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LOS ANGELES UNIFIED SCHOOL DISTRICT
Office of the Deputy Superintendent, Educational Services


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SUBJECT: MEMORANDUM NO. Z-10
DISTRICT'S EARLY BEHAVIOR
INTERVENTION PROGRAM

DATE: July 28, 2000

DIVISION: Student Health and Human Services

APPROVED: MARIA REZA,  Administrator

For assistance contact Marleen Wong, Director, School Mental Health Services, at (818) 997-2640.

I. BACKGROUND

During the 1997-98 school year, Board members expressed concern that many students recommended for expulsion also had a significant number of previous behavior referrals that appeared to be unaddressed. In November 1998, the Board and Superintendent directed staff to create a task force charged with the analysis of District behavior intervention practices. The task force was to determine ways to provide intervention services for students before their behavior escalated to the point where an expulsion recommendation became necessary. On November 2, 1999, the Board accepted the comprehensive District Behavior Intervention Task Force's Report of findings and recommendations and asked staff to develop plans for its implementation. Subsequently, the first phase of the implementation of the Task Force Report and its accompanying budget requirements were presented to the Board, and were adopted by the Board on March 28, 2000.

II. PURPOSE

The primary purpose of this memorandum is to provide Local District Superintendents and school site administrators with the information needed to facilitate initial phase implementation of the Task Force Plan at the local school level. This memorandum describes the following items: Program Goals, Program Components, and Expected Outcomes. Schools ranked as having an Academic Performance Index in the first decile (API 1) during the 1999-2000 school year will be most directly affected by the first phase of program implementation.

III. PROGRAM GOALS

There are three primary goals of the Early Behavior Intervention Program. The first goal is prevention, which will rely on strategies that strengthen student skills and resiliency, parent involvement and health status, and support school staff. The second goal is to provide a systematized form of early intervention with emphasis on 2nd and 8th grade students at risk of retention which is the primary focus of Phase I of the implementation of the Behavior Intervention Task Force Plan. Early intervention will be provided at the onset of behaviors that place students at risk. The third goal is to provide intensive intervention services to students and their families when students exhibit behavior problems that have been resistant to previous prevention and early intervention services.

IV. PROGRAM COMPONENTS

Phase I elementary and middle schools will receive the assistance of additional District support staff, who have received specialized training to support this effort. They will assist schools as appropriate in the establishment of prevention strategies such as staff training in positive discipline strategies, parent outreach, early intervention strategies such as social skills groups and in-school medical case management for higher-risk students. In addition, all K-12 schools will be eligible to request extra assistance from one of three Student and Family Assistance Centers for students who need more intensive intervention. A brief description of the Student and Family Assistance Centers is also provided below.

A. School-Site Support for Elementary and Middle Schools

Beginning in September 2000, the 148 API 1 elementary and the 27 API 1 middle schools will be assigned the following support staff:

Elementary:

- One half-time (2-1/2 days per week) staff member with a valid Pupil Personnel Services Credential, i.e., PSA counselor, school counselor, school psychologist, psychiatric social worker
- One half-time (2-1/2 days per week) nurse
- One social services aide

Middle School:

- Addition of one counselor at each of the 27 identified middle schools
- One social services aide

B. School-site Support for High Schools

Support for high school intervention is anticipated through separate funding available through the District partnership with the County of Los Angeles.

Sixteen of the District's senior high schools are eligible for teen intervention and support programs through the **CalWORKS Community-Based Teen Services Program**. Thirteen of these identified schools fall in the state's API 1st decile ranking. The CalWORKS teen program will fund in 2000-01 school year program services that are intended to increase both the high school graduation rate and the number of secondary school students reading at grade level.

C. Student and Family Assistance Centers

When the resources for intervention at the school-site level and within the local community are found by a student, family, and/or the student's school to be insufficient to meet a student's needs, any K-12 school team may request services from one of the three Student and Family Assistance Centers.

Student and Family Assistance Centers will be staffed by multidisciplinary teams of Student Health and Human Services personnel who will work with the student, his or her family, and a school representative to provide that student with supplemental, strength-based assessments. The assessment process will include a comprehensive review of intra- and/or inter-district student records and specialized assessments by the members of the multidisciplinary team and appropriate service partners. The team will then develop a plan to meet the student's needs, focusing on the integration of school, community, and family-based interventions and supports. The Student and Family Assistance Center will also coordinate with city, county, and community agencies to obtain other resources for students.

V. EXPECTED OUTCOMES

It is expected that schools targeted by the Behavior Intervention Task Force programs will evidence the following:

- fewer office referrals
- fewer suspensions
- fewer opportunity transfers
- fewer expulsions
- fewer referrals for special education assessment.

It is expected that students who receive targeted intervention will demonstrate

- increased attendance
- improved peer and adult relationships
- improved health status
- increased achievement.

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