:** Maryland State Department of Education Division of Early Intervention and Special Education Services (MSDE EI&SE ) Annual Fiscal Meeting
* **March 28, 2025:** CCEIS Monthly Content Meeting, with focus on providing guidance for developing an SFY2026 CCEIS Plan
* **April 11, 2025:** SFY2026 Self-Assessment ONLY due
  + LEAs must complete and submit the following sections ONLY from the IDEA Part B CCEIS Template (SFY2026):
    - Plan Cover Page (Template page 4),
    - Categories of Analysis of Significant Disproportionality and Programmatic Self-Assessment and Root Cause Analysis (Table 1, Description of Self-Assessment Process and Data Findings, Table 2, and Table 3 sections – Template pages 5-9)
  + LEAs must complete and submit a copy of the results of their MSDE-approved self-assessment tool (see Process Guidance document page 7 for approved tools).
* **April and May 2025:** Once received, MSDE conducts an internal review of Self-Assessment submissions, develops and shares feedback with LEA representatives, provides ongoing technical assistance for revisions or plan development (upon LEA request), provides approval of the Self-Assessment Section to move forward with development of remaining sections of the SFY2026 CCEIS Plan
* **July 15, 2025**: SFY2026 Full Plan Submission Due, pending approval of Self-Assessment Section by the MSDE EI&SE CCEIS Team
  + LEA must complete and submit all sections of the IDEA Part B CCEIS Template (SFY2026), including previously approved Self-Assessment sections (see above), Planned Response Actions (PRAs), CCEIS Plan Map, and Budget Table for Planned Response Actions
  + LEA must submit required budget documents (MSDE Grant Budget C-1-25 and Budget Detail Form)
* **July 2025 - onward:** Once received,MSDE conducts an internal review of Full Plan Submission, develops and shares feedback with LEA representatives, provides ongoing technical assistance for revisions or plan development (upon LEA request), and notifies of approval

## KEY RESOURCES FOR DEVELOPMENT OF THE SFY2026 CCEIS PLAN:

* Local Education Agency (LEA) Process Guidance for Comprehensive Coordinated Early Intervening Services (CCEIS) Plan Development (FFY2025/SFY2026) (Document)
* MSDE CCEIS Resources Website: <https://marylandpublicschools.org/programs/Pages/Special-Education/rmmb/Grants/CCEIS/index.aspx>
* CCEIS Technical Assistance Request Form: <https://forms.office.com/r/5HZTRA1BHi>

# Plan Cover Page

**Identify the Local Education Agency**:

**Contact Information for Person Submitting Form:**

* *Name/Position Title:*
* *Email:*
* *Telephone:*

**Date Submitted:**

**Local Education Agency Implementation Team and Meetings:**

* **Directions:** 
  + Identify the members of the LEA team responsible for the co-development, co-implementation, and co-evaluation of the LEA’s CCEIS Plan. Duplicate the “other” row as necessary to include all team members.
  + Provide the proposed frequency of Local Education Agency Implementation Team meetings aligned with the SFY 2026 implementation timeline next to the prompt below the table.

*NOTE: The goal of this team is to build the systemic awareness and leadership support necessary for organizational change and sustainability. Consider internal and/or external partners such as school/student support representatives, general and/or special education coordinators, school-based administrators and staff, parents/community members, etc.*

| **Name of LEA Team Member** | **Position Title/Agency of LEA Team Member** |
| --- | --- |
|  | Director of Special Education\* |
|  | Local Chief Academic Officer\*  (Assistant Superintendent of Instruction) |
|  | Local Finance Officer/Representative\* |
|  | Data Manager\* |
|  | Preschool Coordinator\* |
|  | Education Equity Coordinator\* |
|  | Other: |

*\*Denotes a required team member or designee to serve in the team member’s capacity*

**Proposed Frequency of Meetings (minimum quarterly):**

# Categories of Analysis of Significant Disproportionality

* *FOR MORE INFORMATION, CONSULT THE LEA PROCESS GUIDANCE FOR SFY2026 CCEIS PLAN DEVELOPMENT, SECTION TITLE: “CATEGORIES OF ANALYSIS OF SIGNIFICANT DISPROPORTIONALITY”*
* **Directions:** Refer to the *MSDE SFY2026 Letter of Significant Disproportionality* to complete the tables:
  + Enter Category information, race/ethnicity, risk ratios (22-23 and 23-24), and change in the appropriate table(s): Table 1a (Identification), 1c (Placement), and 1e (Disciplinary Removals)*.* Information should exactly match data populated in the Letter of Significant Disproportionality. Duplicate rows as necessary. Calculate the risk ratio needed to achieve reasonable progress and enter it into the last column.
  + If the LEA elects to proactively address any areas determined “at-risk” through the SFY26 CCEIS Plan, enter information from the Letter of Significant Disproportionality (At-risk area, race/ethnicity, risk ratios for 22-23 and 23-24, and change) in the appropriate table(s): Table 1b (Identification), 1d (Placement), and 1f (Disciplinary Removals)*.* Duplicate rows as necessary.
  + If an LEA has no information to enter for one of the below tables, it may be deleted.

## TABLE 1: CATEGORIES OF ANALYSIS (IDENTIFICATION) AND AT-RISK AREAS ADDRESSED BY SFY2026 CCEIS PLAN

### Table 1a: Categories of Analysis (Areas of Significant Disproportionality): IDENTIFICATION

| **Categories of Analysis - Identification** | **Race/Ethnicity** | **Risk Ratio: 22-23** | **Risk Ratio: 23-24** | **Change** | **Risk Ratio Needed to Achieve Reasonable Progress** |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

### Table 1b: At-Risk Areas of Significant Disproportionality Proactively Addressed through SFY2026 CCEIS Plan: IDENTIFICATION

| **At-Risk Area for Significant Disproportionality - Identification** | **Race/Ethnicity** | **Risk Ratio: 22-23** | **Risk Ratio: 23-24** | **Change** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |

## TABLE 1: CATEGORIES OF ANALYSIS (PLACEMENT) AND AT-RISK AREAS ADDRESSED BY SFY2026 CCEIS PLAN

### Table 1c: Categories of Analysis (Areas of Significant Disproportionality) - PLACEMENT

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Categories of Analysis - Placement** | **Race/Ethnicity** | **Risk Ratio: 22-23** | **Risk Ratio: 23-24** | **Change** | **Risk Ratio Needed to Achieve Reasonable Progress** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

### Table 1d: At-Risk Areas of Significant Disproportionality Proactively Addressed through SFY 2026 CCEIS Plan - PLACEMENT

| **At-Risk Area for Significant Disproportionality - Placement** | **Race/Ethnicity** | **Risk Ratio: 22-23** | **Risk Ratio: 23-24** | **Change** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |

## TABLE 1: CATEGORIES OF ANALYSIS (DISCIPLINARY REMOVALS) AND AT-RISK AREAS ADDRESSED BY SFY2026 CCEIS PLAN

### Table 1e: Categories of Analysis (Areas of Significant Disproportionality) - DISCIPLINARY REMOVALS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Categories of Analysis – Disciplinary Removals** | **Race/Ethnicity** | **Risk Ratio: 22-23** | **Risk Ratio: 23-24** | **Change** | **Risk Ratio Needed to Achieve Reasonable Progress** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

### Table 1f: At-Risk Areas of Significant Disproportionality Proactively Addressed through SFY 2026 CCEIS Plan – DISCIPLINARY REMOVALS

| **At-Risk Area for Significant Disproportionality - Disciplinary Removals** | **Race/Ethnicity** | **Risk Ratio: 22-23** | **Risk Ratio: 23-24** | **Change** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |

# Programmatic Self-Assessment and Root Cause Analysis

* *FOR MORE INFORMATION, CONSULT THE LEA PROCESS GUIDANCE FOR SFY2026 CCEIS PLAN DEVELOPMENT, SECTION TITLE: “PROCESS FOR CONDUCTING AND COMPLETING A PROGRAMMATIC SELF-ASSESSMENT AND ROOT CAUSE ANALYSIS” AND SECTION TITLE: “CCEIS PLAN SELF-ASSESSMENT GUIDING QUESTIONS”.*

## DESCRIBE THE SELF-ASSESSMENT PROCESS AND DATA FINDINGS

* **Directions**:
  + Attach/submit a copy of the completed MSDE-recommended self-assessment tool selected by the LEA.
  + In the box below, complete a narrative description of:
    - the LEA’s self-assessment process, including internal and/or external stakeholders included in the completion of the tool;
    - a summary of findings from completion of the MSDE-recommended self-assessment tool selected, as well as a comparison to previous self-assessment findings and alignment/support of findings with other data sources;
    - a summary of the data analysis reviewed/discussed by the LEA team to determine root causes of significant disproportionality, noting of any relevant trends/patterns across numerous factors (grades, schools, race/ethnicity groups, etc.), as well as how interpretation of the data led to determination of root cause(s)
    - any contributing factors to significant disproportionality and data to support, and
    - any previous and/or current interventions to address significant disproportionality and impact.
  + Ensure discussion is included relative to each of the identified Categories of Analysis/At-Risk Areas in Table 1a, 1b, 1c, 1d, 1e, and/or 1f.
  + Address the CCEIS Self-Assessment Guiding Questions to ensure all suspected areas impacting significant disproportionality have been considered. If needed, attach supplemental documents as addendums to support the self-assessment discussion.

### Description of Self-Assessment Process and Data Findings:

|  |
| --- |
|  |

## TABLE 2: IDENTIFY THE ROOT CAUSES OF SIGNIFICANT DISPROPORTIONALITY

* **Directions:** Based upon the reflective consideration of the guiding questions, data analysis, and the factors contributing to high rates of identification/placement/disciplinary removals:
  + List the Root Causes factors requiring intervening action(s) for each Category of Analysis or At-Risk Area.
  + Indicate only one Category/At-Risk area for each root cause listed. If root causes align to multiple Categories, list them separately.
  + Add rows as necessary to Table 2 to include all root cause(s) to be addressed by the SFY26 CCEIS Plan.

### Table 2: Root Causes Addressed by SFY2026 CCEIS Plan

| **Category of Analysis/At-Risk Area**  **(Identification, Placement, or Disciplinary Removals)** | **ROOT CAUSE** |
| --- | --- |
|  |  |
|  |  |

## TABLE 3: IDENTIFY SCHOOL/FEEDER PATTERNS

* **Directions**:
  + Review data from individual schools and/or feeder patterns to determine which schools or groups of schools are contributing to patterns of disproportionality. Schools/feeder patterns should be determined based on multiple data points (including, but not solely, risk ratio) which highlight school- or region-specific factors contributing to significant disproportionality.
  + List each identified school/region in Table 3a (Identification), 3b (Placement), or 3c (Disciplinary Removals). Add rows as necessary. Enter relevant data related to the identified subgroup/Category. Ensure Category of Analysis and Race/Ethnicity Group exactly match those identified in Table 1.
  + Describe the factors contributing to high rates of identification/placement/disciplinary removal for the targeted students at a specified school/region as compared to other schools/regions in the district.
  + If an LEA is not addressing one of the Categories of Analysis (Identification, Placement, and/or Disciplinary Removals) in the SFY26 CCEIS plan, the table may be deleted.

### Table 3a: Identification – Students with Disabilities and/or Particular Disability - School/Feeder Patterns

*Note: For determining trends in Identification, the LEA should consider schools with high numbers/rates of recent identifications in the targeted Category of Analysis and/or review historical data to review the practices of the initial IEP team making the student’s disability determination (which may differ from the student’s current school).*

| **School(s)/** **Region(s)** | **Identification Category of Analysis** | **Race/** **Ethnicity group** | **Students with disabilities in targeted race/ethnicity group:**   1. **Total Enrollment** 2. **Number of students with specific disability** | **All other students with disabilities:**   1. **Total Enrollment** 2. **Number of students with specific disability** | **Factors contributing to higher rates of identification of targeted students at this school/region** |
| --- | --- | --- | --- | --- | --- |
|  |  |  | A.  B. | A.  B. |  |
|  |  |  | A.  B. | A.  B. |  |

### Table 3b: Placement – Students with Disabilities and/or Particular Disability - School/Feeder Patterns

*Note: For determining trends in Placement, the LEA should consider patterns in initial placement decisions, which may have been determined by an IEP team not at the student’s current home or sending school.*

| **School(s)/** **Region(s)** | **Placement Category of Analysis** | **Race/** **Ethnicity Group** | **Students with disabilities in targeted race/ethnicity group:**   1. **Total Enrollment** 2. **Number of students in identified placement** | **All other students with disabilities:**   1. **Total Enrollment** 2. **Number of students in identified placement** | **Factors contributing to higher rates of placement decisions aligned to area of significant disproportionality of targeted students at this school/region** |
| --- | --- | --- | --- | --- | --- |
|  |  |  | A.  B. | A.  B. |  |
|  |  |  | A.  B. | A.  B. |  |

**Table 3c: Disciplinary Removals– Students with Disabilities and/or Particular Disability - School/Feeder Patterns**

| **School(s)/** **Region(s)** | **Disciplinary Removal Category of Analysis** | **Race/** **Ethnicity Group** | **Students with disabilities in targeted race/ethnicity group:**   1. **Total enrollment** 2. **Number of students with disciplinary removals in Category** | **All other students with disabilities:**   1. **Total Enrollment** 2. **Number of students with disciplinary removals in Category** | **Factors contributing to higher rates of disciplinary removals of targeted students at this school/region** |
| --- | --- | --- | --- | --- | --- |
|  |  |  | A.  B. | A.  B. |  |
|  |  |  | A.  B. | A.  B. |  |

# Planned Response Actions – (CCEIS)

* *FOR MORE INFORMATION, CONSULT THE LEA PROCESS GUIDANCE FOR SFY2026 CCEIS PLAN DEVELOPMENT, SECTION TITLE: “DEVELOPMENT OF PLANNED RESPONSE ACTION(S)”*
* **Directions**
  + For each planned activity, duplicate the PRA template. In the second column, number the PRA (ex: 1, 2, 3) and identify the Category of Analysis (Identification, Placement, or Disciplinary Removals). List the funding sources for the PRA (611, 619, or both).
  + Significant Disproportionality Section: In the second column, enter the aligned Categories of Analysis (or At-Risk Areas Addressed) and Race/Ethnicity Category from Table 1. This information must match the *MSDE* *SFY2026 Letter of Significant Disproportionality* (Example: Specific Learning Disability – Asian; Separate School or Residential – Two or More Races).
  + Root Causes section: In the second column, identify all aligned root causes from Table 2 (directly following the Narrative Self-Assessment Description).
  + Measurable Outcomes: Determine measurable outcomes, including at least one goal and at least one interim benchmark aligned to grant reporting periods.

| **Planned Response Action:** | PRA # |
| --- | --- |
| **Category of Analysis:** (IDENTIFICATION, PLACEMENT, or DISCIPLINARY REMOVALS) |  |
| **Identify the CCEIS Plan Part B funding source for this work:**  (CCEIS 611, CCEIS 619, or CCEIS 611/619 COMBINED) |  |
| **Categories of Analysis/At-Risk Areas Addressed** | **List all aligned Categories of Analysis and Race/Ethnicity Groups from Table 1:** |
| **Root Cause(s)** | **List aligned root cause(s) identified in the Self-Assessment (Table 2):**  **List any additional contributing factors/root cause(s) aligned to the PRA, if applicable:** |
| **Measurable Outcomes** | **Goal(s)** By September 30, 2027:   **Interim Benchmarks:** By January 30, 2026:  By January 30, 2027:  By September 30, 2027: |

## DATA SOURCE(S)/METHODS OF EVALUATING

* **Directions**:
  + Duplicate this template for each PRA.
  + For each goal and interim benchmark, list the data tool/source used to monitor implementation, the frequency with which the LEA monitoring team will collect and analyze data, when the LEA team will cease collecting and monitoring data., and the positions of all staff members responsible for analyzing data (ex: CCEIS Coach, School Principal, Director of Student Services, etc.)
  + Add rows as necessary to include all measurement tools outlined in the goals/interim benchmarks.

| **PRA #** | **Data Source(s)/Method(s) for Evaluating –** | **Frequency of Collection and Analysis** | **Completion Date (aligned with goal/benchmark)** | **Staff Responsible for Progress Monitoring** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |

## FOCUS AREA DESCRIPTIONS

* *FOR MORE INFORMATION, CONSULT THE LEA PROCESS GUIDANCE FOR SFY2026 CCEIS PLAN DEVELOPMENT, SECTION TITLE: “DEVELOPING CCEIS PLAN PRA FOCUS AREA DESCRIPTIONS”*
* **Directions**:
  + For each focus area description, complete the prompts to describe how the activity will address the aligned root causes. A PRA can have as many aligned focus areas as needed.
  + Duplicate the relevant focus area templates (Review and/or Adjustment to Policies, Procedures, and/or Practices, Academic or Behavioral Intervention, and/or Professional Learning) as needed. A PRA can have as many aligned focus areas as needed to address root causes identified in the Self-Assessment.
  + If an LEA is not developing an Intervention and/or Professional Learning activity, the related templates may be deleted. *NOTE: All identified areas of significant disproportionality and at-risk areas must be addressed by at least one Review and/or Adjustment to Policies, Procedures, and/or Practices.*

### Complete this section for: Review and/or Adjustments to Policies, Procedures, and/or Practices

| **REVIEW AND/OR ADJUSTMENTS TO POLICIES, PROCEDURES, AND/OR PRACTICES** | PRA # |
| --- | --- |
| **How does this activity address the root cause(s) identified?** |  |
| **What policies, procedures, and/or practices are being targeted?** |  |
| **What is the intended outcome of revisions to the policies, procedures, and/or practices and the impact on the root cause factor(s)?** |  |
| **Who is responsible for implementing this activity?**  **What school(s) are targeted for this work?** |  |
| **What is the process for communicating revisions of policies, procedures, and/or practices to address significant disproportionality to relevant stakeholders?** |  |
| **Impact Data:**   * **How will the implementation of changes be monitored (including data sources and schedule of review)?** * **How will the impact on students be monitored (include data sources and schedule of review)?** * **How will the LEA monitor the impact on adult behaviors and practices, including the implementation of policies, procedures, and practices addressed through this activity?** | * **Implementation data sources/schedule of review:** * **Impact data sources/schedule of review:** * **Process for monitoring impact on adult behaviors:** |
| **Identify the timeline (including start and end dates) for implementation and progress monitoring of this PRA activity:** | **Start Date:**  **End Date:** |

### Complete this section for: Academic or Behavior Intervention

| **ACADEMIC OR BEHAVIOR INTERVENTION** | PRA # |
| --- | --- |
| **Identify the intervention focus:**  **Academic or Behavior** |  |
| **How does the activity address the root cause(s) identified?** |  |
| **What is the intervention to be implemented?** |  |
| **Which school(s) will be involved, and why were they identified?** | * **Participating Schools:** * **Participating Schools Rationale:** |
| **How will students be selected (including process, required data, and criteria) for participation in the intervention?** |  |
| **Approximately how many students with disabilities will participate within the timeline established across all schools by race/ethnicity?** | * **Asian:** * **Black/African American:** * **Native Hawaiian or Other Pacific Islander:** * **Hispanic/Latino:** * **Two or More Races:** * **American Indian/Alaskan Native:** * **White:** |
| **Approximately how many students without disabilities will participate within the timeline established across all schools by race/ethnicity?** | * **Asian:** * **Black/African American:** * **Native Hawaiian or Other Pacific Islander:** * **Hispanic/Latino:** * **Two or More Races:** * **American Indian/Alaskan Native:** * **White:** |
| **Staff responsible for implementing the intervention:** |  |
| **How will the staff implementing the intervention be coached and trained?** |  |
| **How will staff’s fidelity of implementation of the intervention be monitored (include data sources and process)?** |  |
| **What student data will be collected and on what schedule?** |  |
| **What process will the LEA utilize to determine the impact of participation and appropriateness of continued participation in the intervention?** |  |
| **Identify the timeline (including start and end dates) for implementation and progress monitoring of this PRA activity:** | **Start Date:**  **End Date:** |

### Complete this section for: Professional Learning

| **PROFESSIONAL LEARNING** | PRA # |
| --- | --- |
| **How does the activity address the root cause(s) identified?** |  |
| **What is the intended outcome of professional learning and its impact on the root cause factor(s)?** |  |
| **Who will participate in professional learning and job-embedded coaching?**   * **Role(s) of participant(s) within the selected school/region:** * **Approximate Number of participant(s)**: * **Which schools are being identified by this capacity building activity?** * **Why were the above-named schools selected?** | **Anticipated Participants:**   * **Role(s) of participant(s) within the selected school/region:** * **Approximate Number of participant(s)**: * **Participating Schools:** * **Participating Schools Rationale:** |
| **How will the training be implemented?**   * **Anticipated Schedule:** * **Anticipated Format:** * **Approximate Duration of Training Sessions:** * **Personnel Responsible for Implementing Training:**   **How will job-embedded coaching be implemented and by whom?**   * **Anticipated Schedule**: * **Anticipated Format**: * **Approximate Duration of Each Training Session**: * **Personnel Responsible for Implementing Job-Embedded Coaching:** | **Training structure:**   * **Anticipated Schedule:** * **Anticipated Format:** * **Approximate Duration of Training Sessions:** * **Personnel Responsible for Implementing Training:**   **Job-embedded Coaching Structure:**   * **Anticipated Schedule**: * **Anticipated Format**: * **Approximate Duration of Each Training Session**: * **Personnel Responsible for Implementing Job-Embedded Coaching:** |
| **What implementation data will be collected and on what schedule?**   * **Implementation Data Sources:** * **Schedule of review for each source**:   **How will the impact on students be measured?**   * **Impact Data Sources**: * **Schedule of Review for each source**: | **Implementation Data:**   * **Implementation Data Sources:** * **Schedule of review for each source**:   **Impact Data:**   * **Impact Data Sources**: * **Schedule of Review for each source**: |
| **How will the LEA monitor the impact on adult behaviors and/practices as a result of professional learning and/or coaching?** |  |
| **Identify the timeline (including start and end dates) for implementation and progress monitoring of this PRA activity:** | **Start Date:**  **End Date:** |

# SFY26 CCEIS Plan Map

* **Directions:**
  + For each Category of Analysis (Identification, Placement, and/or Disciplinary Removals), list the aligned root cause(s) identified in the self-assessment. List each root cause on a separate row. Add rows as necessary.
  + Note the number of the PRA (ex: 1, 2, etc.) addressing each of the root causes identified in Table 2.
  + List the focus area description/activity type (Review and/or Adjustment to Policies, Procedures, and/or Practices, Academic or Behavior Intervention, OR Professional Learning) designed under the PRA to address the identified root cause.
  + To determine if the proposed CCEIS Plan is in alignment with expectations:
    - Complete the plan map as you are developing the Proposed Response Actions (PRAs)
    - Ensure the plan map below aligns with information provided in the PRAs and Focus Area Descriptions.
    - Ensure all root causes identified in Table 2 have been addressed by at least one activity.
    - Ensure each Category of Analysis and At-Risk Area identified in Table 1 has at least one Review and/or Adjustment to Policies, Procedures, and/or Practices.

|  |  |  |  |
| --- | --- | --- | --- |
| **Aligned Root Cause Identified in the Self-Assessment (Table 2)** | **Category of Analysis** | **PRA # Addressing Root Cause** | **Focus Area Description/Activity Type Addressing the Root Cause** |
|  |  |  |  |
|  |  |  |  |
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# Budget Table for Planned Response Action(s)

* *FOR MORE INFORMATION, CONSULT THE LEA PROCESS GUIDANCE FOR SFY2026 CCEIS PLAN DEVELOPMENT, SECTION TITLE: “SUPPORTING FISCAL DOCUMENTS AND PLAN APPROVALS”.*
* **Directions**:
  + Duplicate tables for each PRA. Budget Table for PRAs should follow the last focus area description under each PRA.
  + Indicate the PRA number of the aligned activities next to “PRA #:”
  + Provide detailed information on proposed expenditures such as salary and wages, number of staff persons, types of supplies and materials, and approximate unit cost/quantity to be purchased for each PRA.
  + Stipulate which funding source will be used (611 or 619). If Part B 611 and 619 funds are combined, only fill out the first table. If funds are not combined, use both tables.

## BUDGET TABLE FOR PLANNED RESPONSE ACTIONS: PART B 611 OR COMBINED PRA #:

| **Category/Program (Reference C-1-25)** | **Object** | **Description** | **Total** |
| --- | --- | --- | --- |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  | **Total Per PRA** | $ |

## BUDGET TABLE FOR PLANNED RESPONSE ACTIONS (Use only if funds are not combined) PRA #:

| **Category/Program (Reference C-1-25)** | **Object** | **Description** | **Total** |
| --- | --- | --- | --- |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  | **Total Per PRA** | $ |

# SFY26 CCEIS Plan Required Signatures

## LEA SIGNATURES

| **Position Title** | **Name (Printed)** | **Signature** | **Date** |
| --- | --- | --- | --- |
| **Local Director of Special Education** |  |  |  |
| **Local Chief Academic Officer (or Assistant Superintendent of Curriculum)** |  |  |  |
| **Local Finance Officer** |  |  |  |
| **Local Superintendent (or Deputy Superintendent)** |  |  |  |

## MSDE EI&SE SIGNATURES

| **Position Title** | **Name (Printed)** | **Signature** | **Date** |
| --- | --- | --- | --- |
| **MSDE, EI&SE Specialist** |  |  |  |
| **MSDE EI&SE , Fiscal Liaison** |  |  |  |
| **MSDE, EI&SE , Programmatic Liaison** |  |  |  |
| **MSDE, EI&SE , Resource Management and Monitoring Branch Chief** |  |  |  |