Self-Diagnostic Method – Analysis and Improvement

The intention of using a self-diagnostic approach is to encourage focused conversations between staff, campus or district leadership, and community members that lead to continuous improvement. The school principal or district committee leader should identify a small team to assess each area. The team should be comprised of staff whose duties are directly related to the factor, classroom teacher(s), and where possible community members. Each member of the team should complete the self-diagnostic independently, and then the team meets to discuss the evidence offered to support the level of practice for each indicator. After the team reaches a consensus about the level of practice for each indicator, the team discusses the results with the principal (or designee) who enters the scoring results. The objective is to improve professional practice through evidence supported discussion and action, not to achieve a score. The evidence and discussion are the foundations for communicating with the community.

Teams should consider the type, quality, and weight of evidence that supports the determination of levels of practice. The type of evidence or data may be qualitative or quantitative information. Ideally there are several sources of evidence that are used to "triangulate" toward a decision. Documenting and retaining the evidence is a campus choice, but does provide reference information for improving practices in the future.

Determining Campus Level Ratings

The number of factor area indicators in at each school level and at the district level is shown in the following table.

Table 1 - Count of Indicators by Factor and School Level

CSEAS Factors	EC	Elementary	Middle	HS	SHS	District
Fine Arts	5	8	22	22	25	13
Wellness and P.E.	9	13	13	13	13	6
Community and Parental Involvement	16	16	16	16	16	15
21st Century Workforce Development Program	3	5	4	6	7	18
Second Language Acquisition Program	2	4	9	8	10	9
Digital Learning Environment	7	7	7	7	7	18
Dropout Prevention Strategies	10	15	15	15	15	9
Educational Programs for Gifted and Talented Students	NA	6	6	5	5	9
Record of District and Campus Compliance with Statutory Reporting and Policy Requirements	13	13	13	13	13	12
Total	**65**	**87**	**105**	**105**	**111**	**109**

Each factor area will have an overall rating determined by the number of indicators within the diagnostic rubric and the proportion that are at or above the _expected level of practice (Level 3)_.

The number of valid indicators assessed by the rubrics will vary depending on the factor area and the campus level or for the district. The ratings are calculated using the criteria from the following table.

Valid Indicators	Number of Indicators Scored 3 or Higher			Number of Indicators Scored Below 3	
	A *	B *	C	D	F
2	2	1	1	2	2
3	3	2	1	3	3
4	4	3	2	3	3
5	5	4	3	3	4
6	6	5	4	3	4
7	7	6	5	3	4
8	7	6	5	4	5
9	8	7	6	4	5
10	9	8	7	4	6
11	10	9	8	4	7
12	11	10	8	5	7
13	12	10	9	5	8
14	13	11	10	5	8
15	14	12	11	5	9
16	14	13	11	6	10
17	15	14	12	6	10
18	16	14	13	6	11
19	17	15	14	6	11
20	18	16	14	7	12
21	19	17	15	7	13
22	20	18	15	8	13
23	21	18	16	8	14
24	22	19	17	8	14
25	23	20	18	8	15

* At least one indicator > 3 to rate Exemplary or Recognized

Rating Example

The factor area for middle school Dropout Prevention is based on 15 indicators from the diagnostic rubric. The rubrics were designed by district committees with the intention that the expected level of practice is described at Level 3 of each rubric. A middle school could receive ratings on the A-F scale based on these example combinations:

A   14 indicators rated 3 or higher AND at least one rated at 4 or 5

B   12 indicators rated 3 or higher AND at least one rated at 4 or 5

C   11 indicators rated 3

D   5 indicators rated below 3

F   12 indicators rated below 3

This example procedure may be applied to any campus level or to the district level.