

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

for STATE FORMULA GRANT PROGRAMS under the Individuals with Disabilities Education Act

**For reporting on
FFY 2021**

Pennsylvania



PART B DUE February 1, 2023

**U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202**

Introduction

Instructions

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for students with disabilities and to ensure that the State Educational Agency (SEA) and Local Educational Agencies (LEAs) meet the requirements of IDEA Part B. This introduction must include descriptions of the State's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

Intro - Indicator Data

Executive Summary

School Age Programs (Bureau of Special Education)

In FFY 2021, there were approximately 1.7 million students enrolled in Pennsylvania's public schools, with 18.6% of these students receiving special education services. The state has 500 school districts and 179 charter schools. These entities serve as the responsible Local Education Agency (LEA) for the provision of a Free Appropriate Public Education (FAPE) for students with disabilities. The Pennsylvania Department of Education (PDE) provides general supervision of all public schools, school districts, and other public education agencies within the state. The PDE also has comprehensive systems for the provision of technical assistance and professional development, as described in detail in the next sections of this report.

On June 30, 2021, Governor Tom Wolf signed Act 66 of 2021 into law. This Act permitted students who were enrolled during the 2020-21 school year to repeat their grade level in an effort to make up for any lost educational opportunities due to the pandemic. Act 66 also permits students with disabilities who were enrolled during the 2020-21 school year and turned age 21 during that school year, or between the end of the 2020-21 school year and the beginning of the 2021-22 school year, to attend a school entity during the 2021-22 school year and continue to receive services as outlined in their most recent Individualized Education Program (IEP).

During the 2021-22 school year, Pennsylvania continued to experience challenges resulting from the pandemic. On July 8, 2022, Governor Wolf signed Act 55 of 2022 into law. Among other provisions, Act 55 permits a student with a disability who was enrolled during the 2021-22 school year and turned 21 during the 2021-22 school year, or between the end of the 2021-22 and the beginning of the 2022-23 school year, to attend a school entity during the 2022-23 school year.

Also during the 2020-21 school year, extensive funding was made available to support LEAs in providing educational programming during the pandemic. Information about the Elementary and Secondary School Emergency Relief (ESSER) and the Governor's Emergency Education Relief (GEER) funds for schools in Pennsylvania is also available on the PDE website. In February 2021, the General Assembly and Governor Wolf enacted Act 1 of 2021, referred to as GEER II Funds. The Act is split into two categories of funding, Educational Assistance for Nonpublic Schools and Other. The Other funding categories are: Career and Technical Education Centers; Private Residential Rehabilitative Institutions, Approved Private Schools, Pennsylvania Chartered Schools for the Deaf and Blind; Community Colleges; and the Pennsylvania State System of Higher Education.

The Bureau of Special Education (BSE) continues to work collaboratively with the federal Office of Special Education Programs (OSEP), families, educators, and advocacy organizations to ensure delivery of a FAPE that benefits students with disabilities and protects students' rights under the Individuals with Disabilities Education Act (IDEA).

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

In FFY 2021, 59,106 preschool age children were enrolled in Pennsylvania's Part B 619 Preschool Early Intervention (EI) program. The 34 intermediate units (IUs), school districts and agencies who have responsibility for the provision of EI services provided nearly 25,815 initial evaluations of eligibility and 13,643 initial Individualized Education Plans.

The Office of Child Development and Early Learning, Bureau of Early Intervention Services and Family Supports (BEISFS) provides general supervision of both the Part C Infant Toddler and the Part B 619 Preschool EI programs. BEISFS provides a comprehensive technical assistance and professional development system that supports both the Part C and Part B 619 EI leadership, staff and families. BEISFS works in partnership with two primary stakeholder groups, the Part C State Interagency Coordinating Council (SICC) and the preschool and school age State Education Advisory Panel (SEAP).

During FFY 2021, Pennsylvania's EI program continued to respond to the challenges of the continued impact of the COVID-19 pandemic on providing EI services. EI programs used a variety of service delivery models, including teleintervention, hybrid, and face-to-face models. EI programs were challenged with the closing of early childhood programs, the setting for many preschoolers in the EI program. Retaining and recruiting Early Intervention staff also remains a concern. The Office of Child Development and Early Learning continues to partner with the PDE on the development and implementation of policy and guidance for local EI and special education programs.

Additional information related to data collection and reporting

Number of Districts in your State/Territory during reporting year

679

General Supervision System:

The systems that are in place to ensure that IDEA Part B requirements are met, e.g., monitoring, dispute resolution, etc.

School Age Programs (Bureau of Special Education)

In FFY 2021, the BSE continued to fulfill its general supervision responsibilities under IDEA. The BSE monitors all LEAs on a six-year cycle. County prisons and detention facilities, as well as other facilities where children are placed by a public entity, are also monitored on a six-year cycle. State juvenile facilities and state correctional institutions are monitored on a three-year cycle. Pennsylvania Training and Technical Assistance Network (PaTTAN) consultants, Intermediate Unit (IU) Training and Consultation (TaCs), and the BSE work collaboratively to support and ensure timely correction of noncompliance.

In addition to the Cyclical Monitoring for Continuous Improvement (CMCI) system, the BSE may conduct focused monitoring based on data and recommendations from the Special Education Advisory Panel (SEAP), other stakeholders, and when information from sources such as complaints or other dispute resolution data suggests a systemic concern.

The BSE conducts reviews when analysis of SPP/APR data indicates potential noncompliance. A description of how BSE identifies and corrects noncompliance for specific SPP/APR indicators is included in those indicator sections of this report.

When findings of noncompliance are issued, the LEA is informed of the regulation violated and must develop a Corrective Action Verification Plan (CAVP) approved by the BSE. The BSE monitors implementation of the CAVP through on-site and virtual activities. In accordance with OSEP Memorandum 09-02, the BSE's procedures require systemic correction of policies, procedures and practices, as well as verification of correction through file reviews. Updated data must demonstrate 100% compliance with regulatory requirements prior to closure of corrective action. The BSE requires student-specific correction for all citations of noncompliance where corrective action can be implemented. All corrective action must be completed within one year of notification of a finding of noncompliance.

Should an LEA fail to correct noncompliance, BSE has clearly defined enforcement procedures, as described in the Basic Education Circular titled Special Education Compliance.

The CMCI system is aligned with OSEP's Results Driven Accountability. A major focus of the state's current monitoring ensures compliance with regulatory requirements. BSE's system incorporates outcome data, such as graduation rates and Educational Benefit Review data that evaluate whether IEPs meet procedural compliance and are reasonably calculated to enable students to make progress. The CMCI system requires LEAs to develop improvement plans where SPP/APR targets are not being met.

State Complaints

The BSE has effective procedures for investigating and resolving complaints filed under IDEA. If noncompliance is determined through a complaint investigation, the BSE monitors to ensure timely correction of systemic and student-specific noncompliance.

Mediation

The Office for Dispute Resolution (ODR) contracts with highly trained, independent mediators to provide services. A majority of mediations result in agreements. During FFY 2020, mediation in PA underwent a significant change. As of March 1, 2021, if the family chooses to bring an attorney to mediation, the LEA may also bring counsel. If a family chooses not to have counsel, the LEA likewise does not bring counsel.

Due Process Complaints

The ODR uses highly trained, impartial hearing officers to conduct hearings in accordance with federal requirements. Most due process complaints are resolved prior to full adjudication. PA has procedures in place to review, identify and correct child-specific noncompliance identified in a hearing decision, and to correct policies, procedures and practices that may affect other students with disabilities within the LEA.

Resolution Process

The ODR oversees timely implementation of the resolution process. Any compliance concerns are referred to, and addressed by, the BSE.

While not required by federal regulations, the ODR provides additional resources to assist parents and LEAs to resolve disputes. These include IEP and Resolution Meeting Facilitation, Hearing Officer Settlement Conferences, the Special Education Consultline, and the Consultline Call Resolution Process. Information about these resources can be found at odr-pa.org.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

General supervision of local programs occurs on an ongoing basis. Each Preschool EI program participates in a verification visit every four years. Seven areas are reviewed during the verification visit and each includes indicators that address compliance and program management. Verification visits include: data, policy, individual child record reviews and observations of service delivery. Verification teams include state BEISFS staff, Early Intervention and Technical Assistance (EITA) staff, and peer reviewers. The utilization of verification teams allows BEISFS to adjust the number of staff conducting verification visits based on the needs of the local EI program. The team process also assists with maintaining interrater reliability. Following the verification visits, local programs develop QEPs that focus on the correction of noncompliance. BEISFS staff validate that all areas of noncompliance identified during the verification visits are corrected within a year.

The determination process uses data from the APR indicators, annual family survey, complaints, and measures of data quality. The annual process provides a rating of meets requirements, needs assistance, needs intervention, or needs substantial intervention across three areas: Strengthening Partnerships, Shared Leadership, and Systemic Implementation of Evidence-Based Practices (EBPs). Based on the determination results, local EI programs update their QEP. The determination process is also used to identify and provide differentiated levels of support to local programs. On-site visits may occur at the discretion of BEISFS if, during the verification cycle, there is a significant decrease in program performance or if individual or systemic concerns arise.

Pennsylvania uses PELICAN-EI, a comprehensive data management system, to review both individual child and statewide data. PELICAN-EI supports referral information, service coordination activities, planning information, financial management, quality measures and other reporting needs. PELICAN-EI generates evaluation and educational plan documents. The information contained in PELICAN-EI is used to create program management reports. BEISFS ensures a rigorous analysis of the data by staff on a monthly, quarterly, and annual basis.

For its complaint management system, BEISFS staff review data from complaint investigations, mediations, and due process hearings. Trends are

analyzed, training needs are identified, and improvement strategies are implemented.

Each Preschool EI program is assigned a BEISFS advisor. The advisors serve as primary contacts to Preschool EI programs and address budget, compliance, and complaint issues, policy and procedural requirements, and overall program performance. Each BEISFS advisor has ongoing contact with assigned local programs. Contacts occur throughout the year during verification visits, validation visits, training events, complaint investigations and bi-monthly leadership meetings. Attention to local programs:

- 1) allows all BEISFS staff, advisors, and statewide management staff to be aware of program concerns and issues;
- 2) provides BEISFS with the ability to fulfill requirements for a comprehensive and effective general supervision system that identifies and addresses issues of noncompliance;
- 3) ensures the correction of noncompliance within one year; and
- 4) allows for the implementation of improvement strategies and enforcement strategies in a timely manner.

Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to LEAs.

School Age Programs (Bureau of Special Education)

PaTTAN is designed to directly support the efforts and initiatives of the BSE to build the capacity of IUs and LEAs to serve students receiving special education services. Training and technical assistance is primarily tied directly to federal regulatory requirements. PaTTAN provides a continuum of evidence-based technical assistance designed to help LEAs improve outcomes for students with disabilities. PaTTAN supports schools, families, educators, students, and administrators through multiple statewide initiatives.

PaTTAN has three locations, one each in the eastern, central, and western areas of the commonwealth. In addition, the BSE funds five full-time equivalent TaCs positions within each of the state's 29 IUs. PaTTAN and IU TaCs fulfill the federal requirement for consultation and technical assistance functions. Further, because Pennsylvania has established regional PaTTAN offices, training and technical assistance is localized and highly customized through ongoing collaboration between PaTTAN and IU consultants and LEAs.

This model helps the PDE positively influence the quality of technical assistance (TA) services and professional development (PD) provided to each LEA and ensures that processes are in place to systematically collect outcome data, consistent with state and federal reporting requirements. The role of the PaTTAN consultants and the IU TaCs is based on collaboration since IU TaCs are often the first resource available to LEAs.

The BSE, through PaTTAN, provides the information and resources around TA for the IDEA grant application and the SPP/APR indicators, including the State Systemic Improvement Plan (SSIP).

PaTTAN consultants, IU TaCs, and the BSE work collaboratively to develop improvement plans based on findings through the state monitoring system.

Annually, training and TA plans are informed by data and outcomes, LEA needs, and stakeholder input. Stakeholders include LEAs, IUs, families, students with disabilities, national organizations, Parent Training and Information (PTI) centers, Community Parent Resource Centers (CPRCs), SEAP, and other agencies. Collaboration and ongoing engagement with stakeholders continue to be one of the most important mechanisms for evaluating the effectiveness and efficiency of technical assistance.

Pennsylvania's Statewide System of Support serves as both Pennsylvania's TA and PD systems. TA is based on current research and EBPs, and is aligned with the principles of OSEP's RDA.

Pennsylvania's Statewide System of Support is designed to provide a continuum of timely TA to LEAs, including:

- Educational Consultants: PaTTAN's professional staff has expertise in all aspects of special education, including the state's SSIP, autism, blindness/visual impairment, deafness-hard of hearing, deaf-blindness, intellectual disabilities, special education leadership, procedural safeguards, culturally responsive systems of practice, paraprofessionals, low incidence disabilities, behavior, literacy, mathematics, speech, school psychology, secondary transition, regulations, family engagement, inclusive practices, Multi-Tiered System of Support (MTSS), and assistive technology.
- Conferences, Institutes, and Forums: Statewide conferences, institutes, and forums are offered each year for stakeholders, including families, educators, students, and others.
- On-site and virtual guided practice TA: On-site and virtual implementation support that includes intensive coaching and mentoring is routinely included as part of TA.
- Collaboration with other agencies and Institutions of Higher Education (IHE): Pennsylvania's Statewide System of Support works in collaboration with agencies and multiple IHEs to ensure timely delivery of high-quality evidence-based TA and supports to LEAs.
- Webinars and face-to-face training sessions: PaTTAN offers webinars and on-site training and TA. Webinars are closed-captioned and transcribed, and posted on the PaTTAN website for later viewing or reading.
- Schoology Courses: External use courses that provide a variety of online training opportunities to LEAs, stakeholders, and families through learning modules. This software system is utilized as a means to incrementally train new and seasoned educators on the requirements of Indicator 13, ensuring all transition IEPs are compliant. These courses remain accessible indefinitely and at no cost to LEAs.
- Federal and state regulations: PaTTAN offers multiple TA opportunities throughout the year to support the implementation of federal and state regulations, including procedural safeguards.

- Website resources: PaTTAN maintains a robust website (www.pattan.net) with trainings, resources, and publications that address relevant topics and access to educational partners supporting student learning and achievement.

Pennsylvania has in place the MTSS Initiative which incorporates best practices in academics and behavior. The MTSS Academics model aligns EBPs in Mathematics, Literacy, Science, Technology, Engineering and Mathematics (STEM), Universal Design for Learning (UDL), and supports for English Learners. The MTSS Behavior model incorporates best practices in culturally responsive positive behavioral practices to address the social emotional learning needs of students. Taken together, MTSS Academics and Behavior serve as a statewide model for comprehensive school improvement.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

The EITA program provides statewide training and technical assistance on behalf of BEISFS, and the Pennsylvania Departments of Human Services and Education. The primary recipients of EITA training and technical assistance are the local Infant Toddler and Preschool Early Intervention programs that provide supports and services to children with developmental disabilities and their families. EITA is part of PaTTAN, which provides training and technical assistance for programs serving school age children and their families. EITA provides both statewide and regional training initiatives that are developed through the analysis of statewide data, including program verification visits and determination results, state and federal requirements, relevant research related to evidence based early intervention practices, and planning with state department staff. Statewide PD trainings are provided across the commonwealth when it is necessary to ensure a consistent message from the BEISFS. Family members are welcome participants and trainers in PD activities. Examples of current statewide training initiatives include early intervention service delivery using coaching in all settings, positive behavior intervention and supports, autism, strategies for children with low incidence disabilities, and early language and literacy.

EITA also provides assistance in the development of annual QEPs with each Preschool Early Intervention program. The Quality Enhancement Plan is based on findings from verification visits, the determination process, BEISFS priorities, EBPs, and locally identified needs. The QEP focuses on specific programmatic changes or outcomes and includes information on how change will be measured. QEPs focus on providing technical assistance and building local capacity through repeated contacts with the same persons/programs to assist with program-wide change. The plan is a flexible document that is updated at least annually or as additional information or needs arise. An EITA Consultant is assigned as the primary contact for each Preschool Early Intervention program. The assigned consultant is responsible for assisting the local Early Intervention program in providing local training as needed.

Professional Development System:

The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities.

School Age Programs (Bureau of Special Education)

The BSE, through PA's Statewide System of Support, positively impacts students with disabilities, has expertise in Results Driven Accountability, and has personnel to effectively support the SPP/APR.

This system serves as the state's TA and PD systems. The PD is delivered by PaTTAN and IU TaCs. Each initiative has a multi-year plan that ensures the activities will equip service providers with effective skills to improve results for students with disabilities.

PD includes, but is not limited to:

- PA's Standards Aligned System (SAS): SAS is a comprehensive, researched-based resource to improve student achievement. SAS identifies the elements that impact student achievement. Schools and educators are supported in the implementation of SAS via the SAS portal. More information about SAS is located at <http://pdesas.org/>.

- Pennsylvania Deaf-Blind Project: The goal of the project is to build the capacity of early intervention and school age services, schools, and families using EBPs for PD and family engagement.

- The Path to Graduation (P2G): PA's State Personnel Development Grant (SPDG) focuses on students becoming college and career ready and is aligned to the state's SSIP via regional teams that identify middle school students who are off-track for graduation. P2G is in its last year of implementation.

- Pennsylvania Positive Behavior Support Initiative: The PDE and BSE, in conjunction with PaTTAN, provide effective behavior supports to LEAs, schools, classrooms, and students.

- The Arc of PA's "Include Me From the Start" is designed to promote and expand inclusive practices for students with the most significant disabilities. Arc, in collaboration with PDE, BSE, and PaTTAN, works with student teams and families to provide training and on-site TA focused on implementing customized employment programs for transition age students.

- Principals Understanding Leadership in Special Education (PULSE): This 30-hour course is designed to build and support a cadre of building leaders. PULSE covers areas of special education that are most impacted by building principals.

- Comprehensive Planning Tool: PA's regulations require plans for PD, technology, and special education. PDE's online planning tool supports the process of identifying needs through root-cause analyses, develops strategies via EBPs, and monitors implementation.

- Training Opportunities: PaTTAN provides PD and TA targeted at improving student results. These include week-long summer institutes, PD series, webinars, and on-site and virtual assistance.

- The Pennsylvania Fellowship Program (PFP) for Special Education Leaders is designed to Attract, Prepare and Retain special education leaders as they manage compliance and balance best practices while striving to build capacity through increasing their knowledge and skills.

- Federal-State Regulations: PaTTAN works with the BSE to provide PD to assist LEAs in complying with requirements under IDEA and Pennsylvania's Chapters 14 and 711.

- **Assistive Technology (AT) and Accessible Instructional Materials:** The PaTTAN AT initiative provides supports to schools working with students who use high-tech and low-tech assistive technology and for students with complex communication needs using augmentative and alternative communication devices. PaTTAN maintains a short-term loan library including the PaTTAN Accessible Instructional Materials Center's large print and Braille text materials. PaTTAN maintains an annual census of children from birth through 21 who are legally blind and provides an annual report of eligible students to the American Printing House for the Blind.

- **Secondary Transition:** Several resources have been developed to support students and their families prepare and plan for successful transition from school to adult life. Additional information can be found on Pennsylvania's Secondary Transition website, <https://www.secondarytransition.org>.

- **Office of Vocational Resources (OVR) and BSE Memorandum of Understanding (MOU):** The MOU through OVR, PDE and the BSE clarifies that OVR and BSE support the transition of students with disabilities from high school to post-school employment-related activities and competitive, integrated employment.

- **Website Resources:** PaTTAN provides educators with publications that are proven best practices, research based, and reflect a commitment to school improvement. PaTTAN's publications all focus on improving educational results for students with disabilities. More can be found at www.pattan.net.

- **Inclusive Practices:** PaTTAN offers PD opportunities and resources to support inclusive educational practices that ensure IEP teams begin with the general education setting before considering a more restrictive environment.

- **Attract, Prepare, Retain (APR): Re-envisioning Pennsylvania's Approach to Special Education Personnel:** The PDE/BSE are addressing unfilled positions and high attrition rates among special education personnel by focusing on strategies to attract, prepare, and retain personnel. This APR project utilizes input and feedback from a cross-section of stakeholders to envision innovative practices, policies, and procedures to effectively address shortages.

- **HELIX COLLABORATIVE:** This statewide initiative provides TA/PD designed for school teams that provide instruction for students with complex instructional needs who have significant cognitive disabilities and physical and/or sensory impairments that require additional supports to ensure access to the appropriate grade level curriculum.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

Pennsylvania's PD system is designed to ensure high-quality Early Intervention services that are provided by skilled, highly qualified early intervention staff. The four core functions used by EITA to support BEISFS's management of the Early Intervention system include:

- 1) **Verification Support** - providing support to the BEISFS's verification process to ensure high-quality EI services; participation in Infant Toddler and Preschool EI verification teams; training and technical assistance support to local programs based on verification needs and QEPs; and targeted, intensive support to select programs based on the results of the verification process or program management data analysis.

- 2) **Policy Support** - providing assistance to the BEISFS in development of policies to ensure high-quality EI services and assisting local programs in translating EI policies into practice. This is accomplished through technical assistance in developing BEISFS policy documents & reports; development of statewide leadership activities; and policy-related research and materials development,

- 3) **PD support in EI core competencies** - providing PD to ensure that all EI staff have the basic competencies needed to provide high-quality EI services to children and families. This is accomplished through statewide and local workshops; online learning modules and webinars; and materials development and dissemination.

- 4) **PD support for EI EBPs:** providing PD activities to EI staff based on innovative EBPs, and designed to enhance existing high-quality EI services. This is accomplished through: statewide and local training; online learning modules and webinars; and materials development and dissemination.

Broad Stakeholder Input:

The mechanisms for soliciting broad stakeholder input on the State's targets in the SPP/APR and any subsequent revisions that the State has made to those targets, and the development and implementation of Indicator 17, the State's Systemic Improvement Plan (SSIP).

School Age Programs (Bureau of Special Education)

During FFY 2020, the BSE developed a plan to solicit broad stakeholder input for setting targets for the state's FFY 2020-2025 SPP/APR, including its SSIP. The BSE identified key stakeholder groups and others that could assist the BSE with outreach to groups and individuals. A series of public forums were held with a dedicated website that both informed stakeholders and received their input.

Beginning in March 2022, the BSE shifted its efforts from holding public forums to conducting frequent and ongoing stakeholder engagement sessions across the commonwealth designed to provide opportunities to build capacity, analyze data on current targets, recommend improvement strategies, and evaluate progress.

The PDE extensively disseminates announcements inviting in-person and/or virtual participation in these stakeholder engagement sessions. Most sessions are held during the BSE's annual topical conferences such as the PDE conference, the Special Education Leadership Academy, the National Autism Conference, and the Pennsylvania Community of Practice Transition Conference. In addition, specific sessions are provided to the state's SEAP, PTI, CPRCs, and Local Task Forces on the Right to Education. PaTTAN also disseminates announcements and supports the presentations, discussions, and stakeholder input collection. An email account has been established for ongoing stakeholder input from which BSE gathers ideas that inform SPP/APR capacity building, data analysis, evaluation, and improvement strategies.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

Pennsylvania's Early Intervention (EI) system has two primary stakeholder groups, one with a birth-5 year old focus, the State Interagency Coordinating Council (SICC), and one with a 3-21 year old focus, the Special Education Advisory Panel (SEAP). These two groups allow BEISFS to gather statewide stakeholder input across all ages and across all geographic regions. The Committee for Stakeholder Engagement (CSE), a workgroup of the SICC, focuses on the review of data and specifically impacts the coordination of the state's birth-5 year old EI system.

Membership in the SICC and CSE is composed of parents (as co-chairs), local program administrators, EI service delivery agencies, Department of Health, legislators, Children's Health Insurance Program (CHIP), American Academy of Pediatrics, higher education, and a representative of Pennsylvania's Education for Children and Youth Experiencing Homelessness Program.

BEISFS and EITA meet with SEAP, SICC, and CSE to review the annual APR data, including a review of historic data, current year data, targets, and activities implemented during the fiscal year. SEAP, SICC and CSE make recommendations for changes as needed. This information is used by BEISFS to update its APR plans.

Apply stakeholder involvement from introduction to all Part B results indicators (y/n)

NO

Number of Parent Members:

200

Parent Members Engagement:

Describe how the parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.

School Age Programs (Bureau of Special Education)

The BSE planned and led four sessions designed to provide parents Indicator-specific definitions, data, statistics, opportunities to ask clarifying questions and suggest improvement strategies. Once information was presented, the focus of these sessions shifted from coaching to facilitating member-led discussions, while making note of recommendations and other input. A specific component of these presentations displayed each Indicator's baseline data, interim and terminal targets, performance, and whether the state met the specific interim target for the reporting period. This sequential and visual illustration utilized data visualization techniques to clearly signify the difference between Indicators where data values need to decrease and where data values need to increase, and simplified the direction of desired performance. This concept is often lost with number and/or percentage only displays.

With the support of our PaTTAN partners, each of these sessions was offered synchronously in person and virtual. Participants were then able to submit written feedback using a dedicated SPP/APR email account that is monitored by a member of the SPP/APR core team. The email account was established in FFY 2020 and will remain active through FFY 2025.

The BSE conducted two meetings with the SEAP where the BSE followed a nearly identical approach as with the parent-specific engagements. In addition to 18 parents of students with a disability, the panel includes advocates, teachers, representatives of higher education, as well as related service personnel and administrators of programs for children with disabilities.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

In FFY 2021, Pennsylvania's Early Intervention program used existing stakeholder meetings as an opportunity to engage stakeholders in setting targets, analyzing data, developing improvement strategies, and evaluating progress. Meetings were held throughout FFY 2021 as a proactive opportunity to review APR data, results of implementation of improvement strategies and to review progress. Additional stakeholder meetings were held at the close of FFY 2021, once all the APR data for the entire year had been gathered and analyzed. Meeting agendas included both informational updates on data and improvement activities and opportunities for family members to provide input.

Proactive APR data review meetings were held on:

- SICC Meetings – October 21, 2021, December 2, 2021, and February 3, 2022
- CSE Meetings – April 1, 2022 and June 3, 2022
- SEAP Meetings – September 16, 2021, December 1, 2021, January 13, 2022, and April 14, 2022

Finalized APR Data review meetings were held on:

- SICC Meetings – December 1, 2022
- CSE Meetings – December 1, 2022
- SEAP Meetings – September 29, 2022 and January 18, 2023

Activities to Improve Outcomes for Children with Disabilities:

The activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities.

School Age Programs (Bureau of Special Education)

The BSE continuously focuses on building capacity of families to support improved outcomes for students with disabilities. PaTTAN has an active family engagement initiative that promotes equitable partnerships among schools, families, and communities to advance student achievement. An extensive collection of resources designed to increase capacity of diverse groups of parents, including information specific to various SPP/APR Indicators,

including the SSIP, is available at <https://www.pattan.net/Supports/Family-Engagement> and <https://www.pattan.net/Graduation-Post-Secondary-Outcomes/State-Systemic-Improvement-Plan-1/SSIP-Resources-for-Families>.

The BSE and PaTTAN incorporate information about the SPP/APR, including implementation activities and performance on targets, at the state's major annual conferences, e.g., the PDE Conference, Community of Practice Transition Conference, Multi-Tiered System of Support and Positive Behavior Support Implementers Forum, the High Expectations for Low Incidence Disabilities Conference, and the Autism Conference. Individual parents, and groups representing parents, are integral participants in all these conferences. The BSE actively collaborates with SEAP on all aspects of the SPP/APR.

Specific to increasing capacity of diverse groups of parents, the BSE presented and engaged with the State Task Force (STF) during each of their meetings to pursue diversity among parents. The BSE developed and posted extensive materials (including Spanish versions) on a dedicated website that stakeholders were encouraged to review prior to participating in forums and/or submitting online comments. The materials were intended to increase capacity of all stakeholders to actively engage in the process. The materials included videos, resource documents, and power points for each SPP/APR Indicator and are included on the internal STF website.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

Statewide and local training activities are the primary method used to increase the capacity of diverse groups of parents to support the development of APR improvement activities. Statewide training events include Early Intervention Service Delivery: Coaching Across Settings (Part C SSIP Initiative), SICCC/LICC Policy Family Forum, SICCC Meet and Greet, and Competence and Confidence: Partners in Policy Making (C2P2) trainings and meetings. These activities included updates on APR improvement activities, reviews of APR data, and provided feedback to BEISFS. Local Early Intervention programs and Local Interagency Coordinating Councils (LICCs) also offered training to families in their programs on topics related to APR Indicators. For example, local Early Intervention programs provided updates/training on social emotional development, the transition process, and Coaching Across Settings.

Soliciting Public Input:

The mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress.

School Age Programs (Bureau of Special Education)

From May 2021 until January 2022, the BSE received input for setting targets, analyzing data, developing improvement strategies, and evaluating progress. Below is a description of the mechanisms and the timelines (shown sequentially) used for this process.

- In May, three public forums, open to all stakeholders, addressed SPP/APR results Indicators (1-4A, 5, 8, 14-16).
- The additional forums listed below followed the same process to gather input and recommendations that was used at the earlier forums:
- A public forum in July 2021 focused exclusively on the SSIP.
- An evening forum in August 2021 was open exclusively to families and addressed all results Indicators.
- Six public forums were conducted by Hispanos Unidos para Ninos Exceptionales (HUNE), with support from BSE, from July through December and addressed all results Indicators.
- A forum in June with the ODR Stakeholder Council focused on dispute resolution indicators.
- Three meetings were held with SEAP from September 2021 through early January 2022 to review forum recommendations and to receive the panel's input on all Indicators.

Additionally, the dedicated website to receive stakeholder input for target setting was open from May 2021 through August 2021.

Stakeholder input received from forums and online options was extensive and diverse. Participants included parents, advocates, education administrators, including principals and special education directors, special and regular education teachers, psychologists, service coordinators, higher education personnel and others.

The BSE used this input to formulate the FFY 2020-2025 SPP/APR targets in this submission. All recommendations for improvement strategies were shared with the BSE Director and the PaTTAN system for consideration in enhancing current initiatives and/or adding new ones.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

In addition to the meetings described in the Parent Members Engagement section above, meetings were held with stakeholder groups that included Early Intervention administrators, Early Intervention providers, and early childhood agencies. These groups included the Early Intervention Providers Association, the Pennsylvania Association of Intermediate Units, Early Learning Resource Centers, and the County Commissioners Association of Pennsylvania. Over 5 meetings were held with these groups in FY 2021-22 that included opportunities for input to APR data and improvement activities.

Throughout FFY 2021, BEISFS held bi-monthly meetings with the leaders of the local Infant Toddler and Preschool Early Intervention programs. Leaders received updates on data analysis of APR indicators and were asked to provide input on improvement strategies.

Making Results Available to the Public:

The mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public.

School Age Programs (Bureau of Special Education)

The BSE annually disseminates a public announcement of where, on its website, a complete copy of the State's SPP/APR is located. Upon completion of OSEP's review of the current submission, the BSE will post its FFY 2021 SPP/APR.

On-going work with SEAP and enhanced communication with Parent Education and Advocacy Leadership (PEAL), HUNE, and other stakeholder groups continues. Opportunities for receiving feedback on improvement strategies and evaluating progress have been incorporated into all major BSE-sponsored conferences.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

As stakeholder events were completed, meeting agendas, slides summarizing APR data and feedback summaries were posted to shared meeting spaces. For example, materials from APR discussions at the SICC were posted to the Early Intervention Technical Assistance Portal at <http://www.eita-pa.org/state-interagency-coordinating-council/> prior to the meeting. Minutes from the SICC, summarizing APR discussions, were posted within 30 days of the meeting date.

Reporting to the Public

How and where the State reported to the public on the FFY 2020 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2020 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.

School Age Programs (Bureau of Special Education)

Pennsylvania complies with all federal requirements for reporting to the public. The BSE publishes annual, online Special Education Data Reports that illustrate the performance of both the state as a whole and each LEA in meeting SPP/APR targets. Reporting on FFY 2020 LEA performance was completed in accordance with 34 CFR §300.602(b)(1)(i)(A). With the onset of a new reporting cycle, this reporting now appears as a dashboard with more detailed information and data visualization than in past years, and can be found at: <https://penndata.hbg.psu.edu/Public-Reporting/SEDR-Report-Dashboard>.

The FFY 2020 SPP/APR can be located at the following websites: <https://www.education.pa.gov/K-12/Special%20Education/IDEA/Pages/StatePerformancePlan.aspx> and <https://www.pattan.net/Legal/Federal-Laws-and-Regulations/PA-Laws-and-Regulations/The-State-Performance-Plan-Annual-Performance-Repo>. The report for FFY 2021 will appear on these pages when Pennsylvania receives its state determination in June 2023.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

Pennsylvania will continue to comply with all federal requirements for annual reporting to the public. Data from the SPP/APR are available on a statewide level and for each Infant Toddler Early Intervention program.

An announcement was made about the availability of the updated SPP/APR on the Pennsylvania Early Childhood Education NEWS listserv, an email listserv that reaches Early Childhood/Early Intervention advocates across the state.

The BEISFS, in conjunction with the Pennsylvania State Data Center, developed a web-based dashboard that is used to disseminate updated SPP/APR data on OSEP indicators to the general public. The dashboard currently includes FFY 2005 through FFY 2020 data for each Infant Toddler Early Intervention program and will be updated to include the FFY 2021 data after submission of the SPP/APR, but no later than 120 days from submission of the SPP/APR. Information can be found at the website: <https://penndata.hbg.psu.edu/PublicReporting/EarlyIntervention/tabid/2534/Default.aspx>.

The dashboard also includes complete copy of Pennsylvania's SPP/APR on each Infant Toddler Early Intervention program page.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

Intro - Required Actions

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with Individualized Education Programs (IEPs) exiting special education due to graduating with a regular high school diploma. (20 U.S.C. 1416 (a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma in the numerator and the number of all youth with IEPs who exited high school (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), and compare the results to the target. Provide the actual numbers used in the calculation.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma. If the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma are different, please explain.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	86.13%

FFY	2016	2017	2018	2019	2020
Target >=	72.87%	75.15%	72.60%	73.70%	85.90%
Data	74.06%	73.64%	70.24%	70.74%	89.34%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	85.90%	85.90%	86.71%	87.52%	88.13%

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	19,324
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	6
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	42

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2,127

FFY 2021 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
19,324	21,499	89.34%	85.90%	89.88%	Met target	No Slippage

Graduation Conditions

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma.

Act 158 of 2018, which was signed into law by Governor Tom Wolf on October 24, 2018, shifted Pennsylvania’s previous reliance on high stakes testing as a graduation requirement to provide alternatives for high school students to demonstrate readiness for postsecondary success. Act 158, in conjunction with Act 6 of 2017, expanded the options for students to meet graduation requirements and demonstrate postsecondary readiness through additional pathways that more fully illustrate college, career, and community readiness.

These expanded options are:

- Keystone Proficiency Pathway (Scoring proficient or advanced on each exam); or
- Keystone Composite Pathway (earning a satisfactory composite score and at least a proficient score on at least one of the Keystone Exams, and no less than a basic score on the remaining two); or
- Alternate Assessment Pathway (successful completion of locally established grade-based requirements for academic content areas associated with each Keystone Exam, and one of several other criteria, e.g., PSAT, ACT, successful completion of a pre-apprenticeship program); or
- Evidence-Based Pathway (successful completion of locally established grade-based requirements for academic content areas associated with each Keystone Exam, and demonstration of three pieces of evidence consistent with the student’s goals and career plans, including various other criteria); or
- Career and Technical Education (CTE) Pathway (successful completion of locally established grade-based requirements for academic content areas associated with each Keystone Exam, and attainment of an industry-based competency certification related to the CTE Concentrator’s program of study, or demonstration of a high likelihood of success on an approved industry-based assessment, or readiness for continued meaningful engagement in the CTE Concentrator’s program of study).

As required under the Every Student Succeeds Act (ESSA), Pennsylvania will continue to assess all students, as described in its ESSA Consolidated State Plan, regardless of the pathway option chosen for fulfilling graduation requirements.

The statewide graduation requirements outlined in Act 158 were scheduled to take effect for the graduating class of 2022. However, due to the COVID-19 pandemic the effective date was moved to 2023. For school years 2019-20, 2020-21, and 2021-22 there was no statewide graduation requirement.

In July 2022, Governor Tom Wolf signed Act 55 of 2022 in law. Act 55 amends the Pennsylvania School Code to further assist students in meeting statewide high school graduations requirements. These changes will be further described in the FFY 2022 report. Local policies govern graduation practices. Under Act 158, all LEAs are required to notify students, parents, and guardians of the LEA’s high school graduation requirements, and must publish such requirements on the LEA’s website.

Pennsylvania has no alternate high school diploma for students with disabilities. All students graduating receive a regular high school diploma. The regular high school diploma that is awarded to students in Pennsylvania is fully aligned with the state’s academic content standards, and does not include a GED credential, certificate of attendance, or any alternative award.

Are the conditions that youth with IEPs must meet to graduate with a regular high school diploma different from the conditions noted above? (yes/no)

NO

Provide additional information about this indicator (optional)

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with IEPs who exited special education due to dropping out. (20 U.S.C. 1416 (a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), and compare the results to the target.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Use the annual event school dropout rate for students leaving a school in a single year determined in accordance with the National Center for Education Statistic's Common Core of Data.

Provide a narrative that describes what counts as dropping out for all youth. Please explain if there is a difference between what counts as dropping out for all students and what counts as dropping out for students with IEPs.

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	13.39%

FFY	2016	2017	2018	2019	2020
Target <=	10.97%	10.97%	10.97%	9.00%	12.79%
Data	12.97%	12.02%	13.55%	13.39%	10.59%

Targets

FFY	2021	2022	2023	2024	2025
Target <=	12.79%	12.79%	12.32%	11.86%	11.39%

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	19,324
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	6
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	42

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2,127

FFY 2021 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,127	21,499	10.59%	12.79%	9.89%	Met target	No Slippage

Provide a narrative that describes what counts as dropping out for all youth

State Regulations, 22 PA Code, Chapter 12, establish Pennsylvania's compulsory school attendance age as 8-17. All students must attend school during this period of their lives. A dropout is a student who, for any reason other than death, leaves school before graduation without transferring to another school/institution.

Is there a difference in what counts as dropping out for youth with IEPs? (yes/no)

NO

If yes, explain the difference in what counts as dropping out for youth with IEPs.

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS185 and 188.

Measurement

A. Participation rate percent = [(# of children with IEPs participating in an assessment) divided by the (total # of children with IEPs enrolled during the testing window)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The participation rate is based on all children with IEPs, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3A: Provide separate reading/language arts and mathematics participation rates for children with IEPs for each of the following grades: 4, 8, & high school. Account for ALL children with IEPs, in grades 4, 8, and high school, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	71.36%
Reading	B	Grade 8	2020	60.63%
Reading	C	Grade HS	2020	51.31%
Math	A	Grade 4	2020	71.67%
Math	B	Grade 8	2020	60.35%
Math	C	Grade HS	2020	74.01%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

ESSA required that each state education agency develop and submit a State Plan that details how the state education agency (SEA) will implement requirements. The Department sought input from parents and families, educators, community leaders, education advocates, researchers, experts, policymakers, and other individuals throughout this process. Pennsylvania's Consolidated State Plan indicates that school-level participation rates will be published within the state's annual public-facing school progress reports. Schools with participation rates below 95 percent will be required to develop and implement state-approved improvement plans, and complete a school- or LEA-level assessment audit.

Please refer to the Broad Stakeholder Input section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

04/05/2023

Reading Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	26,208	28,270	22,549
b. Children with IEPs in regular assessment with no accommodations	6,930	7,561	8,450
c. Children with IEPs in regular assessment with accommodations	14,594	14,232	8,024
d. Children with IEPs in alternate assessment against alternate standards	2,444	2,299	2,032

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

04/05/2023

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	26,200	28,243	14,565
b. Children with IEPs in regular assessment with no accommodations	7,170	7,944	4,278
c. Children with IEPs in regular assessment with accommodations	14,395	13,720	4,946
d. Children with IEPs in alternate assessment against alternate standards	2,444	2,298	2,008

*The children with IEPs count excludes children with disabilities who were reported as exempt due to significant medical emergency in row a for all the prefilled data in this indicator.

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	23,968	26,208	71.36%	95.00%	91.45%	Did not meet target	No Slippage
B	Grade 8	24,092	28,270	60.63%	95.00%	85.22%	Did not meet target	No Slippage
C	Grade HS	18,506	22,549	51.31%	95.00%	82.07%	Did not meet target	No Slippage

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	24,009	26,200	71.67%	95.00%	91.64%	Did not meet target	No Slippage
B	Grade 8	23,962	28,243	60.35%	95.00%	84.84%	Did not meet target	No Slippage
C	Grade HS	11,232	14,565	74.01%	95.00%	77.12%	Did not meet target	No Slippage

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

Student participation and performance data for all students, including students with disabilities, on the reading/language arts and mathematics assessments in grades 3 thru 8 against grade level academic achievement standards can be found at:

•<https://www.education.pa.gov/DataAndReporting/Assessments/Pages/PSSA-Results.aspx> .

Student participation and performance data for all students, including students with disabilities, on the literature and Algebra I assessments in high school against grade level academic achievement standards can be found at:

•<https://www.education.pa.gov/DataAndReporting/Assessments/Pages/Keystone-Exams-Results.aspx> .

Student participation and performance data for all students, including students with disabilities, on the reading/language arts and mathematics assessments in grades 3 thru 8 and high school against alternate academic achievement standards can be found at:

•<https://www.education.pa.gov/K-12/Special%20Education/Assessments/Pages/Statewide-Assessment-Performance-and-Participation-for-Students-with-Disabilities.aspx> .

State Assessment Performance of Students with Disabilities by Accommodation can also be found at:

•<https://www.education.pa.gov/K-12/Special%20Education/Assessments/Pages/Statewide-Assessment-Performance-and-Participation-for-Students-with-Disabilities.aspx> .

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

Response to actions required in FFY 2020 SPP/APR

On 22 July, 2022, BSE provided an additional link to OSEP that demonstrated that the PDE has reported to the public, for FFY 2020, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). This link was in addition to the links that were provided during the

submission of the FFY 2020 SPP/APR.

On 7 October, 2022, in a letter from OSEP to the director of the BSE, it was stated that on 20 September, 2022, OSEP reviewed the following links provided by the BSE:

- https://public.tableau.com/app/profile/padeptofed/viz/ESSA_Dashboard_2021/2018AnnualMeaningfulDifferentiationCSIA-TSI

- <https://www.education.pa.gov/Documents/K-12/Special%20Education/Assessment/Statewide%20Assessment%20Performance%20by%20Students%20with%20IEPs%20by%20Accommodation%20-%202021.pdf>, and

- ESSA_Dashboard_2021 by Pennsylvania Department of Education.

Based upon its review, OSEP determined that the State corrected the noncompliance with the requirements of 34 CFR §300.160(f) identified in OSEP's response, and that no further action was required.

3A - OSEP Response

3A - Required Actions

Indicator 3B: Proficiency for Children with IEPs (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3B. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

Measurement

B. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the regular assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3B: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the regular assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	22.80%
Reading	B	Grade 8	2020	15.03%
Reading	C	Grade HS	2020	13.16%
Math	A	Grade 4	2020	13.29%
Math	B	Grade 8	2020	3.57%
Math	C	Grade HS	2020	19.79%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	25.79%	28.78%	31.77%	34.76%	37.75%
Reading	B >=	Grade 8	18.28%	21.53%	24.78%	28.03%	31.28%
Reading	C >=	Grade HS	15.93%	18.70%	21.47%	24.24%	27.01%
Math	A >=	Grade 4	16.44%	19.59%	22.74%	25.89%	29.04%
Math	B >=	Grade 8	7.22%	10.87%	14.52%	18.17%	21.82%
Math	C >=	Grade HS	22.86%	25.93%	29.00%	32.07%	35.14%

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	21,524	21,793	16,474
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,652	1,820	2,068
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,721	2,077	1,635

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	21,565	21,664	9,224
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,372	507	689
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,491	335	425

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	4,373	21,524	22.80%	25.79%	20.32%	Did not meet target	Slippage
B	Grade 8	3,897	21,793	15.03%	18.28%	17.88%	Did not meet target	No Slippage
C	Grade HS	3,703	16,474	13.16%	15.93%	22.48%	Met target	No Slippage

Provide reasons for slippage for Group A, if applicable

While statewide test participation increased in 2021-22, it remained historically low. Low test participation may negatively impact proficiency calculations in multiple ways. First, it is unlikely that participants in the assessments comprised a representative sample of the general student population. Biased sampling could lead to artificially low observed proficiency rates. Furthermore, Federal ESSA law requires that in schools where participation rates are below 95%, subsequent non-tested eligible testers be reported as non-proficient. This rule explicitly penalizes schools with low participation rates, making proficiency seem artificially low.

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	3,863	21,565	13.29%	16.44%	17.91%	Met target	No Slippage
B	Grade 8	842	21,664	3.57%	7.22%	3.89%	Did not meet target	No Slippage
C	Grade HS	1,114	9,224	19.79%	22.86%	12.08%	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

Federal and state testing waivers exempted all students enrolled in a Keystone trigger-course in the 2019-20 school year from accountability calculations. Because Keystone Exams are “banked” for reporting in grade 11, the waivers are likewise banked and remove students from the calculations only when they reach 11th grade. Assessment results were impacted in 2021-22 for schools that provide Keystone Algebra I in 9th grade. The state has seen a substantial or unusual change in displayed assessment proficiency rates from previous years. These may not reflect actual changes in overall schoolwide student performance, but rather reflect non-representative sampling that occurred as a result of waivers.

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

Student participation and performance data for all students, including students with disabilities, on the reading/language arts and mathematics assessments in grades 3 thru 8 against grade level academic achievement standards can be found at:

•<https://www.education.pa.gov/DataAndReporting/Assessments/Pages/PSSA-Results.aspx> .

Student participation and performance data for all students, including students with disabilities, on the literature and Algebra I assessments in high school against grade level academic achievement standards can be found at:

•<https://www.education.pa.gov/DataAndReporting/Assessments/Pages/Keystone-Exams-Results.aspx> .

Student participation and performance data for all students, including students with disabilities, on the reading/language arts and mathematics assessments in grades 3 thru 8 and high school against alternate academic achievement standards can be found at:

•<https://www.education.pa.gov/K-12/Special%20Education/Assessments/Pages/Statewide-Assessment-Performance-and-Participation-for-Students-with-Disabilities.aspx> .

State Assessment Performance of Students with Disabilities by Accommodation can also be found at:

•<https://www.education.pa.gov/K-12/Special%20Education/Assessments/Pages/Statewide-Assessment-Performance-and-Participation-for-Students-with-Disabilities.aspx> .

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

Response to actions required in FFY 2020 SPP/APR

On 22 July, 2022, BSE provided an additional link to OSEP that demonstrated that the PDE has reported to the public, for FFY 2020, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). This link was in addition to the links that were provided during the submission of the FFY 2020 SPP/APR.

On 7 October, 2022, in a letter from OSEP to the director of the BSE, it was stated that on 20 September, 2022, OSEP reviewed the following links provided by the BSE:

• https://public.tableau.com/app/profile/padepstofed/viz/ESSA_Dashboard_2021/2018AnnualMeaningfulDifferentiationCSIA-TSI

• <https://www.education.pa.gov/Documents/K-12/Special%20Education/Assessment/Statewide%20Assessment%20Performance%20by%20Students%20with%20IEPs%20by%20Accommodation%20-%202021.pdf>, and

• ESSA_Dashboard_2021 by Pennsylvania Department of Education.

Based upon its review, OSEP determined that the State corrected the noncompliance with the requirements of 34 CFR §300.160(f) identified in OSEP's response, and that no further action was required.

3B - OSEP Response

3B - Required Actions

Indicator 3C: Proficiency for Children with IEPs (Alternate Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3C. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

Measurement

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against alternate academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the alternate assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3C: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the alternate assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	28.94%
Reading	B	Grade 8	2020	34.30%
Reading	C	Grade HS	2020	38.40%
Math	A	Grade 4	2020	52.14%
Math	B	Grade 8	2020	10.96%
Math	C	Grade HS	2020	36.24%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	28.94%	28.94%	28.94%	28.94%	29.94%
Reading	B >=	Grade 8	34.30%	34.30%	34.30%	34.30%	35.30%
Reading	C >=	Grade HS	38.40%	38.40%	38.40%	38.40%	39.40%
Math	A >=	Grade 4	52.14%	52.14%	52.14%	52.14%	53.14%
Math	B >=	Grade 8	10.96%	10.96%	10.96%	10.96%	11.96%
Math	C >=	Grade HS	36.24%	36.24%	36.24%	36.24%	37.24%

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

FFY 2021 Data Disaggregation from ED Facts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (ED Facts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	2,444	2,299	2,032
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	546	727	752

Data Source:

SY 2021-22 Assessment Data Groups - Math (ED Facts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	2,444	2,298	2,008
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	1,095	265	610

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	546	2,444	28.94%	28.94%	22.34%	Did not meet target	Slippage
B	Grade 8	727	2,299	34.30%	34.30%	31.62%	Did not meet target	Slippage
C	Grade HS	752	2,032	38.40%	38.40%	37.01%	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

Post-pandemic circumstances (e.g., staff shortages, variability in student attendance, continued remote learning for many students) occurred during the testing cycle. This created an atypical instruction and assessment period for students across the state and nationwide. In addition, PA implemented a new alternate assessment with a new vendor the previous year, requiring teachers and students to be acclimated to a new test design and administration procedures in addition to COVID-related circumstances. A variability in participation rates of students with the most significant cognitive disabilities from FFY 2020 to FFY 2021 is also a contributing factor to a decline in performance data for the alternate assessment. In FFY 2020, some of the state's most vulnerable students continued to be educated in fully remote environments and were unable to participate in the assessment. The FFY

2021 testing cycle showed an increase in participation rates in the alternate assessment compared to the previous year, as more students returned to in-person instruction. Therefore, some of the most complex learners were now included in the performance assessment data for the first-time after the pandemic.

Additionally, the vendor made a statistical adjustment to the cut points in response to test blueprint changes that had been made in the 2019-20 school year. Due to cancellation of testing in FFY 2019 and a subsequent year with major disruptions in instruction and assessment, the final adjustments to cut points were postponed until the FFY 2021 testing cycle.

Provide reasons for slippage for Group B, if applicable

Post-pandemic circumstances (e.g., staff shortages, variability in student attendance, continued remote learning for many students) occurred during the testing cycle. This created an atypical instruction and assessment period for students across the state and nationwide. In addition, PA implemented a new alternate assessment with a new vendor the previous year, requiring teachers and students to be acclimated to a new test design and administration procedures in addition to COVID-related circumstances. A variability in participation rates of students with the most significant cognitive disabilities from FFY 2020 to FFY 2021 is also a contributing factor to a decline in performance data for the alternate assessment. In FFY 2020, some of the state’s most vulnerable students continued to be educated in fully remote environments and were unable to participate in the assessment. The FFY 2021 testing cycle showed an increase in participation rates in the alternate assessment compared to the previous year, as more students returned to in-person instruction. Therefore, some of the most complex learners were now included in the performance assessment data for the first-time after the pandemic.

Additionally, the vendor made a statistical adjustment to the cut points in response to test blueprint changes that had been made in the 2019-20 school year. Due to cancellation of testing in FFY 2019 and a subsequent year with major disruptions in instruction and assessment, the final adjustments to cut points were postponed until the FFY 2021 testing cycle.

Provide reasons for slippage for Group C, if applicable

Post-pandemic circumstances (e.g., staff shortages, variability in student attendance, continued remote learning for many students) occurred during the testing cycle. This created an atypical instruction and assessment period for students across the state and nationwide. In addition, PA implemented a new alternate assessment with a new vendor the previous year, requiring teachers and students to be acclimated to a new test design and administration procedures in addition to COVID-related circumstances. A variability in participation rates of students with the most significant cognitive disabilities from FFY 2020 to FFY 2021 is also a contributing factor to a decline in performance data for the alternate assessment. In FFY 2020, some of the state’s most vulnerable students continued to be educated in fully remote environments and were unable to participate in the assessment. The FFY 2021 testing cycle showed an increase in participation rates in the alternate assessment compared to the previous year, as more students returned to in-person instruction. Therefore, some of the most complex learners were now included in the performance assessment data for the first-time after the pandemic.

Additionally, the vendor made a statistical adjustment to the cut points in response to test blueprint changes that had been made in the 2019-20 school year. Due to cancellation of testing in FFY 2019 and a subsequent year with major disruptions in instruction and assessment, the final adjustments to cut points were postponed until the FFY 2021 testing cycle.

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	1,095	2,444	52.14%	52.14%	44.80%	Did not meet target	Slippage
B	Grade 8	265	2,298	10.96%	10.96%	11.53%	Met target	No Slippage
C	Grade HS	610	2,008	36.24%	36.24%	30.38%	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

Post-pandemic circumstances (e.g., staff shortages, variability in student attendance, continued remote learning for many students) occurred during the testing cycle. This created an atypical instruction and assessment period for students across the state and nationwide. In addition, PA implemented a new alternate assessment with a new vendor the previous year, requiring teachers and students to be acclimated to a new test design and administration procedures in addition to COVID-related circumstances. A variability in participation rates of students with the most significant cognitive disabilities from FFY 2020 to FFY 2021 is also a contributing factor to a decline in performance data for the alternate assessment. In FFY 2020, some of the state’s most vulnerable students continued to be educated in fully remote environments and were unable to participate in the assessment. The FFY 2021 testing cycle showed an increase in participation rates in the alternate assessment compared to the previous year, as more students returned to in-person instruction. Therefore, some of the most complex learners were now included in the performance assessment data for the first-time after the pandemic.

Additionally, the vendor made a statistical adjustment to the cut points in response to test blueprint changes that had been made in the 2019-20 school year. Due to cancellation of testing in FFY 2019 and a subsequent year with major disruptions in instruction and assessment, the final adjustments to cut points were postponed until the FFY 2021 testing cycle.

cut points were postponed until the FFY 2021 testing cycle.

Provide reasons for slippage for Group C, if applicable

Post-pandemic circumstances (e.g., staff shortages, variability in student attendance, continued remote learning for many students) occurred during the testing cycle. This created an atypical instruction and assessment period for students across the state and nationwide. In addition, PA implemented a new alternate assessment with a new vendor the previous year, requiring teachers and students to be acclimated to a new test design and administration procedures in addition to COVID-related circumstances. A variability in participation rates of students with the most significant cognitive disabilities from FFY 2020 to FFY 2021 is also a contributing factor to a decline in performance data for the alternate assessment. In FFY 2020, some of the state's most vulnerable students continued to be educated in fully remote environments and were unable to participate in the assessment. The FFY 2021 testing cycle showed an increase in participation rates in the alternate assessment compared to the previous year, as more students returned to in-person instruction. Therefore, some of the most complex learners were now included in the performance assessment data for the first-time after the pandemic.

Additionally, the vendor made a statistical adjustment to the cut points in response to test blueprint changes that had been made in the 2019-20 school year. Due to cancellation of testing in FFY 2019 and a subsequent year with major disruptions in instruction and assessment, the final adjustments to cut points were postponed until the FFY 2021 testing cycle.

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

Student participation and performance data for all students, including students with disabilities, on the reading/language arts and mathematics assessments in grades 3 thru 8 against grade level academic achievement standards can be found at:

•<https://www.education.pa.gov/DataAndReporting/Assessments/Pages/PSSA-Results.aspx> .

Student participation and performance data for all students, including students with disabilities, on the literature and Algebra I assessments in high school against grade level academic achievement standards can be found at:

•<https://www.education.pa.gov/DataAndReporting/Assessments/Pages/Keystone-Exams-Results.aspx> .

Student participation and performance data for all students, including students with disabilities, on the reading/language arts and mathematics assessments in grades 3 thru 8 and high school against alternate academic achievement standards can be found at:

•<https://www.education.pa.gov/K-12/Special%20Education/Assessments/Pages/Statewide-Assessment-Performance-and-Participation-for-Students-with-Disabilities.aspx> .

State Assessment Performance of Students with Disabilities by Accommodation can also be found at:

•<https://www.education.pa.gov/K-12/Special%20Education/Assessments/Pages/Statewide-Assessment-Performance-and-Participation-for-Students-with-Disabilities.aspx> .

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

Response to actions required in FFY 2020 SPP/APR

On 22 July, 2022, BSE provided an additional link to OSEP that demonstrated that the PDE has reported to the public, for FFY 2020, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). This link was in addition to the links that were provided during the submission of the FFY 2020 SPP/APR.

On 7 October, 2022, in a letter from OSEP to the director of the BSE, it was stated that on 20 September, 2022, OSEP reviewed the following links provided by the BSE:

- https://public.tableau.com/app/profile/padepstofed/viz/ESSA_Dashboard_2021/2018AnnualMeaningfulDifferentiationCSIA-TSI
- <https://www.education.pa.gov/Documents/K-12/Special%20Education/Assessment/Statewide%20Assessment%20Performance%20by%20Students%20with%20IEPs%20by%20Accommodation%20-%202021.pdf>, and
- ESSA_Dashboard_2021 by Pennsylvania Department of Education.

Based upon its review, OSEP determined that the State corrected the noncompliance with the requirements of 34 CFR §300.160(f) identified in OSEP's response, and that no further action was required.

3C - OSEP Response

3C - Required Actions

Indicator 3D: Gap in Proficiency Rates (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3D. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2021-2022 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2021-2022 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2021-2022 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2021-2022 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	33.65
Reading	B	Grade 8	2020	37.41
Reading	C	Grade HS	2020	36.05
Math	A	Grade 4	2020	22.04
Math	B	Grade 8	2020	18.35
Math	C	Grade HS	2020	42.45

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	32.25	30.85	29.45	28.05	26.65
Reading	B <=	Grade 8	35.81	34.21	32.61	31.01	29.41
Reading	C <=	Grade HS	34.35	32.65	30.95	29.25	27.55
Math	A <=	Grade 4	21.04	20.04	19.04	18.04	17.04
Math	B <=	Grade 8	17.45	16.55	15.65	14.75	13.85
Math	C <=	Grade HS	40.75	39.05	37.35	35.65	33.95

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

FFY 2021 Data Disaggregation from EDFacts**Data Source:**

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	116,616	121,172	103,918
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	21,524	21,793	16,474
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	52,170	61,205	61,650
d. All students in regular assessment with accommodations scored at or above proficient against grade level	8,315	5,793	5,442
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,652	1,820	2,068
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,721	2,077	1,635

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	117,320	121,183	59,957
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	21,565	21,664	9,224
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	44,021	25,841	32,235
d. All students in regular assessment with accommodations scored at or above proficient against grade level	4,999	1,152	5,741
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,372	507	689
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,491	335	425

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	20.32%	51.87%	33.65	32.25	31.55	Met target	No Slippage
B	Grade 8	17.88%	55.29%	37.41	35.81	37.41	Did not meet target	No Slippage
C	Grade HS	22.48%	64.56%	36.05	34.35	42.08	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

Federal and state testing waivers exempted all students enrolled in a Keystone trigger-course in the 2019-20 school year from accountability calculations. Because Keystone Exams are “banked” for reporting in grade 11, the waivers are likewise banked and remove students from the calculations only when they reach 11th grade. Assessment results were impacted in 2021-22 for schools that provide Keystone English Literature in 9th grade. The state has seen a substantial or unusual change in displayed assessment proficiency rates from previous years. These may not reflect actual changes in overall schoolwide student performance, but rather reflect non-representative sampling that occurred as a result of waivers.

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	17.91%	41.78%	22.04	21.04	23.87	Did not meet target	Slippage
B	Grade 8	3.89%	22.27%	18.35	17.45	18.39	Did not meet target	No Slippage
C	Grade HS	12.08%	63.34%	42.45	40.75	51.26	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

While statewide test participation increased in 2021-22, it remained historically low. Low test participation may negatively impact proficiency calculations. In schools where participation rates are below 95%, subsequent non-tested eligible testers are federally-mandated to be reported as non-proficient. This effect occurs in the All Students group and the group of students with disabilities to varying degrees, especially since performance of students with disabilities is reflected in the calculations for both groups.

Provide reasons for slippage for Group C, if applicable

Federal and state testing waivers exempted all students enrolled in a Keystone trigger-course in the 2019-20 school year from accountability calculations. Because Keystone Exams are “banked” for reporting in grade 11, the waivers are likewise banked and remove students from the calculations only when they reach 11th grade. Assessment results were impacted in 2021-22 for schools that provide Keystone Algebra I in 9th grade. The state has seen a substantial or unusual change in displayed assessment proficiency rates from previous years. These may not reflect actual changes in overall schoolwide student performance, but rather reflect non-representative sampling that occurred as a result of waivers.

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

- A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and
- B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Data Source

State discipline data, including State's analysis of State's Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

Measurement

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) that have a significant discrepancy, as defined by the State, in the rates of suspensions and expulsions for more than 10 days during the school year of children with IEPs) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable))] times 100.

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

- The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or
- The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts that met the minimum n and/or cell size requirement, if applicable). If significant discrepancies occurred, describe how the State educational agency reviewed and, if appropriate, revised (or required the affected local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with applicable requirements.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2016	1.34%

FFY	2016	2017	2018	2019	2020
Target <=	0.00%	1.97%	1.97%	1.00%	1.82%
Data	1.34%	1.79%	2.22%	2.80%	1.04%

Targets

FFY	2021	2022	2023	2024	2025
Target <=	1.82%	1.66%	1.66%	1.34%	1.00%

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

FFY 2021 SPP/APR Data

Has the state established a minimum n/cell-size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.

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Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	1.04%	1.82%		N/A	N/A

Choose one of the following comparison methodologies to determine whether significant discrepancies are occurring (34 CFR §300.170(a))

Compare the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the State

State's definition of "significant discrepancy" and methodology

Pennsylvania determined that an LEA had a significant discrepancy by comparing the suspension/expulsion rates for children with IEPs among LEAs in the state. To establish baseline, Pennsylvania calculated the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs for LEAs within the state, inclusive of all school districts and charter schools. Pennsylvania determined the state's baseline rate to be 0.55%. A school district or charter school with a total enrollment of students with disabilities of 10 or more is determined to be significantly discrepant if its rate is two times or greater than 0.55%.

The state has established a minimum n size of 10 students with disabilities required to be suspended for an LEA to be included in the calculation of a significant discrepancy.

Provide additional information about this indicator (optional)

PA believes that it has a sound methodology in place that is reasonably designed to determine if significant discrepancies are occurring in long-term suspensions and expulsions of children with disabilities. This methodology has served the state well in prior years in identifying individual LEAs with significant discrepancies. In the 2020-21 school year for which these data are reported, LEAs were in the first full year of the coronavirus pandemic. To ensure student safety during this time, various educational delivery models were developed to serve all students, including students with disabilities. These included regular in-person instruction, but also included a hybrid model where students attended school in-person part time and attended virtually the remaining time. Some LEAs provided instruction to students using only a virtual delivery model. Since a large proportion of students were not physically attending in-person instruction full time, suspension and expulsion rates declined. This caused the methodology used to identify LEAs with significant discrepancies to appear to be ineffective. However, with no LEA suspending more than eight students the entire school year, it functioned as expected. The reduction in suspensions and expulsions across the state caused every LEA to be excluded from the analysis for this Indicator since none met the minimum n size of 10. For the 2021-22 school year, LEAs in PA generally returned to in-person instruction and preliminary suspension and expulsion data confirms that the methodology continues to be reasonably designed and has identified LEAs with significant discrepancies in long-term suspensions and expulsions of children with disabilities.

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

During the 2020-21 school year, only 212 students with disabilities were suspended in Pennsylvania for 10 or more days. This appears to be an effect of the various learning options LEAs used during the COVID pandemic (e.g., in-person, virtual, hybrid, etc.).

These suspensions were distributed across LEAs to the extent that NO LEA suspended more than eight students. As a result, the minimum n of 10 students needed to calculate a significant discrepancy for any one LEA was not met.

Therefore, no on-site reviews were required for Indicator 4A.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	2	0	0

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

The BSE has verified through on-site reviews of policies, procedures, and practices, as well as reviews of updated data from student files, that the two LEAs have correctly implemented the specific regulatory requirements and have corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02. These reviews consisted of the examination of policies, procedures, and practices, updated data from student files, as well as data collected from the state monitoring system. In addition, the verification included an examination of the extent of the noncompliance and, working with the LEA, used root cause analyses to determine the contributing factors, ensuring that meaningful strategies were developed to confirm timely correction. These analyses focused on infrastructure issues such as policies, procedures, funding, TA, supervision, data, personnel, and provider practices.

Describe how the State verified that each individual case of noncompliance was corrected

In accordance with OSEP Memorandum 09-02, the BSE’s procedures required systemic correction of policies, procedures, and practices, as well as verification of correction through file reviews. Updated data demonstrated 100% compliance with regulatory requirements prior to closure of corrective action. The BSE required student-specific corrective action for all citations of noncompliance where corrective action could be implemented. This was done through the Individual Corrective Action Plan (ICAP) component of the overall CAVP web-based system. In the ICAP, the BSE reviewed updated data for each student whose file included a finding of noncompliance to ensure correction (unless the student is no longer within the jurisdiction of the LEA); additionally, BSE reviewed a new sample of student files to verify systemic compliance. Follow-up reviews verified that updated data demonstrated 100% compliance for each student whose file included a finding of noncompliance to ensure correction of each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4A - Prior FFY Required Actions

The State must report, in the FFY 2021 SPP/APR, on the correction of noncompliance that the State identified in FFY 2020 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Response to actions required in FFY 2020 SPP/APR

The BSE has verified through on-site reviews of policies, procedures, and practices, as well as reviews of updated data from student files, that the seven LEAs identified in FFY 2020 are now correctly implementing the specific regulatory requirements and have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02.

During the onsite reviews for each of the seven LEAs, the BSE looked for evidence that teacher and administrators:

- 1) understand the regulations, including definitions and data reporting, related to suspending student with IEPs;
- 2) know what data must be reported to PDE/OSEP, and the implications of inaccurate data collection/reporting;
- 3) ensure data accuracy, look for patterns and trends, and report data in a timely manner;
- 4) review special education discipline data reports before submission;
- 5) develop a range of disciplinary options to suspensions;
- 6) implement strategies that keep students actively engaged in instruction;
- 7) utilize evidence-based classroom management strategies;
- 8) supervise students in non-classroom settings;

9) advance EBPs, including family-school partnerships, as part of a system of positive behavioral support for all students; and;

10) disaggregate, analyze, and use academic and behavior data to identify appropriate intervening strategies for students at risk.

Each LEA was required to revise policies, procedures, and/or practices to bring them into compliance. This was verified by BSE during a follow-up comprehensive review where all sources of noncompliance were found to be corrected to 100% compliance. Lastly, the BSE verified that all corrective action of noncompliance in these seven LEAs was completed within timelines.

In accordance with OSEP Memorandum 09-02, the BSE's procedures verified systemic correction of policies, procedures, and practices, as well as verification of correction through file reviews for each individual case within the seven LEAs identified in FFY 2020. Updated data demonstrated 100% compliance with regulatory requirements prior to closure of corrective action. The BSE also verified student-specific corrective action for all citations of noncompliance where corrective action was implemented. This was done through the ICAP component of the overall CAVP web-based system. In the ICAP, the BSE reviewed updated data for each student whose file included a finding of noncompliance to ensure correction (unless the student is no longer within the jurisdiction of the LEA); additionally, BSE reviewed a new sample of student files to verify systemic compliance.

4A - OSEP Response

In the FFY 2021 SPP/APR the State included none of the State's LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "In the 2020-21 school year for which these data are reported, LEAs were in the first full year of the coronavirus pandemic. To ensure student safety during this time, various educational delivery models were developed to serve all students, including students with disabilities. These included regular in-person instruction, but also included a hybrid model where students attended school in-person part time and attended virtually the remaining time. Some LEAs provided instruction to students using only a virtual delivery model. Since a large proportion of students were not physically attending in-person instruction full time, suspension and expulsion rates declined." OSEP reminds the State that if the examination for significant discrepancies in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State's chosen methodology is not reasonably designed to determine if significant discrepancies are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

4A - Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State's LEAs are being examined for significant discrepancy under the State's chosen methodology.

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

- A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and
- B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Data Source

State discipline data, including State's analysis of State's Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

Measurement

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of suspensions and expulsions of more than 10 days during the school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

- The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or
- The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2020-2021 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

Indicator 4B: Provide the following: (a) the number of LEAs that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of long-term suspensions and expulsions (more than 10 days during the school year) for children with IEPs; and (b) the number of those LEAs in which policies, procedures or practices contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2016	4.55%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	4.55%	9.09%	9.09%	7.14%	7.14%

Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

FFY 2021 SPP/APR Data

Has the state established a minimum n/cell-size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.

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Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	0	7.14%	0%		N/A	N/A

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

Pennsylvania uses a comparison to the state average as the methodology for identifying LEAs with a significant discrepancy. Using data collected under section 618 of the IDEA (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) for the school year 2020-21, Pennsylvania compared the rates of suspensions/expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the state. Pennsylvania calculated a state level suspension/expulsion rate to set a single "state bar," then calculated an LEA rate for each racial/ethnic group, and next compared each LEA's rate for each racial/ethnic group to the single state bar.

LEAs were identified as having a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of students with disabilities using the following criteria:

- LEA had a total enrollment of students with disabilities of at least 40;
- LEA had suspended or expelled at least 10 eligible students for greater than 10 days in the school year;
- LEA had at least 10 students of one race suspended or expelled; and
- the rate at which students of any race were suspended or expelled by an LEA was at least 1.5 times the state suspension rate for all students with disabilities in the reporting year (i.e., single bar applicable for all races).

Provide additional information about this indicator (optional)

PA believes that it has a sound methodology in place that is reasonably designed to determine if significant discrepancies are occurring in long-term suspensions and expulsions of children with disabilities. This methodology has served the state well in prior years in identifying individual LEAs with significant discrepancies. In the 2020-21 school year for which these data are reported, LEAs were in the first full year of the coronavirus pandemic. To

ensure student safety during this time, various educational delivery models were developed to serve all students, including students with disabilities. These included regular in-person instruction, but also included a hybrid model where students attended school in-person part time and attended virtually the remaining time. Some LEAs provided instruction to students using only a virtual delivery model. Since a large proportion of students were not physically attending in-person instruction full time, suspension and expulsion rates declined. This caused the methodology used to identify LEAs with significant discrepancies to appear to be ineffective. However, with no LEA suspending more than eight students the entire school year, it functioned as expected. The reduction in suspensions and expulsions across the state caused every LEA to be excluded from the analysis for this Indicator since none met the minimum n size of 10 for any race. For the 2021-22 school year, LEAs in PA generally returned to in-person instruction and preliminary suspension and expulsion data confirms that the methodology continues to be reasonably designed and has identified LEAs with significant discrepancies in long-term suspensions and expulsions of children with disabilities.

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

During the 2020-21 school year, only 212 students with disabilities were suspended in Pennsylvania for 10 or more days. This appears to be an effect of the various learning options LEAs used during the COVID pandemic (e.g., in-person, virtual, hybrid, etc.).

These suspensions were distributed across LEAs to the extent that NO LEA suspended more than eight students. As a result, the minimum n of 10 students needed to calculate a significant discrepancy for any one LEA was not met.

Therefore, no on-site reviews were required for Indicator 4B.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
1	1	0	0

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

The BSE has verified through on-site reviews of policies, procedures, and practices, as well as reviews of updated data from student files, that the LEA has correctly implemented the specific regulatory requirements and have corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02. These reviews consisted of the examination of policies, procedures, and practices, updated data from student files, as well as data collected from the state monitoring system. In addition, the verification included an examination of the extent of the noncompliance and, working with the LEA, used root cause analyses to determine the contributing factors, ensuring that meaningful strategies were developed to confirm timely correction. These analyses focused on infrastructure issues such as policies, procedures, funding, TA, supervision, data, personnel, and provider practices.

Describe how the State verified that each individual case of noncompliance was corrected

In accordance with OSEP Memorandum 09-02, the BSE's procedures required systemic correction of policies, procedures, and practices, as well as verification of correction through file reviews. Updated data demonstrated 100% compliance with regulatory requirements prior to closure of corrective action. The BSE required student-specific corrective action for all citations of noncompliance where corrective action could be implemented. This was done through the Individual Corrective Action Plan (ICAP) component of the overall CAVP web-based system. In the ICAP, the BSE reviewed updated data for each student whose file included a finding of noncompliance to ensure correction (unless the student is no longer within the jurisdiction of the LEA); additionally, BSE reviewed a new sample of student files to verify systemic compliance. Follow-up reviews verified that updated data demonstrated 100% compliance for each student whose file included a finding of noncompliance to ensure correction of each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4B - Prior FFY Required Actions

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the districts identified with noncompliance in FFY 2020 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific

actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

The BSE has verified through on-site reviews of policies, procedures, and practices, as well as reviews of updated data from student files, that the LEA identified in FFY 2019 is now correctly implementing the specific regulatory requirements and has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02.

During the onsite reviews for the LEA, the BSE looked for evidence that teacher and administrators:

- 1) understand the regulations, including definitions and data reporting, related to suspending student with IEPs;
- 2) know what data must be reported to PDE/OSEP, and the implications of inaccurate data collection/reporting;
- 3) ensure data accuracy, look for patterns and trends, and report data in a timely manner;
- 4) review special education discipline data reports before submission;
- 5) develop a range of disciplinary options to suspensions;
- 6) implement strategies that keep students actively engaged in instruction;
- 7) utilize evidence-based classroom management strategies;
- 8) supervise students in non-classroom settings;
- 9) advance EBPs, including family-school partnerships, as part of a system of positive behavioral support for all students; and;
- 10) disaggregate, analyze, and use academic and behavior data to identify appropriate intervening strategies for students at risk.

The LEA was required to revise policies, procedures, and/or practices to bring them into compliance. This was verified by BSE during a follow-up comprehensive review where all sources of noncompliance were found to be corrected to 100% compliance. Lastly, the BSE verified that all corrective action of noncompliance in this LEA was completed within timelines.

In accordance with OSEP Memorandum 09-02, the BSE's procedures verified systemic correction of policies, procedures, and practices, as well as verification of correction through file reviews for each individual case within the LEA identified in FFY 2020. Updated data demonstrated 100% compliance with regulatory requirements prior to closure of corrective action. The BSE also verified student-specific corrective action for all citations of noncompliance where corrective action was implemented. This was done through the ICAP component of the overall CAVP web-based system. In the ICAP, the BSE reviewed updated data for each student whose file included a finding of noncompliance to ensure correction (unless the student is no longer within the jurisdiction of the LEA); additionally, BSE reviewed a new sample of student files to verify systemic compliance.

4B - OSEP Response

In the FFY 2021 SPP/APR the State included none of the State's LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "Since a large proportion of students were not physically attending in-person instruction full time, suspension and expulsion rates declined." OSEP reminds the State that if the examination for significant discrepancies, by race and ethnicity, in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State's chosen methodology is not reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

4B- Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State's LEAs are being examined for significant discrepancy under the State's chosen methodology.

Indicator 5: Education Environments (children 5 (Kindergarten) - 21)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served:

- A. Inside the regular class 80% or more of the day;
- B. Inside the regular class less than 40% of the day; and
- C. In separate schools, residential facilities, or homebound/hospital placements.

(20 U.S.C. 1416(a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS002.

Measurement

- A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
- B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
- C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

Instructions

Sampling from the State's 618 data is not allowed.

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6. Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA, explain.

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2016	2017	2018	2019	2020
A	2019	Target >=	63.60%	64.10%	64.10%		61.48%
A	61.48%	Data	62.37%	61.97%	61.52%	61.48%	62.08%
B	2019	Target <=	8.30%	8.10%	8.10%		9.62%
B	9.62%	Data	9.01%	9.27%	9.39%	9.62%	9.80%
C	2019	Target <=	4.60%	4.60%	4.60%		4.81%
C	4.81%	Data	4.90%	4.86%	4.77%	4.81%	4.70%

Targets

FFY	2021	2022	2023	2024	2025
Target A >=	61.48%	62.36%	63.24%	64.12%	65.00%
Target B <=	9.62%	9.62%	9.08%	8.54%	8.00%
Target C <=	4.81%	4.81%	4.81%	4.81%	4.00%

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	Total number of children with IEPs aged 5 (kindergarten) through 21	314,630

Source	Date	Description	Data
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	194,473
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	31,104
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	12,664
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	813
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	457

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

FFY 2021 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	194,473	314,630	62.08%	61.48%	61.81%	Met target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	31,104	314,630	9.80%	9.62%	9.89%	Did not meet target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	13,934	314,630	4.70%	4.81%	4.43%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 3, 4, and aged 5 who are enrolled in a preschool program attending a:

- A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and
- B. Separate special education class, separate school or residential facility.
- C. Receiving special education and related services in the home.

(20 U.S.C. 1416(a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED Facts file specification FS089.

Measurement

- A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.
- B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.
- C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

Instructions

Sampling from the State's 618 data is not allowed.

States must report five-year-old children with disabilities who are enrolled in preschool programs in this indicator. Five-year-old children with disabilities who are enrolled in kindergarten are included in Indicator 5.

States may choose to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age.

For Indicator 6C: States are not required to establish a baseline or targets if the number of children receiving special education and related services in the home is less than 10, regardless of whether the State chooses to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age. In a reporting period during which the number of children receiving special education and related services in the home reaches 10 or greater, States are required to develop baseline and targets and report on them in the corresponding SPP/APR.

For Indicator 6C: States may express their targets in a range (e.g., 75-85%). Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State's data reported under IDEA section 618, explain.

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data – 6A, 6B

Part	FFY	2016	2017	2018	2019	2020
A	Target >=	63.50%	64.50%	64.80%		46.91%
A	Data	63.90%	66.05%	66.66%	58.69%	46.91%
B	Target <=	15.00%	15.00%	14.70%		17.70%
B	Data	15.30%	14.56%	14.47%	17.53%	17.70%

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for Preschool Programs (Bureau of Early Intervention and Family Supports) resides.

Targets

Please select if the State wants to set baseline and targets based on individual age ranges (i.e. separate baseline and targets for each age), or inclusive of all children ages 3, 4, and 5.

Inclusive Targets

Please select if the State wants to use target ranges for 6C.

Target Range not used

Baselines for Inclusive Targets option (A, B, C)

Part	Baseline Year	Baseline Data
A	2019	58.69%
B	2019	17.53%
C	2020	17.08%

Inclusive Targets – 6A, 6B

FFY	2021	2022	2023	2024	2025
Target A >=	47.00%	47.00%	50.00%	55.00%	59.00%
Target B <=	17.50%	17.50%	17.50%	17.00%	17.00%

Inclusive Targets – 6C

FFY	2021	2022	2023	2024	2025
Target C <=	17.00%	17.00%	16.50%	16.50%	16.50%

Prepopulated Data

Data Source:

SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

07/06/2022

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	9,730	13,197	5,390	28,317
a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	4,303	7,757	3,211	15,271
b1. Number of children attending separate special education class	1,834	2,148	901	4,883
b2. Number of children attending separate school	75	157	100	332
b3. Number of children attending residential facility	2	1	0	3
c1. Number of children receiving special education and related services in the home	1,669	1,315	483	3,467

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

FFY 2021 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	15,271	28,317	46.91%	47.00%	53.93%	Met target	No Slippage

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B. Separate special education class, separate school or residential facility	5,218	28,317	17.70%	17.50%	18.43%	Did not meet target	No Slippage
C. Home	3,467	28,317	17.08%	17.00%	12.24%	Met target	No Slippage

Provide additional information about this indicator (optional)

The changes seen in this Indicator are believed to be due to the decreased availability of early childhood programs. During FFY 2019, many private and state funded early childhood programs were closed for health and safety reasons. In FFY 2020 and FFY 2021, many early childhood programs continued to be closed due to health and safety reasons. Other early childhood programs chose to close permanently due to difficulties hiring staff and to changes in families' needs for out-of-home care.

BEISFS continues to track this issue closely with their early childhood partners in the Office of Child Development and Early Learning.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and
- C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

State selected data source.

Measurement

Outcomes:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

- a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.
- b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
- c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.
- d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
- e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

Summary Statements for Each of the Three Outcomes:

Summary Statement 1: Of those preschool children who entered the preschool program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 1: Percent = [(# of preschool children reported in progress category (c) plus # of preschool children reported in category (d)) divided by (# of preschool children reported in progress category (a) plus # of preschool children reported in progress category (b) plus # of preschool children reported in progress category (c) plus # of preschool children reported in progress category (d))] times 100.

Summary Statement 2: The percent of preschool children who were functioning within age expectations in each Outcome by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 2: Percent = [(# of preschool children reported in progress category (d) plus # of preschool children reported in progress category (e)) divided by (the total # of preschool children reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

Instructions

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See [General Instructions](#) on page 2 for additional instructions on sampling.)

In the measurement include, in the numerator and denominator, only children who received special education and related services for at least six months during the age span of three through five years.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements. States have provided targets for the two Summary Statements for the three Outcomes (six numbers for targets for each FFY).

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three outcomes.

In presenting results, provide the criteria for defining "comparable to same-aged peers." If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS), then the criteria for defining "comparable to same-aged peers" has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2016	2017	2018	2019	2020
A1	2020	Target >=	89.84%	89.84%	90.84%	90.84%	84.04%
A1	84.04%	Data	83.67%	83.72%	84.06%	86.09%	84.04%

A2	2020	Target >=	68.02%	68.02%	69.02%	69.02%	65.21%
A2	65.21%	Data	66.56%	66.09%	66.99%	67.93%	65.21%
B1	2020	Target >=	91.69%	91.69%	92.69%	92.69%	85.65%
B1	85.65%	Data	86.35%	86.78%	87.31%	87.61%	85.65%
B2	2020	Target >=	66.54%	66.54%	67.54%	67.54%	62.41%
B2	62.41%	Data	62.93%	62.62%	64.47%	64.19%	62.41%
C1	2020	Target >=	89.48%	89.48%	90.48%	90.48%	83.46%
C1	83.46%	Data	84.05%	84.46%	84.23%	85.63%	83.46%
C2	2020	Target >=	70.37%	70.37%	71.37%	71.37%	66.59%
C2	66.59%	Data	67.75%	67.40%	68.34%	69.33%	66.59%

Targets

FFY	2021	2022	2023	2024	2025
Target A1 >=	84.04%	84.04%	84.04%	85.00%	85.00%
Target A2 >=	65.21%	65.21%	65.21%	66.50%	66.50%
Target B1 >=	85.65%	85.65%	85.65%	87.00%	87.00%
Target B2 >=	62.41%	62.41%	62.41%	63.50%	63.50%
Target C1 >=	83.46%	83.46%	83.46%	85.00%	85.00%
Target C2 >=	66.59%	66.59%	66.59%	68.00%	68.00%

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for Preschool Programs (Bureau of Early Intervention and Family Supports) resides.

FFY 2021 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

14,193

Outcome A: Positive social-emotional skills (including social relationships)

Outcome A Progress Category	Number of children	Percentage of Children
a. Preschool children who did not improve functioning	69	0.49%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,473	10.39%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,316	23.39%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	4,859	34.27%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	4,461	31.46%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age	8,175	9,717	84.04%	84.04%	84.13%	Met target	No Slippage

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>							
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	9,320	14,178	65.21%	65.21%	65.74%	Met target	No Slippage

Outcome B: Acquisition and use of knowledge and skills (including early language/communication)

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	55	0.39%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,490	10.50%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,680	25.93%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	6,183	43.56%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	2,785	19.62%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	9,863	11,408	85.65%	85.65%	86.46%	Met target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	8,968	14,193	62.41%	62.41%	63.19%	Met target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	85	0.60%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,529	10.78%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,091	21.80%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	4,938	34.83%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	4,536	31.99%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	8,029	9,643	83.46%	83.46%	83.26%	Did not meet target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	9,474	14,179	66.59%	66.59%	66.82%	Met target	No Slippage

Does the State include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years? (yes/no)

YES

Sampling Question	Yes / No
Was sampling used?	NO

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COS) process? (yes/no)

YES

List the instruments and procedures used to gather data for this indicator.

Pennsylvania's Part B/619 and Part C Early Intervention program use the same instruments, policies and procedures for gathering child outcome data used for this indicator (B7) and for the Part C C3 indicator.

For both entry and exit data collection, one member of the IEP team is designated to collect and enter the child outcome data. This designated member is also charged with involving the family in the child outcome data collection process and in reviewing all data collection and ratings with the family. All local Early Intervention programs must select an authentic assessment tool from an approved list to gather child development information. The list of approved tools can be found at: <http://www.pakeys.org/getting-started/ocdel-programs/early-learning-outcomes-reporting/>.

All child outcome COS ratings are entered into the PELICAN-EI data system. PELICAN-EI converts the 1 – 7 ratings into progress categories and summary statements. It has built-in data checks to ensure quality data entry. PELICAN-EI allows for reporting at both the state and local EI program levels.

For entry data collection, the designated member of the IEP team has 60 days from the child's IEP date to complete the child outcome process and enter the COS rating into PELICAN-EI. The child outcome process includes: 1) completing the approved authentic assessment tool, 2) using the data from the authentic assessment tool and the publisher's Instrument Crosswalk to understand the child's skills in each of the three indicators, and 3) obtaining a 1 – 7 rating of the child's skills in each of the three indicators using the Decision Tree for Summary Rating Discussions.

For exit data collection, the process described above is used to make the COS rating. The designated member of the IEP team has 60 days from the child's anticipated exit from the Early Intervention program to gather and enter the data into the PELICAN-EI system. Exit data is only gathered on children who have received 6 consecutive months of Early Intervention service prior to their exit, with the starting point of service being the IEP date. For children who stay in Pennsylvania's Early Intervention program past the typical age of transition to Kindergarten, exit data is collected in the 60-day time period prior to the child's sixth birthday.

Additional policies and procedures can be found at: <http://www.eita-pa.org/early-childhood-outcomes/>.

Provide additional information about this indicator (optional)

The FFY 2021 ECO data collection includes 14,193 preschoolers who represent the entire range of disability types and levels of severity. Seventy-nine percent (79%) of the exiting preschoolers had complete entry and exit pairs of child outcome data. While the percent of pairs of child outcome data declined during the pandemic, the current statewide percentage of entry and exit pairs of child outcome data is back to pre-pandemic levels. (FFY2019 – 74.22%, FFY 2021 – 79.88%).

Pennsylvania presented 14,193 data points representing the number of Preschoolers with IEPs who were assessed.

In FFY 2021, 14,193 preschoolers with IEPs who received Early Intervention services for at least 6 months before exiting the Part B/619 program were assessed and had at least one valid rating across the three child outcomes.

Data on the three child outcomes is gathered independently and can result in different denominators in the data system.

State training and guidance documents provide instructions on how to collect accurate and complete ratings. The PELICAN-EI data system provides an alert to the user when inaccurate or incomplete data has been entered.

In addition, a technical correction was made to the targets for outcome B1 for FFY 2021, FFY 2022 and FFY 2023. The targets for this outcome were incorrectly entered in the FFY 2020 report.

7 - Prior FFY Required Actions

None

7 - OSEP Response

OSEP notes that the State reported in its FFY 2021 SPP/APR that in its FFY 2020 SPP/APR for this indicator targets for outcomes B1 were incorrectly posted for FFY 2021, FFY 2022 and FFY 2023. In the FFY 2021 SPP/APR, the State provided correct targets for FFYs 2021 through 2023 for this indicator, and OSEP accepts those targets.

In reporting the percent of preschoolers aged 3 through 5 who were functioning within age expectations in each outcome area by the time they turned 6 years of age or exited the program, the State reported 14,178 as the denominator in outcome A, 14,193 as the denominator in outcome B, and 14,179 as the denominator in outcome C. Additionally, the State reported 14,193 preschool children aged 3 through 5 with IEPs were assessed. The State explained this discrepancy.

7 - Required Actions

In the FFY 2022 SPP/APR submission, the State must explain any discrepancies between the FFY 2022 total number assessed and the FFY 2022 denominator in its calculation of the percent of preschoolers aged 3 through 5 who were functioning within age expectations in each outcome area by the time they turned 6 years of age or exited the program.

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

(20 U.S.C. 1416(a)(3)(A))

Data Source

State selected data source.

Measurement

Percent = [(# of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities) divided by the (total # of respondent parents of children with disabilities)] times 100.

Instructions

Sampling of parents from whom response is requested is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See [General Instructions](#) on page 2 for additional instructions on sampling.)

Describe the results of the calculations and compare the results to the target.

Provide the actual numbers used in the calculation.

If the State is using a separate data collection methodology for preschool children, the State must provide separate baseline data, targets, and actual target data or discuss the procedures used to combine data from school age and preschool data collection methodologies in a manner that is valid and reliable.

While a survey is not required for this indicator, a State using a survey must submit a copy of any new or revised survey with its SPP/APR.

Report the number of parents to whom the surveys were distributed and the number of respondent parents. The survey response rate is automatically calculated using the submitted data.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, include in the State's analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process. States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

If the analysis shows that the demographics of the children for whom parents responding are not representative of the demographics of children receiving special education services in the State, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State distributed the survey to parents (e.g., by mail, by e-mail, on-line, by telephone, in-person through school personnel), and how responses were collected.

States are encouraged to work in collaboration with their OSEP-funded parent centers in collecting data.

8 - Indicator Data

Question	Yes / No
Do you use a separate data collection methodology for preschool children?	YES
If yes, will you be providing the data for preschool children separately?	YES

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the descriptions for both School Age Programs (Bureau of Special Education) and Preschool Programs (Bureau of Early Intervention and Family Supports) reside.

Historical Data

Group	Baseline	FFY	2016	2017	2018	2019	2020
Preschool	2008	Target >=	87.00%	87.50%	88.00%	85.27%	89.00%
Preschool	84.10%	Data	86.87%	86.88%	85.29%	92.20%	89.70%
School age	2008	Target >=	40.84%	41.34%	41.34%	41.34%	46.37%
School age	34.50%	Data	39.70%	41.30%	40.97%	45.59%	44.04%

Targets

FFY	2021	2022	2023	2024	2025
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Target A >=	90.00%	91.00%	92.00%	93.00%	94.00%
Target B >=	40.66%	47.91%	48.68%	49.45%	50.22%

FFY 2021 SPP/APR Data: Preschool Children Reported Separately

Group	Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Preschool	5,877	6,722	89.70%	90.00%	87.43%	Did not meet target	Slippage
School age	323	714	44.04%	40.66%	45.24%	Met target	No Slippage

Provide reasons for Preschool slippage, if applicable

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

A decrease of 2.27% was found between the Preschool Early Intervention responses in FFY 2020 and FFY 2021. Analysis of the data did not find any difference in the percent of parents who agreed with this item in FFY 2021 in comparison to FFY 2020 by geographic region or disability type. Slippage may be primarily due to the increases in the number of respondents completing this question (an additional 589 respondents over the previous year) and the increased response rate (an improved rate of 9.22% over FFY 2020).

The number of parents to whom the surveys were distributed.

49,302

Percentage of respondent parents

15.08%

Response Rate

FFY	2020	2021
Response Rate	14.06%	15.08%

Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

School Age Programs (Bureau of Special Education)

The BSE is investigating methods of survey data collection to improve the response rate of parents of students with disabilities. Options being considered include a reduction in the number of questions to which parents are asked to respond and changes in the delivery method of surveys to parents sampled for response. As BSE is currently engaged in the planning process, it is not yet known whether there will be sufficient time to have all improvements in data collection procedures in place for FFY 2022. If not, the BSE will work with the Pennsylvania State Data Center to refine sampling strategies to improve response rates in both disability category and race/ethnicity.

To increase the response rate for the survey, PA enlisted its Special Education Advisory Panel to provide input on changes they believed would have a positive impact. Multiple options were discussed, and adding QR codes to the letters mailed to parents was recommended. Beginning with the FFY 2022 survey, these codes will allow parents with smart phones or tablets to directly access the parent survey online, making it easier for them to respond. Historically, paper surveys have been the primary method for parents to respond, and this additional feature will allow those who prefer to respond online the ability to do so.

BSE has the parent survey translated into foreign languages, as warranted, to allow parents more comfortable using their native language to provide input for this Indicator.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

The response rate for the Early Intervention Family Survey has increased by 9.22% over the previous year. Pennsylvania will continue the same strategies to increase the survey response rate. These strategies include: an online survey that is disseminated to families by the local EI program staff, availability of the survey in English and Spanish, materials developed for local Early Intervention programs to use when supporting families to complete the survey will be available in both English and Spanish; and a toll-free hotline will be available for families to use for any additional translation services.

A webinar will be held in early 2023 to provide strategies for local programs to ensure that they are reaching underrepresented families. On a monthly basis, local EI programs will receive a report on the number of returned surveys, and respondent demographics. This will allow local programs to target ongoing outreach to underrepresented families.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

School Age Programs (Bureau of Special Education)

Changes in year-to-year response rates by disability category were examined and the response rate for parents of students with autism increased more than 2% from the previous year, while the response rate for parents of students with speech and language impairments decreased more than 2%. Comparisons in one disability category found an improved response rate, and comparisons in three categories found a decline in response rate. These changes were also examined for race/ethnicity, where only one comparison exceeded a 2% decline in response rate. Normally, the BSE would work with the Pennsylvania State Data Center to refine sampling strategies to improve response rates in both disability category and race/ethnicity, and will do so if all revisions to data collection procedures are not operational.

Regarding nonresponse bias, variation by demographic variables was examined via a t-test for the two-category gender variable and Analyses of Variance (ANOVA) for the variables with multiple categories. Statistical significance was evaluated based on $p < .05$. For variables that included categories with fewer than 10 responses, the analysis included only categories with 10+ responses.

The only variable that was found to show differences across subgroups was student’s race. The descriptive data and statistical output are shown below. Note that follow-up comparisons between pairs of subgroups did not reach statistical significance. Therefore, although there is a suggestion of some disparities by racial/ethnic group, this result should be interpreted with caution. The addition of QR codes to letters mailed to parents, in addition to increasing the response rate overall, is expected to positively impact nonresponse bias.

Table 8.1

2022 Mean Item Response and Indicator 8 Percent by Race-Ethnicity

Race/Ethnicity	N	Mean Item Response	Percent
American Indian/Alaska Native	<10	1.12	100%
Asian	16	2.18	50%
Black or African American	77	2.33	48%
Hispanic	101	2.28	58%
White	483	2.48	43%
Multiracial	34	2.95	32%
Native Hawaiian/Other Pacific Islander	<10	3.17	0%

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

The representativeness in the preschool respondent group by race/ethnicity and disability categories is displayed in Tables 8.4 and 8.5 below. The state has determined that if the percentage of the respondent group in a category was in the range of 5% above or below the percentage of the state population, that category would be considered representative of the state population. Only one of the 20 comparisons of the respondent group to the state population was outside the state-established range; families with children with developmental delays are under represented in the survey data. Through the demographic data that was gathered in the Family Survey, Pennsylvania was unable to match 12.1% of the respondents to specific children in the PELICAN-EI data system and therefore disability category for those respondents is unknown. To overcome this unexpected lack of identification of disability category and to reduce the potential for nonresponse bias, Pennsylvania’s Part B 619 program will include an additional demographic question to capture the child’s disability category in the FFY 2022-23 Preschool Early Intervention Family Survey.

BEISFS provided local EI programs with weekly data on respondent demographics and return rates to assist in increasing outreach to the underrepresented families. The survey and dissemination materials were available in both English and Spanish. Additional translation services were available.

Include the State’s analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services. States must include race/ethnicity in their analysis. In addition, the State’s analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

School Age Programs (Bureau of Special Education)

For the current reporting year, the school age National Center for Special Education Accountability Monitoring (NCSEAM) Survey was distributed to 16,415 parents of students with disabilities from 104 LEAs. Included in this distribution was an over-sampling of parents of Black or African American (not Hispanic) and Hispanic students to compensate for historically lower response rates from parents within these groups.

The state has determined that if the percentage of the respondent group in a category was within the range between 5% above and below the percentage of the state population, the category would be considered representative of the state population. As shown in Tables 8.2 and 8.3 below, for parents of school age students, 15 of the 19 comparisons are within the state-established range. Only parents of white (not Hispanic) students and parents of students with autism are over-represented in this group. Parents of Black or African American (not Hispanic) students and parents of students with specific learning disabilities are under-represented.

Table 8.2
Race/Ethnicity of School Age Students Represented by Parent Respondents

Race/Ethnicity	Total Respondent Group	State Race/Ethnicity Population
	Percent	Percent
American Indian/Alaska Native	<1.0%	<1.0%
Asian	2.2%	1.9%
Black or African American	10.8%	17.1%
Hispanic	14.2%	14.5%
Multiracial	4.8%	5.4%
Native Hawaiian/Other Pacific Islander	<1.0%	<1.0%
White	67.6%	60.8%

Table 8.3
Disability Category of School Age Students Represented by Parent Respondents

Disability Category	Total Respondent Group	State Race/Disability Population
	Percent	Percent
Autism	18.9%	12.6%
Deaf-Blindness	<1.0%	<1.0%
Emotional Disturbance	8.0%	8.0%
Hearing Impairment Including Deafness	1.3%	<1.0%
Intellectual Disability (Mental Retardation)	6.0%	6.2%
Multiple Disabilities	1.5%	1.0%
Orthopedic Impairment	<1.0%	<1.0%
Other Health Impairment	18.6%	17.9%
Specific Learning Disability	33.5%	38.9%
Speech or Language Impairment	10.9%	13.8%
Traumatic Brain Injury	<1.0%	<1.0%
Visual Impairment including Blindness	<1.0%	<1.0%

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

Table 8.4
Race/Ethnicity of Preschool Children Represented by Parent Respondents

Race/Ethnicity	Total Respondent Group	State Race/Ethnicity Population
	Percent	Percent
American Indian/Alaska Native	<1.0%	1.1%
Asian	3.5%	3.7%
Black or African American	15.6%	11.9%
Hispanic	15.0%	17.3%
Multiracial	7.6%	6.5%
Native Hawaiian/Other Pacific Islander	<1.0%	<1.0%
White	58.2%	59.4%

Table 8.5
Disability Category of Preschool Children Represented by Parent Respondents

Disability Category	Total Respondent Group	State Race/Disability Population
	Percent	Percent
Autism	14.8%	15.3%
Deaf-Blindness	<1.0%	<1.0%
Developmental Delay	46.2%	39.6%
Emotional Disturbance	<1.0%	<1.0%
Hearing Impairment Including Deafness	1.4%	0.8%
Intellectual Disability (Mental Retardation)	<1.0%	<1.0%
Multiple Disabilities	<1.0%	<1.0%
Orthopedic Impairment	<1.0%	<1.0%
Other Health Impairment	2.1%	2.3%
Specific Learning Disability	<1.0%	<1.0%
Speech or Language Impairment	33.5%	28.5%
Traumatic Brain Injury	<1.0%	<1.0%
Visual Impairment including Blindness	<1.0%	<1.0%
Unknown	<1.0%	12.1%

The demographics of the parents responding are representative of the demographics of children receiving special education services. (yes/no)

NO

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics

School Age Programs (Bureau of Special Education)

As described above, the BSE is investigating methods of survey data collection to improve the response rate of parents of students with disabilities. Options being considered include reducing the number of questions asked of respondents and changes in the delivery method of surveys to parents sampled for response. As these changes are currently being considered, it is not yet known whether there will be sufficient time to make them operational for the data to be collected for FFY 2022. If these improvements are operational, the BSE will work with the Pennsylvania State Data Center to refine sampling procedures within the sampling plan to improve response rates for both disability category and race/ethnicity.

The addition of QR codes to letters mailed to parents, in addition to increasing the response rate overall, is expected to positively alter the over- and under-representation of groups observed in the current year's results.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

BEISFS provided local EI programs with weekly data on respondent demographics and return rates to assist in increasing outreach to the underrepresented families. The survey and dissemination materials were available in both English and Spanish. Additional translation services were available.

A webinar will be held in early 2023 to provide strategies for local programs to ensure that they are reaching underrepresented families. On a monthly basis, local EI programs will receive a report on respondent demographics. This will allow local programs to target ongoing outreach to underrepresented families.

Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

School Age Programs (Bureau of Special Education)

The state has determined that if the percentage of the respondent group in a category was in the range of 5% above or below the percentage of the state population, that category would be considered representative of the state population.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

The state has determined that if the percentage of the respondent group in a category was in the range of 5% above or below the percentage of the state population, that category would be considered representative of the state population.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	YES
If yes, provide sampling plan.	Sampling plan feedback - PA Indicator B8 23 Jan 23

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

School Age Programs (Bureau of Special Education)

The sampling plan for this indicator was approved by OSEP in Pennsylvania's FFY 2005 SPP and is continued for this submission. The present cohort consists of the same set of LEAs on the same schedule as was devised in the original submission. The sampling plan also includes all LEAs that have been established since the original approval. This process provides a representative sample of leavers based on LEA size, and stratified on race and controlled by disability category, grade, LEA, and educational environment. Additional details about this plan were requested by OSEP on 4 January, 2023 and the response to this request for was provided on 23 January, 2023. BSE is awaiting OSEP's formal acknowledgement of these details.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

Sampling did not occur in the Preschool Early Intervention Program.

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	NO
If yes, provide a copy of the survey.	

Provide additional information about this indicator (optional)

School Age Programs (Bureau of Special Education)

On 4 January, 2023, BSE was contacted by PA's OSEP State Lead to provide additional details of the sampling plan for this Indicator. BSE sought technical assistance from the IDEA Data Center to be sure that the explanations provided to OSEP did, in fact, supply the desired detail. The response to OSEP's request was submitted on 23 January, 2023. Although the sampling plan has not yet been revised, the response has been attached to this Indicator. BSE recognizes that a revision to the sampling plan may be required, and is currently awaiting additional feedback and guidance from OSEP.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

To prevent nonresponse bias, Pennsylvania incorporated the following strategies into the family survey design and dissemination process to increase responses:

- The survey could be taken on multiple types of devices including iPhones, computers, tablets, and paper.
- The survey included an introduction that explained the process of the survey and how the data would be used.
- The survey was anonymous.
- Survey questions could be skipped if not applicable to the family's situation.
- The question that is used to measure Indicator B8 was in the first five questions on the survey to prevent nonresponse due to survey fatigue.
- The survey was conducted over a 5-month period to ensure an adequate opportunity for families to respond.
- Local Early Intervention programs were responsible for disseminating the survey to families in their programs. EI programs provided incentives and reminders to families.
- BEISFS monitored the survey return rates for each EI program and incorporated return rate targets into the annual determination process.

Nonresponse bias is analyzed on an annual basis and additional strategies are incorporated into the survey design and dissemination process as needed.

8 - Prior FFY Required Actions

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

Response to actions required in FFY 2020 SPP/APR

These Required Actions have been addressed in the appropriate sections provided above for this purpose.

8 - OSEP Response

The State submitted its sampling plan for this indicator with its FFY 2021 SPP/APR, and OSEP's evaluation of the sampling plan indicated that it is approvable.

8 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

Compliance indicator: Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.

(20 U.S.C. 1416(a)(3)(C))

Data Source

State's analysis, based on State's Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification.

Measurement

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in special education and related services and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

FFY 2021 SPP/APR Data

Has the state established a minimum n and/or cell size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.

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Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	627	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

Define "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

To complete its analysis for this indicator, Pennsylvania compared data collected for the Report of Children with Disabilities Receiving Special Education under Part B of the IDEA, as amended (Child Count) for all children with disabilities aged 5 through 21 served under IDEA and the most current general enrollment data available from the Pennsylvania Information Management System (PIMS) system.

The following methodology and criteria were applied to identify the number of LEAs with disproportionate representation of racial and ethnic groups in special education and related services:

- weighted risk ratio analysis; same threshold (single bar) for all racial categories;
- cut point of 3.0 for the upper bound;
- minimum cell size of 40 students with disabilities in racial category; and
- two consecutive years of data.

Pennsylvania analyzed data for each LEA, and for all racial and ethnic groups in the LEA that met the minimum cell size. The decision to require two consecutive years of data is based on fluctuation in enrollment in Pennsylvania's LEAs, especially in its charter schools.

Using the above criteria, the state determined that no LEA met the data threshold as having disproportionate representation of racial and ethnic groups in special education and related services.

Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.

Not applicable

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

Compliance indicator: Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

(20 U.S.C. 1416(a)(3)(C))

Data Source

State's analysis, based on State's Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

Measurement

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA. Provide these data at a minimum for children in the following six disability categories: intellectual disability, specific learning disabilities, emotional disturbance, speech or language impairments, other health impairments, and autism. If a State has identified disproportionate representation of racial and ethnic groups in specific disability categories other than these six disability categories, the State must include these data and report on whether the State determined that the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in specific disability categories and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

FFY 2021 SPP/APR Data

Has the state established a minimum n and/or cell size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.

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Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1	0	627	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

Define “disproportionate representation.” Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

To complete its analysis for this indicator, Pennsylvania compared data collected for the Report of Children with Disabilities Receiving Special Education under Part B of the IDEA, as amended (Child Count) for all children with disabilities aged 5 through 21 served under IDEA and the most current general enrollment data available from the Pennsylvania Information Management System (PIMS).

The following methodology and criteria were applied to identify the number of LEAs with disproportionate representation of racial and ethnic groups in specific disability categories:

- weighted risk ratio analysis;
- same threshold (single bar) for all racial categories; cut point of 3.0 for the upper bound;
- minimum cell size of 40 students with disabilities in racial category; and
- two consecutive years of data.

Pennsylvania analyzed data for children in each LEA in the following six disability categories: intellectual disability, specific learning disability, emotional disturbance, speech or language impairment, other health impairment, and autism, and for all racial and ethnic groups in the LEA that met the minimum cell size. The decision to require two consecutive years of data is based on fluctuation in enrollment in LEAs, especially in its charter schools.

Using the above criteria, the BSE determined that one LEA met the data threshold as having disproportionate representation for students of Two or More Races with intellectual disabilities.

Describe how the State made its annual determination as to whether the disproportionate overrepresentation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

To determine whether the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification, the BSE conducted monitoring in this LEA. In preparation for the on-site review, the LEA reviewed its written policies, procedures, and practices for referral, evaluation, and identification of students with disabilities.

To determine compliance with requirements of 34 CFR §§300.600(d)(3) and 300.602(a), the BSE reviewed the LEA's written policies and procedures relating to referral, evaluation, and identification to ensure that these policies, procedures, and practices comply with IDEA. The BSE reviewed the LEA's FSA and considered all data to determine whether the LEA was in compliance with the IDEA requirements. The BSE examined the LEA's data collection procedures and practices, any LEA-unique circumstance potentially influencing identification rates, the LEA's information regarding assessment tools, academic and behavioral support models, and the use of effective practices for culturally and/or linguistically diverse learners. In addition, the BSE looked at the LEA's professional development programs and family involvement strategies, conducted interviews of administration, and supported the LEA's use of data to drive program improvement. The LEA provided a list of students identified by the LEA in the racial and disability category flagged in the years subject to review, and each file was reviewed to determine compliance with IDEA related requirements. BSE determines whether the file review supports the conclusion that each student has been appropriately identified as a student with a disability.

BSE determined that the LEA was in compliance with requirements. Therefore, no LEA had disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

Compliance indicator: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.

(20 U.S.C. 1416(a)(3)(B))

Data Source

Data to be taken from State monitoring or State data system and must be based on actual, not an average, number of days. Indicate if the State has established a timeline and, if so, what is the State's timeline for initial evaluations.

Measurement

a. # of children for whom parental consent to evaluate was received.

b. # of children whose evaluations were completed within 60 days (or State-established timeline).

Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

Percent = [(b) divided by (a)] times 100.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Note that under 34 CFR §300.301(d), the timeframe set for initial evaluation does not apply to a public agency if: (1) the parent of a child repeatedly fails or refuses to produce the child for the evaluation; or (2) a child enrolls in a school of another public agency after the timeframe for initial evaluations has begun, and prior to a determination by the child's previous public agency as to whether the child is a child with a disability. States should not report these exceptions in either the numerator (b) or denominator (a). If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in b.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	94.35%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	97.75%	96.67%	95.05%	94.33%	94.97%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
29,993	28,661	94.97%	100%	95.56%	Did not meet target	No Slippage

Number of children included in (a) but not included in (b)

1,332

Account for children included in (a) but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

School Age Programs (Bureau of Special Education)

BSE's review of the FFY 2021 database for Indicator 11 confirms that all 429 school age students who did not receive a timely initial evaluation did receive an evaluation, although late. Of the total number of students evaluated, 4.6% were completed within 61-90 days, and 2.1% were completed within 120 days. Reasons for delays were primarily attributed to the COVID-19 pandemic, errors in timeline calculations, staffing issues, and administrative delays. LEAs continued to indicate, under administrative delays, when an evaluation was late as a result of the COVID-19 pandemic. The pandemic was cited by LEAs as the reason for 69% of the initial evaluations completed beyond 90 days.

Preschool Early Intervention Programs (Bureau of Early Intervention and Family Supports)

The FFY 2022 data showed that 903 evaluations were not completed within 60 days. Of the late evaluations, 3% were late due to COVID-19 restrictions that impacted the ability of the local Early Intervention programs to provide timely evaluations.

Further analysis of the data showed that of those evaluations that were late due to non-COVID-19 reasons, 88.9% were completed within 61-90 days. Reasons for delays were primarily attributed to staffing issues and administrative delays, as well as weather emergencies and scheduling problems over which Preschool Early Intervention programs have limited control. In all instances, although late, preschool children received their evaluations.

For the late evaluations due to non-COVID-19 delays, one Preschool Early Intervention program accounted for 66.2% of the late evaluations. BEISFS Advisors implemented targeted technical assistance activities which include: notification in writing to the program administrator of poor performance concerns; analysis of data to identify specific areas of concern; development of an action plan with data-based targets for correction of poor performance; revision to procedures for monitoring; and verification of the implementation of new procedures.

Indicate the evaluation timeline used:

The State used the 60 day timeframe within which the evaluation must be conducted

What is the source of the data provided for this indicator?

State database that includes data for the entire reporting year

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

School Age Programs (Bureau of Special Education)

LEAs submit required data for indicator 11 on a cyclical basis aligned with BSE's monitoring cycle (approximately one-sixth of the LEAs in the commonwealth are monitored each year). Student-specific and aggregated data sufficient to address all technical reporting requirements for this indicator are collected. Data were reported as the actual number of days, not an average number of days, for the period of July 1, 2021, through June 30, 2022.

Preschool Early Intervention Programs (Bureau of Early Intervention and Family Supports)

For Preschool Early Intervention programs, Pennsylvania collected data for this indicator through a statewide database and is based on actual number of days, not an average number of days, for the period of July 1, 2021 through June 30, 2022.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
69	63	3	3

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements*

School Age Programs (Bureau of Special Education)

The process for collecting data is explained above. In July-August, BSE reviewed a database in which LEAs reported data from the entire year for all students for whom initial evaluations for special education had been conducted. The database includes mandatory reporting fields to document that, for any student where the LEA did not meet required timelines, an initial evaluation was conducted, although late, and an IEP was developed when the student was determined to be eligible for special education. Following this BSE review of the database, all LEAs were provided with written notification of their compliance status. LEAs determined to be in noncompliance were informed that they must correct the noncompliance as soon as possible, but not later than one year from the notification. These LEAs were required to perform quarterly reporting, through which the LEA provided updated data on all new initial evaluations. When these LEAs demonstrated 100% compliance with evaluation timelines for two consecutive reporting periods, BSE closed corrective action. For those LEAs that did not achieve 100% compliance, BSE conducted onsite reviews to assist in the identification of root causes, including required technical assistance. BSE also informed the LEA of pending enforcement actions should the LEA not correct the noncompliance within the one-year timeline (from the date of the original notification). BSE conducted follow-up of all LEAs identified with ongoing noncompliance through quarterly reporting and conducted onsite reviews of individual student files as well as policies, procedures, and practices. The result of this process allowed BSE to determine that findings of noncompliance were verified as corrected within one year for 66 findings for FFY 2020. BSE reviewed all evaluations that were completed beyond the 60-day requirement and verified evidence of compensatory education, when appropriate.

Three LEAs did not achieve compliance within one year of notification of noncompliance, and corrective action is ongoing. The BSE has verified that the three LEAs are making progress to correct deficiencies but, as of the date of this report, 100% compliance with requirements has not been achieved.

With the exception of the three aforementioned LEAs that have not completed corrective action, the BSE has verified that all LEAs identified with noncompliance in FFY 2020 are correctly implementing the regulatory requirements related to the provision of timely evaluations, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

To verify that local Preschool Early Intervention programs with identified instances of noncompliance are correctly implementing the regulatory requirements for the provision of timely evaluations, BEISFS Advisors reviewed a sample of child records from that EI program. The records may be reviewed either through the PELICAN-EI data system or onsite child record review. BEISFS Advisors review the date of parent consent for the evaluation, the date of the evaluation, and any reason for a delay in meeting this timeline to determine that the local EI program is now correctly implementing the regulatory requirement for timely evaluations.

In addition to a review of child records, local Preschool Early Intervention programs are required to submit a Quality Enhancement Plan (QEP), which is approved by BEISFS, to address correction of all areas of noncompliance. Implementation of the QEP must be validated within one year of issuance of the findings report. BEISFS Advisors review documentation of completion of any QEP activities as part of the validation of correction of systemic noncompliance. Documentation may include reviewing updated local policies and procedures, documentation of staff training on new procedures, or observations of service delivery, as appropriate.

BEISFS has verified that all local Early Intervention programs that had identified noncompliance in FFY 2020 are correctly implementing regulatory requirements related to the provision of timely evaluations, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Describe how the State verified that each *individual case of noncompliance* was corrected

School Age Programs (Bureau of Special Education)

BSE has verified, through a review of the database and/or on-site reviews of student files, that all but three LEAs with noncompliance reported in its FFY 2020 APR has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02.

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)

For each individual case of noncompliance, BEISFS Advisors reviewed the record of the identified child, either through the PELICAN-EI data system or onsite record review, to verify that the child received an evaluation, although late. BEISFS has verified that all local Early Intervention programs with individual cases of noncompliance identified in FFY 2020 provided evaluations for the identified child, unless the child was no longer within the jurisdiction of the Early Intervention program.

FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

School Age Programs (Bureau of Special Education)

The BSE reviewed the LEAs' policies, procedures, and practices to ensure they comply with timely initial evaluations. Because the three LEAs cited

difficulties related to the COVID-19 pandemic's quarantine and closure protocol that forced remote and/or hybrid learning that occurred throughout the 2021-22 school year, the BSE provided additional oversight by increasing on-site visits and providing technical assistance. In addition, the BSE helped develop schedules to assist the school psychologists compensate for lost days in order to bring all the initial evaluations into compliance. The BSE is requiring bi-weekly data from the LEAs to assess progress and is meeting monthly with the LEAs to enforce timeline requirements and achieve closure of corrective action.

To address the ongoing noncompliance, the BSE assigned additional BSE personnel to develop in-depth action plans to bring all outstanding evaluations to completion, while staying in compliance with new initial evaluations. The BSE reviewed all evaluations that went beyond the 60-day required timeline, required compensatory education documentation, and monitored student files on a monthly basis. The BSE interviewed administrative personnel responsible for the special education evaluation process and compliance to conduct root cause analyses and revise action plans.

The BSE formalized the department's expectations related to federal requirements by outlining the details of the LEAs' status of ongoing non-compliance which initiated the BSE's monthly reviews.

The BSE informed each of these LEAs that, in accordance with the BEC, Special Education Compliance, if the LEA does not obtain prompt and consistent compliance, BSE will schedule a meeting at PDE, which the LEA will be required to attend, to address the noncompliance, and if necessary, the enforcement mechanisms that will be utilized to obtain compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	2	1	1
FFY 2018	1	1	0

FFY 2019

Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

School Age Programs (Bureau of Special Education)

In July-August, BSE reviewed a database in which LEAs reported data from the entire year for all students for whom initial evaluations for special education had been conducted. The database includes mandatory reporting fields to document that, for any student where the LEA did not meet required timelines, an initial evaluation was conducted, although late, and an IEP was developed when the student was determined to be eligible for special education. Following this BSE review of the database, the two LEAs from FFY 2019 were provided with written notification of their compliance status and were informed that they must correct the noncompliance as soon as possible. These LEAs were required to perform quarterly reporting, through which the LEAs provided updated data on all new initial evaluations. One LEA demonstrated 100% compliance with evaluation timelines for two consecutive reporting periods, and BSE closed corrective action. For the LEA that did not achieve 100% compliance, BSE conducted onsite reviews to assist in the identification of root causes, including required technical assistance. BSE also informed the LEA of pending enforcement actions should the LEA not correct the noncompliance. BSE conducted follow-up of both LEAs identified with ongoing noncompliance through quarterly reporting and conducted onsite reviews of individual student files as well as policies, procedures, and practices. BSE reviewed all evaluations that were completed beyond the 60-day requirement and verified evidence of compensatory education, when appropriate.

The BSE provided further oversight for these two LEAs by requiring bi-weekly data to assess progress and scheduled monthly meetings to enforce timeline requirements to help the LEAs achieve closure of corrective action. This allowed BSE to close corrective action and verify correction of noncompliance, consistent with OSEP Memorandum 09-02. for one of the two LEAs.

To further formalize the department's expectations, the BSE informed the LEA that, in accordance with the Basic Education Circular: Special Education Compliance, if the LEA does not obtain prompt and consistent compliance, a mandatory meeting for LEA staff will be scheduled at the PDE to address the noncompliance, and if necessary, outline the enforcement mechanisms that will be utilized to obtain compliance.

Describe how the State verified that each individual case of noncompliance was corrected

School Age Programs (Bureau of Special Education)

BSE has verified, through a review of the database and/or on-site reviews of student files, that one of the two LEAs with noncompliance reported in its FFY 2019 APR has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02.

FFY 2019

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

School Age Programs (Bureau of Special Education)

The BSE reviewed the LEA's policies, procedures, and practices to ensure they comply with timely initial evaluations. Because the LEA cited COVID-19 mandatory school closures that occurred in March 2020 and the PA Department of Health's imposed school closures due to high numbers of COVID-19 cases that occurred throughout the 2020-21 school year, the BSE provided additional oversight by increasing on-site visits and providing technical

assistance.

Because the LEA only evaluated less than 20 students over a two-year period, the BSE provided additional oversight by thoroughly examining the LEA's Child Find policies, practices, and procedures to ensure students who needed an evaluation were being evaluated.

The BSE is requiring bi-weekly data from the LEAs to assess progress and is meeting monthly with the LEA to enforce timeline requirements and achieve closure of corrective action.

FFY 2018

Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

School Age Programs (Bureau of Special Education)

In July-August, BSE reviewed a database in which LEAs reported data from the entire year for all students for whom initial evaluations for special education had been conducted. The database includes mandatory reporting fields to document that, for any student where the LEA did not meet required timelines, an initial evaluation was conducted, although late, and an IEP was developed when the student was determined to be eligible for special education. Following this BSE review of the database, the LEA identified in FFY 2018 was provided written notification of its compliance status. The BSE provided additional oversight by requiring bi-weekly data from the LEA to assess progress and scheduled monthly meetings to enforce timeline requirements to help the LEA achieve closure of corrective action. Quarterly reporting of updated data on all new initial evaluations was used to evaluate compliance. When the LEA demonstrated 100% compliance with evaluation timelines for two consecutive reporting periods, BSE closed corrective action.

To address the ongoing noncompliance, additional BSE personnel were assigned to develop in-depth action plans to bring all outstanding evaluations to completion, while staying in compliance with new initial evaluations. The BSE reviewed all evaluations that went beyond the 60-day required timeline, required compensatory education documentation, and monitored student files on a bi-weekly basis. The BSE worked with administrative personnel responsible for the special education evaluation process and compliance in conducting root cause analyses and revising action plans.

In December 2021, the BSE informed the LEA that, in accordance with the Basic Education Circular: Special Education Compliance, if the LEA does not obtain prompt and consistent compliance, a mandatory meeting for LEA staff will be scheduled at the PDE to address the noncompliance, and if necessary, outline the enforcement mechanisms that will be utilized to obtain compliance.

Describe how the State verified that each individual case of noncompliance was corrected

School Age Programs (Bureau of Special Education)

BSE has verified, through a review of the database and/or on-site reviews of student files, that the LEA with noncompliance reported in its FFY 2018 APR has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02.

11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining two (2) uncorrected findings of noncompliance identified in FFY 2019 and one (1) finding in 2018 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019 and FFY 2018: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

These Required Actions have been addressed in the appropriate sections provided above for this purpose.

11 - OSEP Response

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining three uncorrected findings of noncompliance identified in FFY 2020, and one finding in FFY 2019 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020 and FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

(20 U.S.C. 1416(a)(3)(B))

Data Source

Data to be taken from State monitoring or State data system.

Measurement

- a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
- b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
- c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
- d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
- e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.
- f. # of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Percent = [(c) divided by (a - b - d - e - f)] times 100.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Category f is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child's third birthday under 34 CFR §303.211 or a similar State option.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	94.80%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	99.04%	97.65%	90.15%	93.45%	98.37%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	9,249
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	645

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	7,707
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	757
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	8
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	7,707	7,839	98.37%	100%	98.32%	Did not meet target	No Slippage

Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f

132

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Of the 132 children whose IEPs were not developed by their 3rd birthday, 61.2% had their IEP developed within 30 days, 11.4% had their IEP developed between 31–45 days, and 27.3% had their IEPs developed between 31-90 days . Reasons for delays were primarily attributed to staffing issues and administrative delays, as well as weather emergencies and scheduling problems over which Preschool Early Intervention programs have limited control. All 132 did have an IEP developed and implemented, although beyond their third birthday as confirmed through data reports.

Two EI programs accounted for 71% of the IEPs completed past the child's third birthday. BEISFS Advisors implemented targeted technical assistance activities with these programs. The activities include: notification in writing to the program administrator of the poor performance concerns, analysis of data to identify specific areas of concern, development of an action plan with data-based targets for correction of poor performance, revision to procedures for monitoring, and verification of the implementation of new procedures.

Attach PDF table (optional)

What is the source of the data provided for this indicator?

State database that includes data for the entire reporting year

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

BEISFS used a state database that includes data for the entire reporting year from all Preschool Early Intervention programs. Pennsylvania collected data for this indicator through a statewide data collection based on actual number of days, not an average number of days, for the period of July 1, 2021 through June 30, 2022.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
17	17	0	0

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

To verify that local Preschool Early Intervention programs with identified instances of noncompliance are correctly implementing the regulatory requirements for the provision of IEPs by the third birthday of children transitioning from the Part C program and eligible for the Part B program, BEISFS Advisors reviewed a sample of child records from that EI program. The records may be reviewed either through the PELICAN-EI data system or onsite child record review. BEIS/FS Advisors review the date of the IEP, the child's birthdate, and any reason for a delay in meeting this timeline in order to determine that the local EI program is now correctly implementing the regulatory requirement for IEPs by the child's third birthday.

In addition to a review of child records, local Preschool Early Intervention programs are required to submit a Quality Enhancement Plan (QEP), which is approved by BEISFS, to address correction of all areas of noncompliance. Implementation of the QEP must be validated within one year of issuance of the findings report. BEISFS Advisors review documentation of completion of any QEP activities as part of the validation of correction of systemic noncompliance. Documentation may include reviewing updated local policies and procedures, documentation of staff training on new procedures, or observations of service delivery as appropriate.

BEISFS has verified that all local Early Intervention programs that had identified noncompliance in FFY 2020 are correctly implementing regulatory requirements related to the provision of IEPs by the third birthday of children transitioning from the Part C program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Describe how the State verified that each individual case of noncompliance was corrected

For each individual case of noncompliance, BEISFS Advisors reviewed the record of the identified child, either through the PELICAN-EI data system or onsite record review, to verify that the eligible child received an IEP, although late. BEISFS has verified that all local Early Intervention programs with individual cases of noncompliance identified in FFY 2020 developed an IEP for the identified child, unless the child was no longer within the jurisdiction of the Early Intervention program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

These Required Actions have been addressed in the appropriate sections provided above for this purpose.

12 - OSEP Response

12 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

(20 U.S.C. 1416(a)(3)(B))

Data Source

Data to be taken from State monitoring or State data system.

Measurement

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

If a State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16, the State may, but is not required to, choose to include youth beginning at that younger age in its data for this indicator. If a State chooses to do this, it must state this clearly in its SPP/APR and ensure that its baseline data are based on youth beginning at that younger age.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State's monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	76.10%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	84.32%	82.18%	80.18%	81.11%	80.53%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,200	1,412	80.53%	100%	84.99%	Did not meet target	No Slippage

What is the source of the data provided for this indicator?

State monitoring

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

BSE collects data for this indicator from LEAs participating in cyclical monitoring, with approximately one-sixth of the state's LEAs engaged in monitoring each year. The Pennsylvania State Data Center selects a representative sample of students for file reviews, using parameters established by the BSE. Secondary transition probes within the BSE's monitoring documents are aligned with the NSTTAC Indicator 13 Checklist, and are scored in accordance with strictest guidelines. In order to meet requirements (and thus be reported at 100% for this indicator), a file must have 100% compliance for all probes. An LEA that does not achieve 100% compliance is issued findings of noncompliance, and required corrective action is tracked by BSE.

Question	Yes / No
Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	YES
If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age?	NO

If no, please explain

Pennsylvania has opted to report data consistent with the federal requirement of reporting on students who have reached age 16 and older. This allows the application of this statistic consistently across time and provides the ability to track trends related to federal compliance with this Indicator.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
173	173	0	0

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

In FFY 2020, there were 173 findings of noncompliance through the cyclical monitoring process. BSE explored a root cause analysis with the LEAs involved for the noncompliance of the regulation that had been violated. LEAs were subsequently required to develop a Corrective Action Verification Plan (CAVP) to address the noncompliance and its root cause. The CAVP is also linked to technical assistance resources through the PaTTAN and IU systems. Advisors also examined LEAs' policies, procedures, and practices, and where necessary, the LEAs were required to address the correction of policies, procedures, and practices in their CAVP to ensure systemic correction. CAVPs included required corrective action/evidence of change, timelines and resources required, and tracking of timelines to closure. The BSE monitored implementation of the CAVP through reviews of revised policies and procedures and verification of 100% correction of noncompliance as evidenced by updated data in a subsequent sample of additional student files. The CAVP was monitored until all corrective action was completed. All corrective action was required to be completed within one year of the notification of a finding. Because the system is web-based, BSE was able to track progress in closing the CAVP and captured real-time data concerning the LEAs' statuses in completing corrective action.

BSE has follow-up procedures in place to verify correction of noncompliance. In addition to systemic correction of noncompliance, the BSE reviewed the files of all students whose IEPs were found to be in noncompliance with indicator 13 transition requirements in monitoring, and reviewed those students' updated IEPs until all noncompliance was corrected. The BSE ensured correction of noncompliance systemically and specifically for every individual student whose IEP had noncompliance, unless the student was no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02.

Describe how the State verified that each individual case of noncompliance was corrected

In accordance with OSEP Memorandum 09-02, the BSE's procedures required systemic correction of policies, procedures, and practices, as well as verification of correction through file reviews. Updated data must demonstrate 100% compliance with regulatory requirements prior to closure of corrective action. Based upon the root cause analyses in the LEAs involved, the BSE required student-specific corrective action for each of the 173 citations of noncompliance where corrective action could be implemented. This was done through the Individual Corrective Action Plan (ICAP) component of the overall CAVP web-based system. In the ICAP, the BSE reviewed updated data for each student whose file included a finding of noncompliance to ensure correction (unless the student is no longer within the jurisdiction of the LEA); additionally, BSE reviewed a new sample of student files to verify compliance of this requirement.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

13 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

These Required Actions have been addressed in the appropriate sections provided above for this purpose.

13 - OSEP Response

13 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Results indicator: Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were:

- A. Enrolled in higher education within one year of leaving high school.
- B. Enrolled in higher education or competitively employed within one year of leaving high school.
- C. Enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.

(20 U.S.C. 1416(a)(3)(B))

Data Source

State selected data source.

Measurement

- A. Percent enrolled in higher education = $[(\# \text{ of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school}) \div (\# \text{ of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school})] \times 100$.
- B. Percent enrolled in higher education or competitively employed within one year of leaving high school = $[(\# \text{ of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school}) \div (\# \text{ of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school})] \times 100$.
- C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment = $[(\# \text{ of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment}) \div (\# \text{ of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school})] \times 100$.

Instructions

Sampling of youth who had IEPs and are no longer in secondary school is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See [General Instructions](#) on page 2 for additional instructions on sampling.)

Collect data by September 2022 on students who left school during 2020-2021, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2020-2021 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. Definitions

Enrolled in higher education as used in measures A, B, and C means youth have been enrolled on a full- or part-time basis in a community college (two-year program) or college/university (four or more year program) for at least one complete term, at any time in the year since leaving high school.

Competitive employment as used in measures B and C: States have two options to report data under “competitive employment”:

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Option 2: States report in alignment with the term “competitive integrated employment” and its definition, in section 7(5) of the Rehabilitation Act of 1973, as amended by Workforce Innovation and Opportunity Act (WIOA). For the purpose of defining the rate of compensation for students working on a “part-time basis” under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

Enrolled in other postsecondary education or training as used in measure C, means youth have been enrolled on a full- or part-time basis for at least 1 complete term at any time in the year since leaving high school in an education or training program (e.g., Job Corps, adult education, workforce development program, vocational technical school which is less than a two-year program).

Some other employment as used in measure C means youth have worked for pay or been self-employed for a period of at least 90 days at any time in the year since leaving high school. This includes working in a family business (e.g., farm, store, fishing, ranching, catering services, etc.).

II. Data Reporting

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

Provide the total number of targeted youth in the sample or census.

Provide the actual numbers for each of the following mutually exclusive categories. The actual number of “leavers” who are:

1. Enrolled in higher education within one year of leaving high school;
2. Competitively employed within one year of leaving high school (but not enrolled in higher education);
3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed);
4. In some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).

“Leavers” should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, “leavers” who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also

happen to be employed. Likewise, “leavers” who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

III. Reporting on the Measures/Indicators

Targets must be established for measures A, B, and C.

Measure A: For purposes of reporting on the measures/indicators, please note that any youth enrolled in an institution of higher education (that meets any definition of this term in the Higher Education Act (HEA)) within one year of leaving high school must be reported under measure A. This could include youth who also happen to be competitively employed, or in some other training program; however, the key outcome we are interested in here is enrollment in higher education.

Measure B: All youth reported under measure A should also be reported under measure B, in addition to all youth that obtain competitive employment within one year of leaving high school.

Measure C: All youth reported under measures A and B should also be reported under measure C, in addition to youth that are enrolled in some other postsecondary education or training program, or in some other employment.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, include the State’s analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in their analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process. If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2016	2017	2018	2019	2020
A	2009	Target >=	27.10%	27.80%	27.80%	28.50%	29.33%
A	27.99%	Data	33.08%	29.53%	27.55%	30.92%	27.65%
B	2009	Target >=	61.00%	62.00%	62.00%	65.00%	70.71%
B	48.90%	Data	70.78%	69.14%	71.66%	71.33%	66.45%
C	2009	Target >=	69.90%	70.90%	70.90%	72.00%	76.23%
C	65.84%	Data	76.90%	75.33%	77.58%	75.78%	71.33%

FFY 2020 Targets

FFY	2021	2022	2023	2024	2025
Target A >=	29.33%	29.33%	29.33%	29.33%	31.00%
Target B >=	70.71%	70.71%	70.71%	70.71%	71.00%
Target C >=	76.23%	76.23%	76.23%	76.23%	76.75%

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

FFY 2021 SPP/APR Data

Total number of targeted youth in the sample or census	4,073
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	2,229
Response Rate	54.73%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	533
2. Number of respondent youth who competitively employed within one year of leaving high school	1,069
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	89
4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	5

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Enrolled in higher education (1)	533	2,229	27.65%	29.33%	23.91%	Did not meet target	Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1,602	2,229	66.45%	70.71%	71.87%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	1,696	2,229	71.33%	76.23%	76.09%	Did not meet target	No Slippage

Part	Reasons for slippage, if applicable
A	According to the National Student Clearinghouse Research Center, fall 2021 immediate college enrollment rates for 2021 high school graduates in approximately 8,700 high schools nationwide declined by 0.9 to 2.2 percentage points, depending on high school income and minority level characteristics. These widespread decreases came in a year when enrollment rates were widely expected to recover from the sharp declines of the prior year (4 to 10 percentage point drops). Instead, the results indicate a continued pandemic effect on immediate postsecondary enrollment for high school graduates. Immediate fall enrollment decreased at schools regardless of income and poverty level. Enrollment in higher education of students with disabilities in Pennsylvania appear to be following the national trend of decline.

Please select the reporting option your State is using:

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Response Rate

FFY	2020	2021
Response Rate	56.03%	54.73%

Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

Although the response rate for PA's Post-School Outcome survey declined slightly (1.3%) in FFY 2021, there were no disability categories overrepresented or underrepresented in the respondent group. This was also true for gender, exit type and geographic location. Leavers who were white were overrepresented in the respondent group, with a proportion just over 3% above the tolerance level, while Black or African American leavers were slightly underrepresented, with a proportion that was 0.07% below the tolerance level.

LEAs used teachers and other professional staff to make contact with leavers to collect these data. Despite the effect that the pandemic has had on staffing levels, LEAs were still able to collect data on more than half of the targeted group of student leavers. The online data collection protocol described in the FFY 2019 report provided real time feedback to LEAs on completed surveys and those still to be completed.

As the group of LEAs participating in the survey changes each year, the TA provided by the PaTTAN network for both training for the online data collection and implementation of strategies to reach leavers will continue. These strategies have included:

- enhanced presentations about the importance of obtaining representative response rates during mandatory annual training for LEAs administering Exit Surveys and Post School Outcome Surveys;
- PaTTAN consultants reviewing state summary information and addressing any specific concerns about representativeness in previous surveys;
- reviewing the former National Post School Outcomes Center's Strategies for Hard to Reach Students with participating LEAs;
- providing mid-point status reports alerting LEAs to any potential discrepancies in response rates for specific subgroups, leading to an increase in the intensity of efforts by LEAs to contact former students, especially those in under-represented subgroups;
- conducting focus group meetings to discuss the successful strategies LEAs employed to contact youth, especially hard to reach youth, to develop additional guidance documents for future cohorts of LEAs administering the surveys; and
- providing continued collaboration with the National Technical Assistance Center on Transition: the Collaborative to research other states' survey procedures, with specific focus on effective strategies for improving representativeness in response rates.

Pennsylvania is currently developing a new data collection system to collect both exiting and post-school outcome data which will begin as part of the Summary of Academic Achievement and Functional Performance (SAAFP). This document is provided to students and their parent at the conclusion of students' high school education. Contact information collected from the revised SAAFP for this new system will be used to send notifications to leavers by text message or email message one year after exiting. These messages will ask them to follow a link to electronically complete a post-school outcome survey. Multiple notifications will be sent, and if no response has been received from the leaver, LEAs will be required to make contact to obtain the data needed to complete the survey. This redesign is expected to increase response rates while at the same time reduce the level of effort required at the LEA level since contact will only need to be made with those leavers who have not responded to the electronic prompts. This system will be piloted with the upcoming data collection for FFY 2022, and necessary modifications and enhancements will be made before full implementation in FFY 2023.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

There was a smaller decline in the response rate observed for PA's Post-School Outcome survey compared to what had been observed in FFY 2020. However, there were no disability categories overrepresented or underrepresented in the respondent group. This was also true for gender, exit type and geographic location. Leavers who were white were overrepresented in the respondent group, with a proportion just over 3% above the tolerance level, while Black or African American leavers were slightly underrepresented, with a proportion that was 0.07% below the tolerance level. Again this year, surveys were returned for more than half of the targeted group of student leavers. Nonresponse bias was examined, and as expected with a high response rate and demographic data generally representative of the targeted group, none was found.

Include the State's analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in its analysis. In addition, the State's analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

Again this year, surveys were returned for more than half of the targeted group of student leavers. Although the response rate for PA's Post-School Outcome survey declined slightly (1.3%) in FFY 2021, and there were no disability categories overrepresented or underrepresented in the respondent group. This was also true for gender, exit type and geographic location. Leavers who were white were overrepresented in the respondent group, with a proportion just over 3% above the tolerance level, while Black or African American leavers were slightly underrepresented, with a proportion that was 0.07% below the tolerance level.

The response data is representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school. (yes/no)

NO

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

To improve representativeness in FFY 2022, BSE will continue to implement the strategies described above to increase the response rate. Further, the PaTTAN office responsible for data collection for this Indicator will again closely monitor LEA efforts in contacting former students and focus those LEA efforts in obtaining responses from those representing the few demographic categories that were not representative in FFY 2021. In FFY 2023, the new data collection system is expected to be fully operational with the anticipated increased response rate and increased representativeness of demographic categories.

Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

To determine the representativeness of the respondent group, comparisons were made to the target population for all disability, racial/ethnic and exit categories, as well as gender and geography. Twenty-four of the 26 comparisons made fell within a state-established $\pm 5.0\%$ tolerance level. In fact, 15 comparisons were less than $\pm 1.0\%$, and only six comparisons were above $\pm 2.0\%$.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	YES
If yes, provide sampling plan.	Sampling plan feedback - PA Indicator B14 23 Jan 23

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

The sampling plan for this indicator was approved by OSEP in Pennsylvania's FFY 2005 SPP and is continued for this submission. The present cohort consists of the same set of LEAs on the same schedule as was devised in the original submission. The sampling plan also includes all LEAs that have been established since the original approval. This group of LEAs provides a representative sample of leavers based on LEA size, whether the LEAs are urban, suburban or rural, disability category, race/ethnicity and gender. Additional details about this plan were requested by OSEP on 4 January, 2023 and the response to this request for was provided on 23 January, 2023. BSE is awaiting OSEP's formal acknowledgement of these details.

The FFY 2021 response rate of 54.73% is reflective of the online data collection protocol which has been in place in recent years. This protocol provided all LEAs with a splash page that displayed real-time demographic data for previously entered surveys. This included the total number of post school surveys assigned to the LEA, and the number and percent of post-school surveys submitted to date by gender, disability, and race/ethnicity. PaTTAN provided training to participating LEAs to highlight the utility of real-time data as a means for LEAs to monitor the representativeness of their survey return rates. Included was a link to the National Technical Assistance Center on Transition: The Collaborative's (NTACT:C) Strategies for Hard to Reach Students.

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	

Provide additional information about this indicator (optional)

On 4 January, 2023, BSE was contacted by PA's OSEP State Lead to provide additional details of the sampling plan for this Indicator. BSE sought technical assistance from the IDEA Data Center to be sure that the explanations provided to OSEP did, in fact, supply the desired detail. The response to OSEP's request was submitted on 23 January, 2023. Although the sampling plan has not yet been revised, the response has been attached to this Indicator. BSE recognizes that a revision to the sampling plan may be required, and is currently awaiting additional feedback and guidance from OSEP.

14 - Prior FFY Required Actions

None

14 - OSEP Response

The State submitted its sampling plan for this indicator with its FFY 2021 SPP/APR, and OSEP's evaluation of the sampling plan indicated that it is approvable.

14 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

The State reported that it used a survey, however, it did not indicate whether it was a revised or new survey, if the State used a revised or new survey with the FFY 2021 SPP/APR. With the FFY 2022 SPP/APR, the State must submit the revised or new survey.

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results Indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. (20 U.S.C. 1416(a)(3)(B))

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the ED Facts Metadata and Process System (EMAPS)).

Measurement

Percent = (3.1(a) divided by 3.1) times 100.

Instructions

Sampling is not allowed.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State's data under IDEA section 618, explain.

States are not required to report data at the LEA level.

15 - Indicator Data

Select yes to use target ranges

Target Range is used

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	812
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	286

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the descriptions for both School Age Programs (Bureau of Special Education) and Preschool Programs (Bureau of Early Intervention and Family Supports) reside.

Historical Data

Baseline Year	Baseline Data
2012	27.38%

FFY	2016	2017	2018	2019	2020
Target >=	24.00% - 35.00%	24.00% - 35.00%	24.00% - 35.00%	28.00%-38.00%	25.00%-35.00%
Data	32.21%	36.31%	35.06%	33.38%	39.21%

Targets

FFY	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	25.00%	35.00%	25.00%	35.00%	25.00%	35.00%	25.00%	35.00%	25.00%	35.00%

FFY 2021 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target (low)	FFY 2021 Target (high)	FFY 2021 Data	Status	Slippage
286	812	39.21%	25.00%	35.00%	35.22%	Met target	No Slippage

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B))

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the ED Facts Metadata and Process System (EMAPS)).

Measurement

Percent = (2.1(a)(i) + 2.1(b)(i)) divided by 2.1 times 100.

Instructions

Sampling is not allowed.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of resolution mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State's data under IDEA section 618, explain.

States are not required to report data at the LEA level.

16 - Indicator Data

Select yes to use target ranges

Target Range is used

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	171
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	3
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	119

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

Targets: Description of Stakeholder Input

Please refer to the Broad Stakeholder Input section of the Introduction where the descriptions for both School Age Programs (Bureau of Special Education) and Preschool Programs (Bureau of Early Intervention and Family Supports) reside.

Historical Data

Baseline Year	Baseline Data
2005	79.30%

FFY	2016	2017	2018	2019	2020
Target >=	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	79.50%-89.50%	75.00%-85.00%
Data	80.83%	80.11%	76.58%	74.53%	66.96%

Targets

FFY	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	75.00%	85.00%	75.00%	85.00%	75.00%	85.00%	75.00%	85.00%	75.00%	85.00%

FFY 2021 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2020 Data	FFY 2021 Target (low)	FFY 2021 Target (high)	FFY 2021 Data	Status	Slippage
3	119	171	66.96%	75.00%	85.00%	71.35%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

The State's SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

Measurement

The State's SPP/APR includes an SSIP that is a comprehensive, ambitious, yet achievable multi-year plan for improving results for children with disabilities. The SSIP includes each of the components described below.

Instructions

Baseline Data: The State must provide baseline data that must be expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Children with Disabilities.

Targets: In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State's targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

Phase I: Analysis:

- Data Analysis;
- Analysis of State Infrastructure to Support Improvement and Build Capacity;
- State-identified Measurable Result(s) for Children with Disabilities;
- Selection of Coherent Improvement Strategies; and
- Theory of Action.

Phase II: Plan (which, in addition to the Phase I content (including any updates) outlined above:

- Infrastructure Development;
- Support for local educational agency (LEA) Implementation of Evidence-Based Practices; and
- Evaluation.

Phase III: Implementation and Evaluation (which, in addition to the Phase I and Phase II content (including any updates) outlined above:

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

Refer to FFY 2013-2015 Measurement Table for detailed requirements of Phase I and Phase II SSIP submissions.

Phase III should only include information from Phase I or Phase II if changes or revisions are being made by the State and/or if information previously required in Phase I or Phase II was not reported.

Phase III: Implementation and Evaluation

In Phase III, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. This includes: (A) data and analysis on the extent to which the State has made progress toward and/or met the State-established short-term and long-term outcomes or objectives for implementation of the SSIP and its progress toward achieving the State-identified Measurable Result(s) for Children with Disabilities (SiMR); (B) the rationale for any revisions that were made, or that the State intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and (C) a description of the meaningful stakeholder engagement. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., Feb 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase I and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023; for the FFY 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2022-June 30, 2023).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

17 - Indicator Data

Section A: Data Analysis

What is the State-identified Measurable Result (SiMR)?

Pennsylvania's SiMR focuses on increasing graduation rates of students with disabilities.

PA's FFY 2020 through FFY 2025 SSIP is a scaled-up implementation and expansion of its previous SSIP. This report overviews the first full year of implementation of activities/outcomes for 16 learning sites during the 2021-22 school year. The implementation plan follows the National Dropout Prevention Center for Students with Disabilities' (NDPC-SD) five-phase Intervention Framework, as outlined below:

- Phase 1: Focus on capacity building for theory of action adoption; EBPs implementation and establishment of Early Warning System (EWS);
- Phase 2: Build on data and infrastructure analysis, Coherent Improvement Strategy (CIS) adoption, and evaluation planning;
- Phase 3: Focus on progress toward short-term and long-term objectives for the SSIP and the SiMR;
- Phase 4: Continue implementation monitoring, fidelity measurement, and sustainability planning; and
- Phase 5: Focus on site's independent implementation, sustainability and scale-up of the comprehensive model.

Has the SiMR changed since the last SSIP submission? (yes/no)

NO

Is the State using a subset of the population from the indicator (e.g., a sample, cohort model)? (yes/no)

YES

Provide a description of the subset of the population from the indicator.

In 2020, BSE assigned each LEA in the state to a tier of support based on analyses of 618 graduation data, and to facilitate the identification of the learning site cohort for the state-wide scale-up of the SSIP.

- Tier 1 LEAs receive universal supports to improve and/or sustain graduation outcomes. These LEAs participate in PD and TA focused on best practices provided by PaTTAN via webinars, conferences, resource sharing, and peer-to-peer networking in general.
- Tier 2 LEAs were identified to receive comprehensive and systemic TA and coaching to support teachers of students with disabilities enrolled in grades 9-12. These 16 SSIP learning sites were given priority and selected based on a comprehensive analysis of graduation rates (greater than or equal to 10% below the state graduation rate for two consecutive years), geographic location (rural, suburban, or urban), LEA type (school district or charter schools), type of charter school (brick and mortar or cyber) and participation in other statewide improvement efforts. In total, the implementation cohort includes 7,583 students with IEPs in grades 9-12 across the eastern, central, and western regions of the state.
- Tier 3 LEAs did not meet Tier 1 or Tier 2 criteria because they are identified as a Comprehensive Support Improvement (CSI) school under the state's ESSA Consolidated State Plan and are already receiving intensive support through PA's System for LEA and School Improvement. Although these schools are not part of the current SSIP cohort, the PaTTAN SSIP Lead Consultant and the BSE SSIP team collaborate with the Special Assistant to the Secretary for Federally Designated Schools to offer support specific to improving graduation rates for students with disabilities.

This report is based on the efforts to improve graduation rates in the Tier 2 learning sites.

Is the State's theory of action new or revised since the previous submission? (yes/no)

NO

Please provide a link to the current theory of action.

https://www.pattan.net/CMSPages/GetAmazonFile.aspx?path=~\pattan\media\publications\2019%20accessible%20pdfs\ssip-theory-of-action_3-30-22b.pdf&hash=4b67433e26b91a34aeb4b6151b6de6eda512cbee0a2662f8a67fec6cd8a20c7c

Progress toward the SiMR

Please provide the data for the specific FFY listed below (expressed as actual number and percentages).

Select yes if the State uses two targets for measurement. (yes/no)

NO

Historical Data

Baseline Year	Baseline Data
2019	61.76%

Targets

FFY	2021	2022	2023	2024	2025
Target>= =	63.01%	64.26%	65.51%	66.76%	68.01%

FFY 2021 SPP/APR Data

Number Graduated with a Regular High School Diploma	Number Eligible to Graduate	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,033	1,445	70.37%	63.01%	71.49%	Met target	No Slippage

Provide the data source for the FFY 2021 data.

The data are the same data used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFACTS file specification FS009.

Please describe how data are collected and analyzed for the SiMR.

The section 618 data are collected for the 16 learning sites participating in the current SSIP and aggregated to obtain the graduation rate for the group as a whole.

Optional: Has the State collected additional data (i.e., benchmark, CQI, survey) that demonstrates progress toward the SiMR? (yes/no)

YES

Describe any additional data collected by the State to assess progress toward the SiMR.

Data collection and analyses focused on Phase 1 goals and activities for SSIP model implementation at the 16 new learning sites. Specifically, 1) capacity building for theory of action adoption; 2) implementation and establishment of an Early Warning System (EWS); 3) build on data and infrastructure analysis to inform action planning for CIS selection in response to EWS data; 4) institute teaming structures for, data-based decision-making to enhance action planning and strategy implementation. Outcomes for each are summarized below.

Phase 1

Capacity Building for Theory of Action Adoption

- Leadership including building administrators and special education directors at all 16 learning sites participated in multiple trainings (in-person and virtual) provided by Pennsylvania Training and Technical Assistance Network (PaTTAN) on SSIP implementation and the Theory of Action. Trainings were also recorded and available for on-demand viewing for those unable to attend or wishing to review content.
- Each learning site established a Local Leadership Team comprised of key administrators, special education personnel, general education personnel, and student data personnel who are responsible for the graduation success of students with disabilities to lead SSIP implementation at that site.
- Each site was assigned a PaTTAN consultant to provide comprehensive and systematic TA and coaching to support teachers of students with disabilities enrolled on grades 9-12, including building administrators.

Establishment of Early Warning System (EWS)

- By January 2022, all 16 learning sites established an EWS to track and analyze student Attendance, Behavior, and Course (ABC) performance data for students with IEPs.

Building on Data and Infrastructure Analysis

- All sites participated in trainings to integrate their chosen EWS with the SSIP online data collection platform to streamline alerts, analyses, and action planning for students identified as off-track and on-track for graduation.
- Student-level EWS and ABC data were collected and inputted for mid-year performance data analyses and risk factor identification.

Teaming, Data-Based-Decision-Making, and Action Planning

- Student-level EWS and ABC data were collected and inputted for end-of-year performance data analyses and risk factor identification.
- Building-level student data were analyzed to determine the influence of the model on graduation trajectory.
- Teams developed action plans to inform adoption and implementation of EBPs/CISs for FFY 2022

Phase 2

Evidence Based Practices (EBPs)/Coherent Improvement Strategy (CIS) Planning and Adoption

- Student-level EWS and ABC data were collected/inputted for beginning-of-year performance and risk factors.
- Teams met to analyze data and select EBPs and CISs for intervention.

These actions were ongoing at the time of report submission and will continue throughout FFY 2022. Analyses and outcome data will be addressed in the next reporting cycle.

The data discussed in this report represent one year of full SSIP implementation at the new 16 learning sites. These data capture within-year outcomes for FFY 2021 and establish baseline for comparison over time. Change data, trends, and longitudinal impact will be summarized in future reports as SSIP model implementation continues.

At the beginning of the 2021-22 school year, EWSs identified 31% of students with IEPs as off-track for graduation and 69% as on-track for graduation. At the end of the reporting year, 34% of students were off-track and 66% were on-track. At first glance, it appeared that the model did not have positive impact on changing graduation trajectories. However, given that research suggests it takes 3-5 years of systems-change to measurably influence achievement outcomes, these Year 1 results are not surprising. There is substantial agreement that planned change is a recursive process that happens in discernible stages (Bierman et al., 2002; Fixsen, Blase, Timbers, & Wolf, 2001; Panzano & Roth, 2006; Prochaska & DiClemente, 1982; Solberg, Hroschikowski, Sperl-Hillen, O'Conner, & Crabtree, 2004). Again, these are baseline data to which growth over time will be compared.

Given the large number of students with disabilities in the complete sample (n=7,583) across the wide range of learning sites, analyses of subgroup outcomes painted a clearer picture of Year 1 results. Nine of the 16 learning sites successfully reduced the proportion of students off-track for graduation, and successfully increased the proportion of students on-track within one year by instituting an EWS. Sites also saw changes in the prevalence and type of risk factors known to negatively impact graduation outcomes. For example, upon implementing the SSIP, seven sites reduced the number of students exhibiting multiple risk factors by 62%. By the end of the program year, all 16 sites observed improvements in attendance and academic performance for students originally identified as at-risk. Grade level breakdown of Phase 1 data show positive rates of change, with 17% more 9th graders identified as on-track for graduation by the end of the year, 13% more students in grade 10; 13% more students in grade 11; and 9% more students in grade 12 also showing progress. These results suggest that using EWS data led to improved outcomes for some students even in the short timeframe during which it was implemented. Longitudinal trends for the underclassmen who spend multiple years in the model will be the focus of future reports.

Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)

NO

Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)

NO

Section B: Implementation, Analysis and Evaluation

Please provide a link to the State's current evaluation plan.

<https://www.pattan.net/CMSPages/GetAmazonFile.aspx?path=~%5Cpattan%5Cmedia%5Cmaterials%5Cmisc%5Cffy-2020-2025-pa-ssip-evaluation-plan-revised-2022.pdf&hash=c1e27f9c8d6d625e74d7e4503551ee286404f2b9dd3ec0bceca8b54aced2dc17>

Is the State's evaluation plan new or revised since the previous submission? (yes/no)

YES

If yes, provide a description of the changes and updates to the evaluation plan.

There are no substantive changes to the evaluation plan. However, the evaluation plan document has been updated to remove references/terminology specific to the initial SSIP. These revisions to the narrative were for clarity of language only. All evaluation activities, methodology, and processes

remain the same.

If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.

Terminology and text were updated to reflect the present SSIP cycle.

Provide a summary of each infrastructure improvement strategy implemented in the reporting period:

This scale up of the SSIP followed the implementation process refined in the previous iteration and continued implementation of infrastructure strategies to support achievement of the SiMR, including: 1) alignment of the PDE's and SSIP's EWS metrics; 2) alignment of LEA compliance monitoring improvement plans for graduation and dropout rates with SSIP Action Plans, and 3) alignment of State Professional Development Grant (SPDG) and SSIP to offer intensive/ongoing PD to increase graduation and college/career readiness.

To support the current year of implementation, PaTTAN consultants provided intensive support to learning sites. Consultants met with local leadership teams regularly (monthly or bi-monthly, depending on need) to facilitate trainings and provide technical assistance for initial model implementation, which included:

- assuring sites met Phase 1 goals of implementing an EWS to collect ABC data for students with IEPs;
- facilitating use of the new online data management system;
- helping sites establish local leadership teams and introducing data-based decision-making team meeting protocols;
- modeling action planning for CIS selection and intervention in response to student data; and
- providing PD and resources on EBPs.

Collaboration with LEAs, stakeholders, and experts included:

- multiple data teams and stakeholders analyzing achievement, implementation, and outcome data, including the BSE, PDE internal stakeholders (bureaus, offices, divisions, and initiatives), SSIP Core Team, SEAP, learning site leadership teams, PaTTAN consultants, Hispanos Unidos para Ninos Exceptionales (HUNE), and the external evaluator;
- analyzing Phase 1 EWS data and ABC data and identified those students with disabilities off-track for graduation;
- reviewing the CISs (see list in Theory of Action) and the EBPs (refer to EBP discussion on page 7) to inform action planning and evaluation;
- embedding Family Engagement strategies and Culturally Responsive Instructional Practices (CPRs) into action planning templates and meeting protocols as part of standardized model implementation at all sites; and
- discussing both SSIP Action Plans and LEA improvement plans at team meetings to assure continuity of implementation goals/activities/outcomes.

All SSIP learning sites completed action plans for the 2021-22 school year. All 16 plans documented implementation of an EWS, leadership teaming, and data-based decision-making, based on EWS alerts and ABC data. Qualitative review of action plan narratives, team meeting protocols, and consultant meeting notes indicated that all sites experienced some level of staff turnover or change throughout the year, impacting SSIP implementation. More than 80% included phrases/language suggesting that additional personnel and more consistent administrative support were necessary for effective implementation and would be necessary to sustain the model over time. Each learning site noted at least one challenge of implementation related to high attrition rates in leadership or faculty, as well as staff and teacher shortages. All team meeting protocols indicated that building-level and LEA leaders, special education teachers, and general education teachers engaged in the process collaboratively, participated in meetings, contributed to decisions, and shared leadership roles.

Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.

Phase 1 outcomes focused on building infrastructure and capacity for SSIP implementation at the 16 new learning sites:

Short Term Outcomes

- Assignment and training of the PaTTAN consultants who provide direct, ongoing support to the 16 new SSIP sites. (10 consultants state-wide: four with prior experience in SSIP; six new to SSIP)
- PD to support systems change at the 16 SSIP Learning Sites included onsite and virtual trainings on:
 - o the SSIP model and theory of action;
 - o the online data management platform for SSIP data entry, action planning, teaming, tracking, and reporting;
 - o SSIP Model and EWS overview for learning site administrators;

- o SSIP Model and EWS training for Local Leadership Teams; and
- o student-level EWS analyses, data-based-decision-making, and data team meeting protocol.

Intermediate Outcomes

- TA to establish an EWS and guide initial implementation of the SSIP model included consultation and coaching on:
 - o EWS use, analyses, and decision-making based on data;
 - o data-team meeting procedures and processes;
 - o action planning based on data for CIS implementation, intervention and support;
 - o school improvement planning in relationship and in concert with SSIP action plans; and
 - o CIS exploration and planning for intervention.

Each of these efforts will intensify across the span of SSIP implementation to inform sustainability over time to influence SiMR achievement & improved outcomes for students with disabilities.

Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)

NO

Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.

The current phase of the SSIP focuses on capacity building and data-based decision-making in EWS implementation for early risk identification. These actions will continue and evolve as implementation continues through Phase 1 and beyond.

Actions and anticipated outcomes for the next reporting period activities include:

- continued PD and TA to all SSIP Learning Sites to Build Capacity
 - o In response to high attrition rates of building-level administrators and special education directors experienced at learning sites, PaTTAN developed an Administrators Professional Learning Community to convene three times each year focused on PD, increased dialogue, and operational supports for SSIP implementation.
 - o In response to high rates of teacher and leadership attrition at each site, PaTTAN consultants plan to deliver “refresher” trainings, as needed, for sites with new core team members.
- continued frequent, direct support and TA from PaTTAN consultants (virtually, phone conferences, and/or onsite)
 - o EWS implementation for early identification and support to SWDs off-track for graduation;
 - o EWS data collection and entry into the SSIP online data management system;
 - o ABC analysis/data-decision teaming to make informed decisions about progress and intervention; and
 - o refinement and implementation of Action Plans and implementation of CISs.
- continued State Infrastructure Development and Capacity Building
 - o engagement with stakeholders to improve two-way communication;
 - o alignment of SSIP with the SPDG, and additional collaboration with ESSA through the Special Assistant to the Secretary for Federally Designated Schools, to offer any needed support specific to improving graduation rates for students with disabilities;
 - o interdepartmental meetings with other PDE leaders and departments focused on increasing graduation rates;
 - o partnership with HUNE and the Parent Education and Advocacy Leadership Center (PEAL) to support building capacity in agencies and families;
 - o ongoing communication with OSEP, the National Technical Assistance Center on Transition: the Collaborative (NTACT-C), the IDEA Data Center (IDC), and the National Center on Systemic Improvement (NCSI) staff, and the SSIP external evaluator, to plan and monitor implementation of the SSIP; and
 - o ongoing distribution statewide of print/digital publications and SSIP training materials.
- continued CIS and EBP trainings through close collaboration with Intermediate Unit Training and Consultation staff (TaCs)

o Although sites are not required to implement an additional CIS beyond the EWS with embedded Family Engagement Strategies until Phase 2, many have already begun CIS selection and delivery in response to student data as part of their school's data-based/data-informed framework. PaTTAN consultants will continue to provide PD, TA, and resources to these sites on these CISs throughout Phase 1, as well as provide systematic and formal training in Phase 2.

List the selected evidence-based practices implement in the reporting period:

Aligned with the theory of action, Pennsylvania selected seven EBPs known to positively impact school completion and reduce dropout rates of students with disabilities. All are listed below. The current phase of the SSIP only required implementation of Strategy 1 (EWS). Upcoming phases will require continued implementation of the EWS plus one of the other EBPs described below.

1. Utilize data systems to identify, inform, monitor, and increase the number of students with disabilities that graduate from high school (EWS);
2. Implement increasingly intensive evidence-based methodologies toward improved academic outcomes (MTSS academic support);
3. Implement increasingly intensive evidence-based methodologies toward improved social, emotional and behavioral outcomes (MTSS behavior support and Check & Connect);
4. Promote the implementation of attendance strategies and alternative programming that will increase the likelihood of graduation (Credit recovery, after school/night school, online learning, school re-entry);
5. Ensure culturally responsive learning environments and instructional practices (Culturally Responsive Instructional Practices-[CRPs]);
6. Embrace a philosophy of partnership that empowers families and communities to become more meaningfully involved (Family engagement, mentoring, and partnering with federally funded centers such as Parent Training and Information Centers and Community Parent Resource Centers); and
7. Provide rigorous and relevant instruction to better engage students in learning, and provide the skills needed to graduate and have positive post school outcomes (Transition, college prep courses, career and technical training, life skills training, socially related employment skills).

Provide a summary of each evidence-based practices.

At the beginning of Phase 1, sites were required to utilize an EWS. Family Engagement strategies are embedded into the standardized implementation framework for action planning/decision-making in response to EWS data. All SSIP sites implemented the EWS as designed with embedded Family Engagement.

Although sites were not required to select a CIS in addition to the EWS in the first year of implementation, many did. Action plans indicate that more than 80% of sites provide for combinations of MTSS Academic support, MTSS Behavior Support, and alternative programming. CRPs are addressed in the action planning process as Equity Considerations. Every site embedded these strategies into action planning for Phase 1 implementation citing use of various resources/supports for supporting marginalized student/family groups from PDE, HUNE, district Diversity, Equity, and Inclusion teams, and local community groups. PaTTAN consultants report that site/team engagement with this facet of the SSIP model is in development.

Outcome/impact data for EBP selection, implementation, and fidelity will be discussed in future reports of this SSIP.

Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.

The 7 EBPs were selected by the BSE for the initial SSIP and for continued in this implementation based on multiple stakeholder input and activities including collaboration with LEAs, national technical assistance centers, SEAP, and leading education experts and researchers. Each are research and evidenced-based high leverage strategies known to address root causes for low performance that will ultimately build capacity to achieve the SiMR for students with disabilities.

In the current year of implementation, learning sites were only required to implement strategy 1—utilizing an Early Warning System. EWS is a diagnostic tool to identify, inform, monitor, and increase the graduation rate of students with disabilities. Sustained use of an EWS made measurable positive impact on both student achievement and instructional practice in the previous SSIP cycle; therefore, positive results are anticipated in this cycle. As reported in previous sections of this report, all SSIP sites implemented the EWS as designed. Additional outcome and impact data for EBP selection, implementation, and fidelity will be discussed in future reports of this SSIP.

Describe the data collected to monitor fidelity of implementation and to assess practice change.

Fidelity data have not yet been collected for the current SSIP learning sites. Fidelity measures, process, analysis, and TA for fidelity monitoring mirror the previous SSIP and will occur in and the next two years of implementation.

Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.

In the current year of implementation, learning sites were required to utilize an Early Warning System. Data collected shows that all sites implemented an EWS as required. Additional outcome and impact data for EBP selection, implementation, and fidelity will be discussed in future reports of this SSIP.

Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.

Next steps include continued implementation of the EWS and selection and implementation of at least one additional EBP from the list detailed described earlier. Specific EBP selections will be determined by local leadership teams after they analyze EWS and ABC data and plan for interventions in response to student risk factors and performance. Strategy selection will be data-driven and dynamic based on student needs and progress.

Does the State intend to continue implementing the SSIP without modifications? (yes/no)

YES

If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

This report summarizes Phase 1 implementation activities including:

- learning site confirmation for the current SSIP Cohort; establishment of local leadership teams at each site; PD and TA on EWS implementation and CIS adoption; and
- set up and training on use of an online data entry platform.

Student-level attendance, behavior, and course performance (ABC) data entry in the system began in January 2022 and leadership teams drafted action plans for decision-making for CIS delivery/intervention based on these data. At this stage of implementation, sites receive frequent, direct onsite and virtual support from PaTTAN consultants. This support will gradually fade across the NDPC-SD's Intervention Framework (see Section A of this report) to help sites move from intensive initial guidance to independent sustainability of the model.

For data collection, an online data management system was developed in response to learning site and consultant feedback to streamline EWS data collection for more accurate and efficient data-based decision making, action planning, teaming, and evaluation.

No substantive changes to SSIP model implementation will occur and the state intends to continue implementation as designed.

Section C: Stakeholder Engagement

Description of Stakeholder Input

A visual representation of PA's SSIP stakeholder involvement process can be found at:

https://www.pattan.net/CMSPages/GetAmazonFile.aspx?path=~\pattan\media\materials\misc\pa-voice-of-stakeholders_visual-rep_1.pdf&hash=59879a5a04babd0beaf7615166b0ac0e867a11546a43d1f81538be629aaa2f12 .

Describe the specific strategies implemented to engage stakeholders in key improvement efforts.

Stakeholders at all learning sites, including families, youth, and practitioners, engaged in activities focused on Phase 1 SSIP implementation planning including meetings and forums, both in-person and virtual modes. Feedback from local leadership teams and PaTTAN consultants were particularly valuable in refining and enhancing the model for continued implementation.

The BSE also continued collaboration with formal advisory groups through regular meetings with SEAP, and semi-annual meetings with the PDE Collaborative Work Group to examine SSIP evaluation questions and outcomes. The BSE also continued collaboration with national OSEP-funded partners, including NCSI, NTA:CT:C, and IDC. BSE uses multiple resources recommended by NCSI, including the Leading by Convening: A Blueprint for Authentic Engagement publication. PaTTAN and BSE continue to participate in monthly virtual meetings with the IDC SSIP Data Quality Peer Group to address key topics related to SSIP implementation, sustainability, and scale-up plans, including data collection and stakeholder input. These collaborations will continue throughout the next five years of SSIP implementation.

As part of its efforts to build stakeholder capacity and obtain stakeholder feedback, the BSE engaged with the SEAP at their regularly scheduled meetings. At these meetings, the BSE provided feedback to the Panel about the public forums and gathered input and recommendations for targets and improvement strategies for the SSIP. The Panel includes 11 parents of a student with a disability, as well as representatives from several advocacy groups.

There is a continuous focus on building capacity of families to support improved outcomes for students with disabilities. PaTTAN has an active family engagement initiative that promotes equitable partnerships among schools, families, and communities to advance student achievement. An extensive collection of resources designed to increase capacity of diverse groups of parents, including information specific to the SSIP, is available at <https://www.pattan.net/Graduation-Post-Secondary-Outcomes/State-Systemic-Improvement-Plan-1/SSIP-Resources-for-Families> .

The BSE and PaTTAN incorporate information about the SPP/APR/SSIP, including implementation activities and performance on targets, at the state's major annual conferences, including the PDE Conference, Special Education Leadership Academy, Community of Practice Transition Conference, Multi-

Tiered System of Support and Positive Behavior Support Implementers Forum, the High Expectations for Low Incidence Disabilities Conference, and the Autism Conference. Individual parents and groups representing parents are integral participants in all these conferences. The BSE actively collaborates with SEAP on all aspects of the SPP/APR/SSIP.

The comprehensive, robust relationship with HUNE has been extended with the current SSIP. HUNE continues to develop and post all SSIP-related resources on their websites in both English and Spanish. Specific tools such as the "Are You On-Track for Graduation? Check your A-B-C's" checklist for students, the Educator Toolkit, and Family Toolkit are widely used. Moreover, "The ABCs of Equity" tool helps schools affirm racial, cultural, and linguistic identities to foster positive outcomes for marginalized students. Stakeholders, families, students, and SEAP informed the development and review of each of these materials. The continued partnership with HUNE to serve Hispanic students with disabilities and their families included development of multiple publications, video resources and toolkits in English and Spanish, plus community outreach projects integrating academics, social emotional learning, and service to under-resourced areas.

On-going work with SEAP and enhanced communication and opportunities for collaboration with PEAL, HUNE, and other stakeholder groups has been planned. Opportunities for receiving feedback on improvement strategies and evaluating progress are being incorporated into major BSE-sponsored conferences. Stakeholder input informs resource revisions, BSE newsletters, and ongoing dissemination efforts on all SPP/APR initiative including the SSIP.

BSE and PaTTAN team members also recorded a two-part podcast with IDC for the "Data with Data" Series specifically focused on Pennsylvania's SSIP implementation.

Were there any concerns expressed by stakeholders during engagement activities? (yes/no)

NO

Additional Implementation Activities

List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.

Not applicable

Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR.

Not applicable

Describe any newly identified barriers and include steps to address these barriers.

Four of the learning sites are cyber schools serving thousands of students with disabilities across the Commonwealth. These students make up over 56% (n= 4,303) of the population in this SSIP. Systematic tracking of students is difficult because students are highly transient and do not remain in cyber charters for the same length of time that students spend in traditional school settings. Students transfer in and out of different cyber schools and to and from brick-and-mortar schools at an unusually high rate. Moreover, the unique course structures and grading frameworks for these sites makes ABC data difficult to capture. Students have broad flexibility in the type and number of academic courses and elective courses in which they enroll during a school year, quarter, or semester. For example, a student might enroll in only English/Language Arts courses and not in mathematics courses or restrict their enrollment to elective courses at any given time. Furthermore, although all cyber charter schools monitor attendance with the EWS, each measures attendance differently (e.g., login time, completed classwork, synchronous sessions, asynchronous sessions, etc.). Although attendance rates are calculated in the system, attendance may not be defined the same way across learning sites, thus making comparisons difficult. Finally, instructional models and methodology are also widely variable across each site, including levels of intervention, intensity, and duration. Over time, these factors may impact EWS implementation, CIS delivery, and ultimately graduation trajectories for students with disabilities. Technical assistance has been sought from national technical assistance centers to address implementation of our plan in a cyber charter school setting, but it appears that PA is unique in involving this type of school in its SSIP.

Provide additional information about this indicator (optional).

Although the learning sites from the previous SSIP are no longer receiving SSIP funds or state support for implementation, at the recommendation of IDC, a sustainability survey was conducted with them to measure sustainability and inform continued efforts. Survey results indicated:

- every learning site continues EWS implementation;
- every learning site continues data analysis and data-based decision-making in response to EWS results for SWD;
- every learning site continues to use either the full action plan template and data-team protocol or elements thereof in their team meetings and planning processes;
- the frequency of data reviews/team meetings varied across sites: Quarterly (4 sites); Monthly (3 sites); Biweekly (2 sites); Weekly (1 site); 2 times per grading period (2 sites);
- every learning site continues CIS implementation including: MTSS Academics (9 Sites); MTSS Behavior (12 Sites); Attendance and Alternative Programming (11 Sites); Family Engagement (10 Sites); Secondary Transition (12 Sites); Culturally Responsive Practices (11 Sites); 1 "Other" noted specific Positive Behavior Intervention Support strategies

- Specific CISs sustained at each site included:

- o MTSS Academics: 6 mentioned combinations of specific standard protocol programs; 1 mentioned Check & Connect; 5 described tutoring, pull-support, etc.;

- o MTSS Behavior: 6 mentioned SWPBIS; 4 mentioned Check & Connect; 2 mentioned “alternatives” to suspension; 1 mentioned STOIC; and 1 “Restorative Practices”;

- o Attendance and Alternative Programming: 5 mentioned credit recovery specifically; all others described various intervention efforts (tutoring, incentives, meetings, employment programs, etc.);

- o Family Engagement: all responses varied with descriptions of a variety of engagement and outreach initiatives;

- o Secondary Transition: all responses varied with descriptions of transition-focused initiatives such as “job coaching”, “transition supports”, “internships”, “OVR”, “College Access Coordinator”, “FASA Training”, “Work Programs”; 4 sites highlighted “credit recovery” specifically; and

- o Culturally Responsive Practices: all responses varied; 1 mentioned HERO program; 3 mentioned structured DEI committee work or recurring meetings; others listed “equity in-service”, “diversity curriculum”, “building bridges with police and community” or “diversity clubs”, etc.

- two-thirds of the learning sites responded that SSIP implementation has positively impacted graduation;

- a respondent from one learning site reported that SSIP implementation slowed student failure and decreased dropout rates but did not improve the graduation rate;

- respondents from three learning sites believed it was too soon to tell what the long-term impact would be on graduation rates;

- every learning site reported that the SSIP model was sustainable;

- every learning site reported that the EWS implementation was sustainable; and

- every learning site reported that the CIS delivery was sustainable.

Pennsylvania will continue to refine scale-up efforts based on lessons learned from this group as the 16 learning sites move through subsequent phases of the SSIP. Successful adoption of an EWS in FFY 2021 at all sites built the infrastructure and capacity needed to established baseline for comparison over time.

17 - Prior FFY Required Actions

None

17 - OSEP Response

17 - Required Actions

Certification

Instructions

Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.

Certify

I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.

Select the certifier's role:

Designated by the Chief State School Officer to certify

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.

Name:

Carole L. Clancy

Title:

Director, Bureau of Special Education

Email:

caclancy@pa.gov

Phone:

717.783.6880

Submitted on:

04/27/23 10:12:52 PM

Determination Enclosures

RDA Matrix

2023 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination¹

Percentage (%)	Determination
82.50%	Meets Requirements

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results	24	18	75.00%
Compliance	20	18	90.00%

2023 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	82%	1
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	77%	0
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	30%	2
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	91%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	32%	2
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	93%	1

Math Assessment Elements

Math Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	82%	1
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	77%	0
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	45%	2
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	92%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	28%	2
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	94%	1

¹ For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part B."

Exiting Data Elements

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	10	2
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	90	2

*Due to privacy concerns the Department has chosen to suppress this calculation.

**When providing exiting data under section 618 of the IDEA, States are required to report on the number of students with disabilities who exited an educational program through receipt of a regular high school diploma. These students meet the same standards for graduation as those for students without disabilities. As explained in 34 C.F.R. § 300.102(a)(3)(iv), in effect June 30, 2017, "the term regular high school diploma means the standard high school diploma awarded to the preponderance of students in the State that is fully aligned with State standards, or a higher diploma, except that a regular high school diploma shall not be aligned to the alternate academic achievement standards described in section 1111(b)(1)(E) of the ESEA. A regular high school diploma does not include a recognized equivalent of a diploma, such as a general equivalency diploma, certificate of completion, certificate of attendance, or similar lesser credential."

2023 Part B Compliance Matrix

Part B Compliance Indicator ²	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	0.00%	YES	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	N/A	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	0.00%	N/A	2
Indicator 11: Timely initial evaluation	95.56%	NO	2
Indicator 12: IEP developed and implemented by third birthday	98.32%	YES	2
Indicator 13: Secondary transition	84.99%	YES	1
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	100.00%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			1
Specific Conditions	None		
Uncorrected identified noncompliance	Yes, 2 to 4 years		

² The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2023_Part-B_SPP-APR_Measurement_Table.pdf

Data Rubric

FFY 2021 APR³

Part B Timely and Accurate Data -- SPP/APR Data		
APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1
	Subtotal	21
APR Score Calculation	Timely Submission Points - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right.	5
	Grand Total - (Sum of Subtotal and Timely Submission Points) =	26

³ In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

	618 Data ⁴			
Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 4/6/22	1	1	1	3
Personnel Due Date: 11/2/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Discipline Due Date: 11/2/22	1	1	1	3
State Assessment Due Date: 12/21/2022	1	1	1	3
Dispute Resolution Due Date: 11/2/22	1	1	1	3
MOE/CEIS Due Date: 5/4/22	1	1	1	3
			Subtotal	21
618 Score Calculation			Grand Total (Subtotal X 1.23809524) =	26.00

⁴ In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

Indicator Calculation	
A. APR Grand Total	26
B. 618 Grand Total	26.00
C. APR Grand Total (A) + 618 Grand Total (B) =	52.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	52.00
D. Subtotal (C divided by Denominator*) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

***Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.23809524.**

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2023 Submission

SPP/APR Data

1) Valid and Reliable Data - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

Part B 618 Data

1) Timely – A State will receive one point if it submits all EDFacts files or the entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part B Child Count and Educational Environments	C002 & C089	1 st Wednesday in April
Part B Personnel	C070, C099, C112	1 st Wednesday in November
Part B Exiting	C009	1 st Wednesday in November
Part B Discipline	C005, C006, C007, C088, C143, C144	1 st Wednesday in November
Part B Assessment	C175, C178, C185, C188	Wednesday in the 3 rd week of December (aligned with CSPR data due date)
Part B Dispute Resolution	Part B Dispute Resolution Survey in EMAPS	1 st Wednesday in November
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in EMAPS	1 st Wednesday in May

2) Complete Data – A State will receive one point if it submits data for all files, permitted values, category sets, subtotals, and totals associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. The data submitted to EDFacts aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in EMAPS. State-level data include data from all districts or agencies.

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

<https://sites.ed.gov/idea/how-the-department-made-determinations/>