STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

For reporting on
FFY 2020

Pennsylvania

PART B DUE February 1, 2022

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 2020, there were approximately 1.7 million students enrolled in Pennsylvania's public schools, with 18.1% of these students receiving special education. The state has 500 school districts and 176 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.

During the 2020-21 school year, Pennsylvania, like most other states and territories, continued to experience challenges resulting from the COVID-19 pandemic. LEAs across the state provided students with their educational programs through various models of instruction, including remote or online only, hybrid models that combined both remote/online and in-person instruction, and full time in-person instruction. According to October 2020 data available on the PDE's website, approximately 45.7% of students with disabilities had access to remote/online learning only, 42.8% had access to a hybrid model, and 11.5% had access to full time in- person instruction. These service delivery models sometimes fluctuated due to health and safety conditions occurring at the local level.

On June 30, 2021, Governor Wolf signed Act 66 into law. This Act permits 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).

At the onset of the pandemic the PDE developed a comprehensive website containing information and resources to support schools in mitigating the impact of the pandemic. This information is continuously updated and is available at education.pa.gov/COVID19. The Pennsylvania Training and Technical Assistance Network (PaTTAN) also posts extensive resources for families and educators, including key guidance documents on topics such as COVID-19 Compensatory Services, Evaluations and Reevaluations, and how to address COVID-19 in the IEP process. This information can be found at https://www.pattan.net/Search/?searchtext=COVID&searchmode=anyword.

To help schools manage policies and procedures during their COVID response, PDE created the Roadmap for Educational Leaders, a bank of research, tools, resources, and professional learning opportunities. A new phase of the Roadmap, Pennsylvania's Accelerated Learning Initiative, has been developed. It provides an extensive support system for re-opening schools and is designed to address academics, healthy system conditions, social emotional learning, and scaffolded supports. Information can be found at:
https://www.education.pa.gov/Schools/safeschools/emergencyplanning/COVID-19/SchoolReopeningGuidance/ReopeningPreKto12/CreatingEquitableSchoolSystems/AcceleratedLearning/Pages/default.aspx.

Extensive funding has been 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.

Throughout the pandemic, the Bureau of Special Education (BSE) has worked 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 student's rights under the Individuals with Disabilities Education Act (IDEA). This work is ongoing in the 2021-22 school year.

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

In FFY 2020, 57,595 preschool age children were enrolled in Pennsylvania's Part B 619 Preschool Early Intervention (EI) program. The 34 intermediate units, school districts and agencies who have responsibility for the provision of EI services provided nearly 17,000 initial evaluations of eligibility, over 7,100 initial Individualized Education Plans, and over 24,000 re-evaluations in FFY 2020.

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).

BEISFS undertook an extensive stakeholder process in FFY 2020. BEISFS successfully collaborated with families in EI programs, the SICC, SEAP, parent advocacy and training programs, EI professional organizations, and members of the early childhood community to review historical and current data, review proposed targets, and brainstorm improvement strategies.

During FFY 2020, Pennsylvania's EI program continued to respond to the challenges of providing EI services during the ongoing COVID-19 pandemic. 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. Throughout the pandemic, the Office of Child Development and Early Learning partnered 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

Additional information related to data collection and reporting, where influenced by the COVID-19 pandemic, is included in specific indicators within this report.

Number of Districts in your State/Territory during reporting year
676
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 2020 the BSE continued to fulfill its general supervision responsibilities under IDEA. The BSE operated at full capacity but shifted to virtually managing its systems of monitoring, complaint management, dispute resolution, and timely identification and correction of noncompliance.

Monitoring

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.

In addition to cyclical monitoring, the BSE may conduct focused monitoring based on data and recommendations from the Special Education Advisory Panel (SEAP) and other stakeholder groups. Target monitoring may occur when information from sources such as complaints or other dispute resolution data suggests a systemic concern.

The BSE also 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 within 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 BSE's Cyclical Monitoring for Continuous Improvement (CMCI) system is aligned with OSEP's Results Driven Accountability. Although a major focus of the state's current monitoring continues to be ensuring compliance with regulatory requirements, BSE's system also incorporates outcome data, such as graduation rates and an Educational Benefit Review that evaluates whether students are deriving benefit from their programs. The CMCI system also 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. Mediation in PA underwent a significant change in this reporting period as described in Indicator 16.

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)

PA's supervision of local EI programs occurs on an ongoing basis. Each EI program participates in a verification visit every four years. There are seven areas reviewed during the verification visit that cover the components of the EI program, including data reviews, policy reviews, reviews of child records and observations of service delivery. Verification teams include BEISFS staff and Early Intervention Technical Assistance (EITA) staff. The use of teams allows BEISFS to vary the number of staff conducting verification visits based on the performance level of the local EI program and contributes to inter-rater reliability. Following the verification visits, local programs develop Quality Enhancement Plans (QEPs) that document correction of noncompliance and activities to enhance program quality. BEISFS staff validate that all areas of noncompliance identified during the verification visits are corrected within a year.

BEISFS's annual determination process uses data from the SPP indicators, annual family survey, complaints, and data quality measures. It 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. Based on determination results, local EI programs update their QEP to reflect improvement activities. The determination is used to identify and provide differentiated levels of support to local programs. This allows the BEISFS to use resources in a more effective and efficient manner and have the greatest impact on program practices. Additional on-site visits may occur if, during the verification cycle, there is a significant decrease in program performance or if individual or systemic concerns arise.

PA uses a comprehensive data management system that enables the review of individual child data and statewide data. This system supports referral information, service coordination activities, planning information, financial management, quality measures and other reporting needs for the BEISFS. It also generates documents and creates reports to manage the program. Rigorous analysis of the data by staff on a monthly, quarterly and annual basis allows BEISFS to ensure data driven decision making for quality improvement.

PA ensures that a complaint management process is implemented. BEISFS staff reviews data from complaint investigations, mediations and due process hearings to improve the EI system. Trends are analyzed, training needs are identified, and improvement strategies are implemented.

Each EI program is assigned a BEISFS advisor who serves as the primary contact, and is responsible for addressing budget issues, compliance issues, complaint issues, policy and procedural requirements and overall program performance. Each BEISFS advisor has ongoing contact with each of his/her local programs. These contacts occur throughout the year during verification visits, validation visits, training and technical assistance visits, complaint investigations, biannual leadership meetings and bi-monthly statewide leadership meetings. This 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 comprehensive and effective general supervision; 3) ensures the correction of noncompliance within one year; and 4) allows for the implementation of improvement 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, by design, supports the efforts and initiatives of the PDE and BSE and builds capacity of Intermediate Units (IUs) and LEAs to serve students with disabilities. The training and technical assistance (TA) is tied directly to federal regulatory requirements. PaTTAN provides a continuum of evidence-based TA designed to help LEAs improve student outcomes. 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 Training and Consultation (TaCs) positions within each of the state's 29 IUs. These FTE positions cover Multi-Tiered Systems of Support (MTSS) for Academics and Behavior/Interagency, LRE/Inclusive Practices, Autism, Assistive Technology, Secondary Transition, and other initiatives based on local TaC priorities. PaTTAN and IU TaCs fulfill the federal requirement for consultation and technical assistance functions.

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 professional development systems. TA is based on current research and evidence-based practices, 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 aspect 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, 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. The 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 Evidence-Based Practices (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.

Autism College and High School Integration for Educational and Vocational Excellence (AACHIEVE): This project focuses on supporting college bound students on the autism spectrum as they transition to higher education. As part of PDE/BSE's commitment to the project, PaTTAN staff work with high schools and collaborate with several local colleges/universities to create a successful framework for college access and supporting successful degree completion.

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

The EITA system 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 professional development 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 professional development activities. Examples of current statewide training initiatives include coaching across settings, inclusive practices, 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, evidenced based practices, 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 EI 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, impacts student with disabilities, has expertise in Results Driven Accountability, and has personnel to effectively support the SPP/APR/SSIP.

This system serves as the state's TA and professional development (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 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 vision of the project is to build the capacity of early intervention 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. The grant builds capacity of LEAs to address academic and behavioral needs of middle school students with disabilities, particularly those students identified with emotional disturbance.

• 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. The focus is to implement a customized employment program 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 least restrictive environment (LRE), climate and culture, effective behavioral systems via equitable learning, positive behavior plans, functional behavior assessment, manifestation determinations, and the use of Pennsylvania's Restraint Information System Collection.

• 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 Chapters 14 and 711. The supports include PD linked to the SPP/APR Indicators, development of compliant special education forms, student data collections, and the monitoring system.

• Assistive Technology (AT) and Accessible Instructional Materials: PaTTAN maintains a short-term loan library that has many AT devices. The PaTTAN Accessible Instructional Materials Center provides 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 was entered into by and between the Pennsylvania Department of Labor and Industry, through OVR, PDE and the BSE. The MOU 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. PaTTAN's website (www.pattan.net) offers training opportunities, resources, and publications supporting student learning and achievement.

• 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: Re-envisioning Pennsylvania's Approach to Special Education Personnel: The Pennsylvania Department of Education, Bureau of Special Education (BSE) is addressing unfilled positions and high attrition rates among special education personnel by focusing on strategies to attract, prepare, and retain (APR) personnel. The BSE's APR Steering Committee will utilize input and feedback from a cross-section of stakeholders to envision innovative practices, policies, and procedures to effectively address shortages.

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

Pennsylvania's professional development system focuses on a model that ensures 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. Professional development support in EI core competencies - providing professional development 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. Professional development support for EI evidence-based practices: providing professional development activities to EI staff based on innovative evidence-based practices, 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)

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, e.g., the SEAP, the Parent Education and Advocacy Leadership Center (PEAL), which serves as the state's PTI, Hispanos Unidos para Ninos Exceptionales (HUNE), a CPRC, LEAs, and others that could assist the BSE with outreach to groups and individuals. The decision was made to hold a series of public forums and also develop a dedicated website to both inform stakeholders and receive their input.

The PDE widely disseminated announcements inviting participation in the forums and online input options. These announcements were distributed to the state's SEAP, PTI and CPRC, state and local advocacy organizations representing various disability and demographic groups, such as the Arc, Autism Society, Easter Seals, Local Task Forces on Right to Education, colleges and universities, school districts, charter schools, intermediate units, approved private schools, the ODR Stakeholder Council, and a large number of individual parents and professionals that have been engaged in previous SPP/APR/SSIP work or may wish to participate. PaTTAN also disseminated the announcement to the Families to the Max Network, Pennsylvania's grassroots Statewide Family Network that includes hundreds of families of students with disabilities. The announcements were also posted on websites customarily accessed by educators, agencies, and families of students with disabilities.

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

Pennsylvania's EI system has two primary stakeholder groups, one with a birth-5 focus, the State Interagency Coordinating Council (SICC), and one with a 3-21 focus, the SEAP. Using these two groups allows 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 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 date, current year data, targets, and activities implemented during the fiscal year. SEAP, SICC and CSE make recommendations for changes or additional activities if 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:
172
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)

Parents were engaged as partners throughout this process. See description in the section below, titled "Soliciting Public Input" for a detailed description of how the public forums and the online input systems engaged stakeholders in setting targets, analyzing data, developing improvement strategies, and evaluating progress.

Specific to parent members engagement, the BSE planned and conducted three public forums to engage groups and individuals in addressing Indicators 1-16 of the SPP/APR. Four hundred sixty-five individuals registered for these three forums, with parents and advocates representing more than 25% of the total. In addition to parents participating along with all other stakeholders in these three forums, the BSE collaborated with the PEAL Center to plan and conduct an evening forum open exclusively to families to address Indicators 1-17. The BSE Director and Executive Director of PEAL gave joint opening comments, and the forum was facilitated by staff that work in the family engagement initiative at PaTTAN. Twenty-three families registered for the event.

The BSE also collaborated with HUNE to focus on outreach to Hispanic parents. HUNE conducted six public forums over five months and provided feedback to the BSE for results Indicators. A total of 63 family members participated in these forums.

An additional forum was conducted to address only Indicator 17, the SSIP. One hundred twenty-nine individuals registered to participate; parents and advocates represented 21% of the total.

The BSE conducted three meetings with the SEAP. At these meetings, the BSE provided feedback to the Panel about the public forums and gathered the Panel's input and recommendations for targets and improvement strategies for Indicators 1-17. The Panel includes 11 parents of a student with a disability, as well as a number of advocates.

Nearly a third (32%) of those who provided online input were parents or parent representatives.

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

Family members were involved in development, implementation and participation in all four steps of the SPP/APR stakeholder feedback process

described in the "Soliciting Public Input" section of this APR. BEISFS built the stakeholder process to ensure that family members were involved in the development of the process for gaining stakeholder input and were provided multiple opportunities for group and individual feedback. BEISFS partnered with federally and state funded PTIs to support individual and group opportunities for parents to provide feedback. The parent co-chair of the SICC participated as part of the Executive Stakeholder Input Team. A total of 47 parents participated across all the stakeholder activities.

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 and 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/SSIP, 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/SSIP. SEAP includes a diverse group of parents and advocates.

Specific to increasing capacity of diverse groups of parents in the process of setting targets, analyzing data, developing improvement strategies, and evaluating progress for the SPP/APR/SSIP, 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.

PaTTAN consultants facilitated breakout groups at all forums and content experts for each Indicator were available throughout the forums to respond to any requests for clarification or provide further explanations if participants had questions. This increased the capacity of stakeholders to provide high quality feedback on complex topics.

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

To increase the capacity to gather input from diverse groups of family members, the SPP/APR stakeholder engagement plan included four steps, including 1) translating SPP Portal print resources into Spanish; 2) providing Spanish versions of the SPP Portal; 3) providing directions on how to add language captioning to online SPP indicator videos; and 4) providing a Spanish interpreter at SPP Family Forums. Additional translation services were available on request.

BEISFS and EITA staff monitored the SPP online feedback survey to ensure that comments were received from diverse groups of parents based on race, ethnicity, geographic region and role. Information on the demographics of those who had provided feedback were provided to key stakeholder groups on an ongoing basis.

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 Indicators 1-16. Due to the pandemic all forums were conducted virtually. Indicators were grouped by related content/ interest areas, e.g., the first forum focused on graduation, dropout, and post-school outcomes. Each forum began with an overview, after which participants moved to breakout rooms which were kept small to promote optimal participation. Each breakout room had a trained facilitator to support the group throughout the process. The breakout session began with a detailed power point presentation showing how the indicator is defined and calculated, how data are analyzed, the state's performance on prior SPP/APR targets, baseline and trend analyses, comparisons with similar states, special considerations such as the potential impact of the COVID-19 pandemic on performance, and how progress is evaluated. Stakeholders were then asked to discuss the information in depth, provide input on targets and recommendations for improvement strategies, and reach consensus where feasible. Notetakers recorded all input.

The additional forums listed below followed the same process to gather input and recommendations that was used at the May forums:

A public forum in July focused exclusively on the SSIP.

An evening forum in August was open exclusively to families, and addressed all 17 Indicators.

Six public forums were conducted by HUNE (with support from BSE) from July through December, and addressed all Indicators.

A forum in June with the ODR Stakeholders Council focused on Indicators 15 and 16.

Three meetings were held with SEAP from September through early January to review forum recommendations and receive the Panel's input on all Indicators.

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

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/SSIP 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)

A broad, systemic plan for soliciting public input was developed and implemented to gather feedback on the Preschool Early Intervention indicators. All steps of the plan included an opportunity for stakeholders to provide feedback on setting indicator targets, analyze historic and current data, develop improvement strategies and evaluate indicator progress.

The first step in the plan was to convene an Executive Stakeholder Input (ESI) Team. The ESI team was composed of the parent co-chair of the SICC, the professional co-chair of the SICC, the BEISFS Bureau Chief and Data Manager for the Preschool Early Intervention program, Special Assistant to the Deputy Secretary for Family Engagement, BEISFS Early Intervention advisor and EITA project manager. The ESI team's goal was to develop and monitor the process for stakeholder input. On at least a monthly basis from December 2020 to December 2021, the ESI team met or communicated through email about the progress in gathering stakeholder input.

The second step in the SPP stakeholder process was holding Stakeholder Forum for members of all of BEISFS's key advisory/stakeholder groups. Invitations to the Stakeholder Forum were sent to parent and professional members of SEAP, SICC, CSE, and members of advisory groups for children with low incidence disabilities. The forum provided an overview of the Preschool results indicators, reviewed current and historic data, and discussed proposed targets. Stakeholders were provided with small group opportunities to give feedback on the proposed targets and identify activities that would promote improvement on the indicator. Notes were taken of participant comments and analyzed for key themes.

The third step in the SPP stakeholder process was holding a series of live Family Forums to gather input specifically from family members who currently have or in the past had a child in an Early Intervention program. Four Family Forums were held, two each on December 9 and 15, 2021. Day and evening sessions were held. The forum content was provided in a similar manner to the Stakeholder Forum and focused on family engagement indicators for Part B preschool and Part C, Indicator B6 (Least Restrictive Environment), and Indicators C5 & C6 (Child Find). Family members were provided with small group opportunities to give feedback on the proposed targets and identify activities that would promote improvement on the indicator. Two of the Family Forums used a Spanish interpreter.

Information on the Family Forums was disseminated through the SICC, SEAP, CSE, and Local Interagency Coordinating Councils (LICCs). Early Intervention leaders were encouraged to disseminate the information to families in their Early Intervention programs. Family Forum materials were also disseminated to parent organizations (PTIs) within Pennsylvania including the PEAL Center, HUNE, Parents as Partners in Professional Development, and Competence and Confidence Partners in Policymaking EI.

The fourth step in the SPP stakeholder process was the development and dissemination of strategies for stakeholder organizations and individual stakeholders to provide feedback. A Discussion Guide was developed in both English and Spanish. It included steps that individual stakeholders could take to provide feedback. It also included information for stakeholder organizations who were interested in holding their own input forums. The information was disseminated statewide through leadership and parent meetings, at scheduled Stakeholder and Family Forums, and through email communication to stakeholder groups. It was reported that SPP feedback was gathered at LICC meetings, Early Intervention staff meetings, parent organizations, and provided to families in Early Intervention by staff.

All of the steps in the stakeholder input process were supported through the development of an online SPP Portal. The SPP Portal was used as a central location for short videos describing each indicator, Discussion Guides (available in English and Spanish), links to online feedback forms, and other resources related to SPP stakeholder input. The SPP Portal was described in announcements as the means for stakeholders to provide feedback. A link was provided on the SPP Portal that led to a Spanish description on the stakeholder feedback process.

In total, feedback was gathered from 207 Early Intervention stakeholders, including 47 parents.

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 2020 SPP/APR, including any revisions to targets.

Following this submission, BSE plans to broadly disseminate an Executive Summary that describes the input received by BSE, the outcomes from the process, and a plan for follow up communications with stakeholders.
On-going work with SEAP and enhanced communication 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. Additionally, a dedicated website is being developed to post updates, respond to questions and concerns, and receive stakeholder input on the state's SPP/APR, including its SSIP.

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

A summary of the stakeholder process and results were presented to SEAP in January 2022 and the SICC in February 2022. The summary report will be disseminated to the public in spring 2022. All details of the results of the stakeholder feedback process, including meeting agendas, notes,

stakeholder feedback summaries on proposed targets and SPP/APR activities, presentation materials, and demographics of participating stakeholders will also be made available to the public in spring 2022.

Reporting to the Public

How and where the State reported to the public on the FFY 2019 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 2019 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 2019 APR in 2021, 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 each LEA in meeting SPP/APR targets. Reporting on FFY 2019 LEA performance was completed in accordance with 34 CFR §300.602(b)(1)(i)(A). These reports are located at the following website: https://penndata.hbg.psu.edu/Public-Reporting/SEDR-Reports.

The FFY 2019 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.

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

Pennsylvania continues 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 Preschool Early Intervention program.

Annually, an announcement is 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. SICC, SEAP, CSE, and Early Intervention leaders are also directly informed of the availability of the SPP/APR.

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 2019 data for each Preschool Early Intervention program and is updated to include each new SPP/APR after the submission of the SPP/APR but no later than 120 days from the submission of the SPP/APR. Information can be found at the website: https://penndata.hbg.psu.edu/Public-Reporting/Early-Intervention.

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 2020 SPP/APR, use data from 2019-2020), 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[2]

Baseline Year	Baseline Data
2019	86.13%

FFY	2015	2016	2017	2018	2019
Target >=	72.46%	72.87%	75.15%	72.60%	73.70%
Data	71.52%	74.06%	73.64%	70.24%	70.7%[3]

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	85.90%	85.90%	85.90%	86.71%	87.52%	88.13%

Targets: Description of Stakeholder Input

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

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	19,160
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	*[1]

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[1] Data suppressed due to privacy protection

[2] Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator.

[3] Percentage blurred due to privacy protection

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	14
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2,271

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
19,160	*1	70.7%[4]	85.90%	*1	Met target	N/A

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. There was no statewide graduation requirement for the classes of 2020, 2021, nor will there be for the class of 2022. 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)

The baseline year shifted as a result of the change in the Indicator Measurement Table from the use of the Adjusted Cohort Graduation Rate (ACGR) to the use of data collected under section 618 of IDEA, using the definitions in EDFacts file specification FS009. The 2018-19 year was selected as the baseline year as it was the last year that these data were collected prior to the COVID-19 pandemic. Stakeholders supported this change in baseline year.

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[1] Data suppressed due to privacy protection
[4] Percentage blurred due to privacy protection

1 - Prior FFY Required Actions

None

1 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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

OPTION 1:

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.

OPTION 2 (For FFY 2020 ONLY):

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

OPTION 1:

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.

OPTION 2 (For FFY 2020 ONLY):

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.

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 2020 SPP/APR, use data from 2019-2020), and compare the results to the target.

With the FFY 2020 SPP/APR, due February 1, 2022, States may use either option 1 or 2. States using Option 2 must provide the actual numbers used in the calculation.

OPTION 1:

Use 618 exiting data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020). 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.

OPTION 2:

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.

If the State has made or proposes to make changes to the data source or measurement under Option 2, when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012, the State should include a justification as to why such changes are warranted.

Options 1 and 2:

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.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, States must report data using Option 1 (i.e., the same data as used for reporting to the Department under section 618 of the IDEA). Option 2 will not be available beginning with the FFY 2021 SPP/APR.

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	13.39%

FFY	2015	2016	2017	2018	2019
Target <=	10.97%	10.97%	10.97%	10.97%	9.00%
Data	11.95%	12.97%	12.02%	13.55%	13.39%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	12.79%	12.79%	12.79%	12.32%	11.86%	11.39%

Targets: Description of Stakeholder Input

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

Please indicate the reporting option used on this indicator

Option 1

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	19,160
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	*[1]
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	14
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2,271

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
2,271	*[1]	13.39%	12.79%	*[1]	Met target	N/A

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)

The baseline year shifted as a result of the change in the Indicator Measurement Table for Indicator 1 from the use of the Adjusted Cohort Graduation Rate (ACGR) to the use of data collected under section 618 of IDEA, using the definitions in EDFacts file specification FS009. The 2018-19 year was selected as the baseline year as it was the last year that these data were collected prior to the COVID-19 pandemic, and to align with the baseline year for Indicator 1. Stakeholders supported this change in baseline year.

2 - Prior FFY Required Actions

None

2 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

2 - Required Actions

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[1] Data suppressed due to privacy protection

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	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	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.

For additional information on stakeholder input for this Indicator, please refer to the Stakeholder Involvement section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

03/30/2022

Reading Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	26,312	27,895	8,294
b. Children with IEPs in regular assessment with no accommodations	5,614	5,556	1,251
c. Children with IEPs in regular assessment with accommodations	11,243	9,468	1,432
d. Children with IEPs in alternate assessment against alternate standards	1,918	1,889	1,573

Data Source:

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

03/30/2022

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	26,301	27,892	18,342
b. Children with IEPs in regular assessment with no accommodations	5,788	5,628	5,854
c. Children with IEPs in regular assessment with accommodations	11,147	9,316	6,079
d. Children with IEPs in alternate assessment against alternate standards	1,916	1,889	1,642

*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 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	18,775	26,312		95.00%	71.36%	N/A	N/A
B	Grade 8	16,913	27,895		95.00%	60.63%	N/A	N/A
C	Grade HS	4,256	8,294		95.00%	51.31%	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	18,851	26,301		95.00%	71.67%	N/A	N/A
B	Grade 8	16,833	27,892		95.00%	60.35%	N/A	N/A
C	Grade HS	13,575	18,342		95.00%	74.01%	N/A	N/A

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.

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

https://futurereadypa.org/

Provide additional information about this indicator (optional)

In the 2020-21 school year, the Office of Elementary and Secondary Education of the USDE provided flexibility to states in conducting statewide assessments for accountability purposes under the Every Student Succeeds Act. PA took advantage of the flexibility that permitted states to extend the time assessments could be administered (through 30 September, 2021). Consequently, the assessment data submitted with the Consolidated State Performance Report I included only partial participation and performance data. PA submitted complete data during the correction period of 17-31 March, 2022. The IDEA Part B FFY 2020 SPP/APR User Guide states on page 18 that a second snapshot of the assessment data would occur in March 2022 and will be loaded into the APR Tool before the Clarification period. BSE took advantage of this second snapshot and used the Opportunity for Clarification to revise Indicator 3A to reflect the complete data submitted during the correction period.

3A - Prior FFY Required Actions

None

3A - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State did not provide a Web link demonstrating that the State reported publicly on the participation of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported the number of children with disabilities participating in regular assessments, and the number of those children who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3A - 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.

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	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	22.80%	25.79%	28.78%	31.77%	34.76%	37.75%
Reading	B >=	Grade 8	15.03%	18.28%	21.53%	24.78%	28.03%	31.28%
Reading	C >=	Grade HS	13.16%	15.93%	18.70%	21.47%	24.24%	27.01%
Math	A >=	Grade 4	13.29%	16.44%	19.59%	22.74%	25.89%	29.04%
Math	B >=	Grade 8	3.57%	7.22%	10.87%	14.52%	18.17%	21.82%
Math	C >=	Grade HS	19.79%	22.86%	25.93%	29.00%	32.07%	35.14%

Targets: Description of Stakeholder Input

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

FFY 2020 Data Disaggregation from EDFacts

Data Source:

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

03/03/2022

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	16,857	15,024	2,683
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,297	1,139	144
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,546	1,119	209

Data Source:

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

03/03/2022

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	16,935	14,944	11,933
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,506	335	1,280
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	745	198	1,081

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	3,843	16,857		22.80%	22.80%	N/A	N/A
B	Grade 8	2,258	15,024		15.03%	15.03%	N/A	N/A
C	Grade HS	353	2,683		13.16%	13.16%	N/A	N/A

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	2,251	16,935		13.29%	13.29%	N/A	N/A
B	Grade 8	533	14,944		3.57%	3.57%	N/A	N/A
C	Grade HS	2,361	11,933		19.79%	19.79%	N/A	N/A

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.

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

https://futurereadypa.org/

Provide additional information about this indicator (optional)

In the 2020-21 school year, the Office of Elementary and Secondary Education of the USDE provided flexibility to states in conducting statewide assessments for accountability purposes under the Every Student Succeeds Act. PA took advantage of the flexibility that permitted states to extend the time assessments could be administered (through 30 September, 2021). Consequently, the assessment data submitted with the Consolidated State Performance Report I included only partial participation and performance data. PA submitted complete data during the correction period of 17-31 March, 2022. The IDEA Part B FFY 2020 SPP/APR User Guide states on page 18 that a second snapshot of the assessment data would occur in March 2022 and will be loaded into the APR Tool before the Clarification period. BSE took advantage of this second snapshot and used the Opportunity for Clarification to revise Indicator 3B to reflect the complete data submitted during the correction period.

BSE has aligned the targets for this Indicator with the methodology used to develop the interim measures that appear in Pennsylvania's Consolidated State Plan. Although the long term goals and interim measures for students with disabilities in the plan apply to all grade levels assessed, BSE used the same methodology to calculate targets for grades 4, 8 and high school to meet the requirements of this Indicator. Stakeholders have endorsed using this method for setting targets for Indicator 3B.

3B - Prior FFY Required Actions

None

3B - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State did not provide a Web link demonstrating that the State reported publicly on the performance of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported, compared with the achievement of all children, including children with disabilities and the performance results of children with disabilities on regular assessments, at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3B - 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.

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	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	28.94%	28.94%	28.94%	28.94%	28.94%	29.94%
Reading	B >=	Grade 8	34.30%	34.30%	34.30%	34.30%	34.30%	35.30%
Reading	C >=	Grade HS	38.40%	38.40%	38.40%	38.40%	38.40%	39.40%
Math	A >=	Grade 4	52.14%	52.14%	52.14%	52.14%	52.14%	53.14%
Math	B >=	Grade 8	10.96%	10.96%	10.96%	10.96%	10.96%	11.96%
Math	C >=	Grade HS	36.24%	36.24%	36.24%	36.24%	36.24%	37.24%

Targets: Description of Stakeholder Input

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

FFY 2020 Data Disaggregation from EDFacts

Data Source:

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

03/03/2022

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	1,918	1,889	1,573
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	555	648	604

Data Source:

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

03/03/2022

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	1,916	1,889	1,642
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	999	207	595

FFY 2020 SPP/APR Data: Reading 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	555	1,918		28.94%	28.94%	N/A	N/A
B	Grade 8	648	1,889		34.30%	34.30%	N/A	N/A
C	Grade HS	604	1,573		38.40%	38.40%	N/A	N/A

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	999	1,916		52.14%	52.14%	N/A	N/A
B	Grade 8	207	1,889		10.96%	10.96%	N/A	N/A
C	Grade HS	595	1,642		36.24%	36.24%	N/A	N/A

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.

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

https://futurereadypa.org/

Provide additional information about this indicator (optional)

In the 2020-21 school year, the Office of Elementary and Secondary Education of the USDE provided flexibility to states in conducting statewide assessments for accountability purposes under the Every Student Succeeds Act. PA took advantage of the flexibility that permitted states to extend the time assessments could be administered (through 30 September, 2021). Consequently, the assessment data submitted with the Consolidated State Performance Report I included only partial performance data. PA submitted complete data during the correction period of 17-31 March, 2022. The IDEA Part B FFY 2020 SPP/APR User Guide states on page 18 that a second snapshot of the assessment data would occur in March 2022 and will be loaded into the APR Tool before the Clarification period. BSE took advantage of this second snapshot and used the Opportunity for Clarification to revise Indicator 3C to reflect the complete data submitted during the correction period.

As this is the first year of the alternate assessment with a new vendor, FFY 2020 becomes the baseline year. With only baseline data available, BSE has chosen to maintain baseline as targets for the first five years of the SPP/APR, and setting a target above baseline in FFY 2025 to meet the requirement for the terminal target to show improvement over baseline. When sufficient data become available in upcoming years, BSE expects to reset targets to reflect the performance observed for students with disabilities on the new alternate assessment. Stakeholders have endorsed using this method for setting targets for Indicator 3C.

3C - Prior FFY Required Actions

None

3C - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State did not provide a Web link demonstrating that the State reported publicly on the participation of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported the number of children with disabilities, if any, participating in alternate assessments based on alternate academic achievement standards, at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3C - 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.

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 2020-2021 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2020-2021 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 2020-2021 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2020-2021 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	2020	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	33.65	32.25	30.85	29.45	28.05	26.65
Reading	B <=	Grade 8	37.41	35.81	34.21	32.61	31.01	29.41
Reading	C <=	Grade HS	36.05	34.35	32.65	30.95	29.25	27.55
Math	A <=	Grade 4	22.04	21.04	20.04	19.04	18.04	17.04
Math	B <=	Grade 8	18.35	17.45	16.55	15.65	14.75	13.85
Math	C <=	Grade HS	42.45	40.75	39.05	37.35	35.65	33.95

Targets: Description of Stakeholder Input

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

FFY 2020 Data Disaggregation from EDFacts

Data Source:

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

03/03/2022

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	93,128	86,619	11,278
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	16,857	15,024	2,683
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	46,136	41,981	4,052
d. All students in regular assessment with accommodations scored at or above proficient against grade level	6,430	3,443	1,498
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,297	1,139	144
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,546	1,119	209

Data Source:

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

03/03/2022

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	93,799	86,258	102,506
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	16,935	14,944	11,933
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	30,100	17,748	53,158
d. All students in regular assessment with accommodations scored at or above proficient against grade level	3,043	1,156	10,633
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,506	335	1,280
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	745	198	1,081

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	22.80%	56.44%		33.65	33.65	N/A	N/A

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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
B	Grade 8	15.03%	52.44%		37.41	37.41	N/A	N/A
C	Grade HS	13.16%	49.21%		36.05	36.05	N/A	N/A

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	13.29%	35.33%		22.04	22.04	N/A	N/A
B	Grade 8	3.57%	21.92%		18.35	18.35	N/A	N/A
C	Grade HS	19.79%	62.23%		42.45	42.45	N/A	N/A

Provide additional information about this indicator (optional)

Links to the page(s) where public reports of assessment results are provided:

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

https://futurereadypa.org/

Additional information about this indicator:

In the 2020-21 school year, the Office of Elementary and Secondary Education of the USDE provided flexibility to states in conducting statewide assessments for accountability purposes under the Every Student Succeeds Act. PA took advantage of the flexibility that permitted states to extend the time assessments could be administered (through 30 September, 2021). Consequently, the assessment data submitted with the Consolidated State Performance Report I included only partial participation and performance data. PA submitted complete data during the correction period of 17-31 March, 2022. The IDEA Part B FFY 2020 SPP/APR User Guide states on page 18 that a second snapshot of the assessment data would occur in March 2022 and will be loaded into the APR Tool before the Clarification period. BSE took advantage of this second snapshot and used the Opportunity for Clarification to revise Indicator 3D to reflect the complete data submitted during the correction period.

BSE has aligned the targets for this Indicator with the methodology used to develop the interim measures that appear in Pennsylvania's Consolidated State Plan. Although the long term goals and interim measures for students with disabilities in the plan apply to all grade levels assessed, BSE used the same methodology to calculate targets for grades 4, 8 and high school to meet the requirements of this Indicator. The gaps in proficiency rates were calculated using this methodology for both the students with disabilities and the All Students groups. Stakeholders have endorsed using this method for setting targets for Indicator 3D.

3D - Prior FFY Required Actions

None

3D - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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 2020 SPP/APR, use data from 2019-2020), 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 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 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 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 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 2020 SPP/APR, the data for FFY 2019), 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	2015	2016	2017	2018	2019
Target <=	2.42%	0.00%	1.97%	1.97%	1.00%
Data	1.63%	1.34%	1.79%	2.22%	2.80%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	1.82%	1.82%	1.66%	1.66%	1.34%	1.00%

Targets: Description of Stakeholder Input

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

FFY 2020 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.

2

Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
7	676	2.80%	1.82%	1.04%	Met target	No Slippage

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%.

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 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.

Utilizing the State's definition of significant discrepancy and methodology, prior to June 30, 2021, the BSE conducted on-site reviews of all 7 LEAs that were identified as having a significant discrepancy. In preparation for the on-site review, each LEA was required to prepare and analyze its suspension data, including an examination of patterns and trends, and policies and procedures for functional behavioral assessment, manifestation determinations, IEPs, procedural safeguards and provision of FAPE to students whose removal constituted a change of placement.

To determine compliance with requirements of 34 CFR §300.170(b), the BSE reviewed each LEA's policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports and implementation of procedural safeguards to ensure that these policies, procedures, and practices comply with IDEA. The BSE reviewed each LEA's Facilitated Self Assessment (FSA). Each LEA provided a list to the BSE of all students with disabilities who were suspended during the entire year. The Monitoring Chairperson reviewed a sample of the files of students who were suspended or expelled and considered all data to determine whether the LEA was in compliance with IDEA requirements.

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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.

The BSE conducted on-site reviews as described above, and determined that two LEAs had policies, procedures, or practices that did not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. Therefore, the state issued written findings of noncompliance. The LEAs were required to develop a Corrective Action Verification Plan (CAVP) that is approved by BSE. The BSE monitored implementation of corrective action through interviews with administrative personnel, analysis of updated suspension data, and student file reviews. When the BSE conducts reviews to verify correction of noncompliance, the BSE looks for evidence that the LEA understands the regulations, including definitions and data reporting, and has updated policies, procedures, and practices as required by

the BSE. The state verified that all LEAs in corrective action for noncompliance have corrected policies, procedures, and practices as well as each individual case of noncompliance, in conformance with OSEP Memorandum 09-02. The BSE documents correction for the individual student(s) with findings of noncompliance from the initial verification review, then reviews a new sample of records of students suspended subsequent to findings being issued.

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
3	3	0	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*

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 LEAs are 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. BSE verified that all corrective action of noncompliance in these LEAs was completed within timelines.

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

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 corrective action for all citations of noncompliance where corrective action can be implemented. This is done through the Individual Corrective Action Plan (ICAP) component of the overall CAVP web-based system. In the ICAP, the BSE reviews 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 reviews a new sample of student files to verify systemic compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2020 SPP/APR, on the correction of noncompliance that the State identified in FFY 2019 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 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Response to actions required in FFY 2019 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 three LEAs identified in FFY 2019 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 three 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 evidence-based-practices, 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 three 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 three LEAs identified in FFY 2019. 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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

4A - 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.

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 2020 SPP/APR, use data from 2019-2020), 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 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 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 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 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 2020 SPP/APR, the data for FFY 2019), 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	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.59%	4.55%	9.09%	9.09%	7.14%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
7	1	14	7.14%	0%	7.14%	Did not meet target	No Slippage

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 2019-20, 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)

Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 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.

Utilizing the State's definition of significant discrepancy and methodology, prior to June 30, 2021, the BSE conducted on-site reviews of all 7 LEAs that were identified as having significant discrepancy in rates of suspensions and expulsions by race or ethnicity. In preparation for the review, each LEA was required to prepare and analyze its suspension data, including an examination of patterns and trends, and policies and procedures for functional behavioral assessment, manifestation determinations, IEPs, procedural safeguards, and provisions of FAPE in a culturally responsive manner to students whose removal constituted a change in placement. The LEAs provided written responses to a series of probes designed to gather information and gain insights from the LEA team.

To determine compliance with the requirements of 34 CFR §300.170(b), the BSE reviewed each LEA's policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports and implementation of procedural safeguards to ensure that these policies, procedures, and practices comply with IDEA. The BSE reviewed each LEA's FSA and considered all data to determine whether the LEA was in compliance with the IDEA requirements. The BSE examined suspension data for racial/ethnicity categories where discrepancies exist, professional development program, including training focused on opportunities to increase understanding of the ways in which race, culture, ethnicity, and language can influence student behavior and disciplinary practices. In addition, the BSE supported the LEA in using data to plan and implement effective behavior support. Each LEA provided a list to the BSE of all students who were suspended or expelled and the BSE conducted student file compliance reviews of a sample of files of suspended students.

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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.

The BSE conducted on-site reviews as described above, and determined that one LEA had policies, procedures, or practices that contributed to the significant discrepancy and did not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. Therefore, the State issued written findings of noncompliance. The LEA was required to develop a CAVP that is approved by BSE. The BSE monitored implementation of corrective action through interviews with administrative personnel, analysis of updated suspension data, and student file reviews. When the BSE conducts on-site reviews to verify correction of noncompliance, the BSE looks for evidence that the LEA understands the regulations, including definitions and data reporting and has updated policies, procedures, and practices as required by the BSE. The state verified that the LEA in corrective action for noncompliance has corrected policies, procedures, and practices as well as each individual case of noncompliance, in conformance with OSEP Memorandum 09-02. The BSE documents correction for the individual student(s) with findings of noncompliance from the initial verification review, then reviews a new sample of records of students suspended subsequent to findings being issued.

Correction of Findings of Noncompliance Identified in FFY 2019

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 2019 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 LEAs are 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. BSE verified that all corrective action of noncompliance in these LEAs was completed within timelines.

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

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 also requires student-specific corrective action for all citations of noncompliance where corrective action can be implemented. This is done through the ICAP component of the overall CAVP web-based system. In the ICAP, the BSE reviews 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 reviews a new sample of student files to verify systemic compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. The State must demonstrate, in the FFY 2020 SPP/APR, that the districts identified with noncompliance in FFY 2019 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 2020 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 2019, although its FFY 2019 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 2019.

Response to actions required in FFY 2019 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 two LEAs identified in FFY 2019 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 three 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 evidence-based-practices, 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 three 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 two LEAs identified in FFY 2019. 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

4B- 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.

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	2015	2016	2017	2018	2019
A	2019	Target >=	63.10%	63.60%	64.10%	64.10%	
A	61.48%	Data	61.84%	62.37%	61.97%	61.52%	61.48%
B	2019	Target <=	8.50%	8.30%	8.10%	8.10%	
B	9.62%	Data	9.53%	9.01%	9.27%	9.39%	9.62%
C	2019	Target <=	4.60%	4.60%	4.60%	4.60%	
C	4.81%	Data	4.93%	4.90%	4.86%	4.77%	4.81%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	61.48%	61.48%	62.36%	63.24%	64.12%	65.00%
Target B <=	9.62%	9.62%	9.62%	9.08%	8.54%	8.00%
Target C <=	4.81%	4.81%	4.81%	4.81%	4.81%	4.00%

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Involvement 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 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	Total number of children with IEPs aged 5 (kindergarten) through 21	308,760

Source	Date	Description	Data
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	191,680
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	30,255
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	13,125
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	905
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	471

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 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	191,680	308,760	61.48%	61.48%	62.08%	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	30,255	308,760	9.62%	9.62%	9.80%	Did not meet target	Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	14,501	308,760	4.81%	4.81%	4.70%	Met target	No Slippage

Part	Reasons for slippage, if applicable
B	BSE and the SEAP share a common belief and mission to educate students in the LRE, consistent with IDEA requirements. When LEAs place students in out-of-district settings, such as approved private schools and separate schools, it is because FAPE cannot be provided based on the current service delivery model within the LEA. These students typically have more complex abilities and require very specialized services. However, to improve support for educating students in the LRE, many LEAs are enhancing their service delivery models to return students from other settings. For FFY 20, this contributed to a decrease of 361students in other settings (Indicator 5C) and an increase of 565 students served in the regular classroom less than 40% of the day (Indicator 5B). While this shift meets the definition of slippage for reporting purposes, it may actually reflect progress, as there was a concomitant reduction in the percent of students placed in the most restrictive settings.

BSE, in partnership with PaTTAN, is providing technical and fiscal support for LEAs that have a greater number of students placed out of district to redesign their service delivery options to provide more support within the district and reduce the number of students placed outside of their community. BSE anticipates that this will continue to decrease the proportion of students served in other settings, but may initially increase the proportion of students who receive services inside the regular class less than 40% of the school day. |

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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 EDFacts 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	2015	2016	2017	2018	2019
A	Target >=	63.00%	63.50%	64.50%	64.80%	
A	Data	62.45%	63.90%	66.05%	66.66%	58.69%
B	Target <=	15.00%	15.00%	15.00%	14.70%	
B	Data	15.99%	15.30%	14.56%	14.47%	17.53%

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Involvement 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	2020	2021	2022	2023	2024	2025
Target A >=	46.91%	47.00%	47.00%	50.00%	55.00%	59.00%
Target B <=	17.70%	17.50%	17.50%	17.50%	17.00%	17.00%

Inclusive Targets – 6C

FFY	2020	2021	2022	2023	2024	2025
Target C <=	17.08%	17.00%	17.00%	16.50%	16.50%	16.50%

Prepopulated Data

Data Source:

SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

07/07/2021

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	9,846	14,115	5,992	29,953
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	3,238	7,412	3,401	14,051
b1. Number of children attending separate special education class	1,734	2,274	942	4,950
b2. Number of children attending separate school	101	132	116	349
b3. Number of children attending residential facility	1	3	0	4
c1. Number of children receiving special education and related services in the home	2,557	1,894	664	5,115

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

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2019 Data	FFY 2020 Target	FFY 2020 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	14,051	29,953	58.69%	46.91%	46.91%	Met target	No Slippage
B. Separate special education class, separate school or residential facility	5,303	29,953	17.53%	17.70%	17.70%	Met target	No Slippage
C. Home	5,115	29,953		17.08%	17.08%	N/A	N/A

Provide additional information about this indicator (optional)

Pennsylvania does not believe that the reliability, validity, and completeness of FFY 2020 data for Indicator B6 has been impacted by COVID-19. Data analysis has shown that the decreased numbers of children served in B6a and increased numbers of children served in B6b is due to other impacts of the COVID-19 pandemic.

The changes seen in B6a and B6b are primarily due to the decreased availability of early childhood programs during Pennsylvania's COVID mitigation efforts. During FY 2019, many private and state funded early childhood programs were closed for health and safety reasons. In FY 2020, 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

The State has established the baseline for indicator 6C, using data from FFY 2020, and OSEP accepts that baseline.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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	2015	2016	2017	2018	2019
A1	2020	Target >=	89.84%	89.84%	89.84%	90.84%	90.84%
A1	84.04%	Data	86.09%	83.67%	83.72%	84.06%	86.09%
A2	2020	Target >=	68.02%	68.02%	68.02%	69.02%	69.02%

A2	65.21%	Data	68.33%	66.56%	66.09%	66.99%	67.93%
B1	2020	Target >=	91.69%	91.69%	91.69%	92.69%	92.69%
B1	85.65%	Data	88.92%	86.35%	86.78%	87.31%	87.61%
B2	2020	Target >=	66.54%	66.54%	66.54%	67.54%	67.54%
B2	62.41%	Data	65.44%	62.93%	62.62%	64.47%	64.19%
C1	2020	Target >=	89.48%	89.48%	89.48%	90.48%	90.48%
C1	83.46%	Data	86.78%	84.05%	84.46%	84.23%	85.63%
C2	2020	Target >=	70.37%	70.37%	70.37%	71.37%	71.37%
C2	66.59%	Data	69.33%	67.75%	67.40%	68.34%	69.33%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A1 >=	84.04%	84.04%	84.04%	84.04%	85.00%	85.00%
Target A2 >=	65.21%	65.21%	65.21%	65.21%	66.50%	66.50%
Target B1 >=	85.65%	95.65%	95.65%	95.65%	87.00%	87.00%
Target B2 >=	62.41%	62.41%	62.41%	62.41%	63.50%	63.50%
Target C1 >=	83.46%	83.46%	83.46%	83.46%	85.00%	85.00%
Target C2 >=	66.59%	66.59%	66.59%	66.59%	68.00%	68.00%

Targets: Description of Stakeholder Input

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

FFY 2020 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

14,981

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	45	0.30%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,566	10.46%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,597	24.03%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	4,889	32.66%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	4,873	32.55%

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 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	8,486	10,097	86.09%	84.04%	84.04%	N/A	N/A

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
or exited the program. *Calculation:(c+d)/(a+b+c+d)*							
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. *Calculation: (d+e)/(a+b+c+d+e)*	9,762	14,970	67.93%	65.21%	65.21%	N/A	N/A

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	41	0.27%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,681	11.22%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,909	26.09%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	6,367	42.50%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	2,983	19.91%

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 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. *Calculation: (c+d)/(a+b+c+d)*	10,276	11,998	87.61%	85.65%	85.65%	N/A	N/A
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. *Calculation: (d+e)/(a+b+c+d+e)*	9,350	14,981	64.19%	62.41%	62.41%	N/A	N/A

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	56	0.37%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,601	10.70%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,344	22.34%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	5,017	33.52%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	4,950	33.07%

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C1. Of those children who entered or exited the program below age	8,361	10,018	85.63%	83.46%	83.46%	N/A	N/A

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
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. *Calculation:(c+d)/(a+b+c+d)*							
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. *Calculation:* *(d+e)/(a+b+c+d+e)*	9,967	14,968	69.33%	66.59%	66.59%	N/A	N/A

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)

New baseline data will be set this year since the original cohort of children in the FY 2009 data are no longer representative of the children currently enrolled in the Early Intervention program. In FY 2009, due to requirements for data collection and reporting, the cohort of children who were included in the baseline were children who entered and successfully exited the Early Intervention program within one year. Only 885 children were included in baseline data.
The data reported in the FFY 2020 ECO data collection includes 15,053 preschoolers who represent the entire range of disability types and levels of severity. The average time that a child spends in the Preschool Early Intervention program is 21 months.

The reliability and completeness of FFY 2020 data for Indicator B7, child outcome data, has been impacted by COVID-19. Pennsylvania anticipates additional impact on data in FFY 2021-22 to be reported in its February 2023 SPP/APR.

Pennsylvania is seeing an overall decrease in the percent of pairs of child outcome data from the previous fiscal year. In FFY 2018, 79.49% of the exiting preschoolers had complete entry and exit pairs of child outcome data. In FFY 2019, only 74.22 % entry and exit pairs of child outcome data were gathered. In FFY 2020, 76.80% of the exiting preschoolers had complete entry and exit pairs of child outcome data. While the number of complete pairs of child outcome data has increased during FFY 2020, it is still lower than pre-pandemic data.

Pennsylvania has noted a change in the number of children exiting the EI program due to COVID-19. There has been an increase in children maintaining enrollment in EI rather than transitioning to Kindergarten programs. Other children are maintaining EI enrollment but are not currently receiving EI services due to risk factors associated with COVID-19. These changes are affecting the ability of EI staff to collect complete data, in particular, child outcome exit data.

Pennsylvania's process for collecting child outcome data is dependent on authentic assessment tools that use child observations as the primary methodology for assessment. Due to the use of tele-intervention service delivery methodologies and the decrease in services being provided in ECE settings, EI staff are having difficulty collecting valid and reliable child outcome data. This issue is being reported during the collection of both entry and exit child outcome data.

Since COVID-19 is influencing the collection of valid and reliable entry data, Pennsylvania anticipates that there will be future data impacts when child outcome exit data is finally collected on children who had entry child outcome data collected during the COVID-19 pandemic. The different conditions used to collect entry authentic assessment data vs. exit authentic assessment data may make the comparisons of the two data points invalid.

To mitigate the impact of COVID-19 on the B7 data reliability, validity and completeness, BEISFS has provided guidance on the collection of child outcome data during COVID-19 and training to Early Intervention programs.

7 - Prior FFY Required Actions

None

7 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

7 - Required Actions

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 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 response rate) and describe strategies that will be implemented which are expected to increase the response rate, 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 parents of children with disabilities.

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 should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.

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.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, when reporting 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 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.

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 Stakeholder Involvement section of the Introduction where this description resides.

Historical Data

Group	Baseline	FFY	2015	2016	2017	2018	2019
Preschool	2008	Target >=	87.00%	87.00%	87.50%	88.00%	85.27%
Preschool	84.10%	Data	86.59%	86.87%	86.88%	85.29%	92.20%
School age	2008	Target >=	40.84%	40.84%	41.34%	41.34%	41.34%
School age	34.50%	Data	42.68%	39.70%	41.30%	40.97%	45.59%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	89.00%	90.00%	91.00%	92.00%	93.00%	94.00%
Target B >=	46.37%	47.14%	47.91%	48.68%	49.45%	50.22%

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
Preschool	5,501	6,133	92.20%	89.00%	89.70%	Met target	No Slippage
School age	347	788	45.59%	46.37%	44.04%	Did not meet target	Slippage

Provide reasons for School Age slippage, if applicable

The BSE hypothesizes that the performance decline observed for this Indicator may reflect increased uncertainty surrounding the COVID-19 pandemic. This disruptiveness caused by local health conditions, political tensions, and school staff being somewhat less available to parents, required changes in service delivery models which may have contributed to this performance decline.

The number of parents to whom the surveys were distributed.

49,229

Percentage of respondent parents

14.06%

Response Rate

FFY	2019	2020
Response Rate	15.50%	14.06%

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 observed a decline in the response rate for the school age survey, and suspects that reasons are related to the COVID-19 pandemic and parents' day-to-day uncertainty regarding the education of their children. The collaboration with the Pennsylvania State Data Center to refine oversampling strategies to maintain and improve the representativeness for the FFY 2021 survey will continue. Additionally, the opportunity to complete the survey using a smart phone will be further highlighted and emphasized when publicizing the survey in an effort to both increase the response rate and correct the minor over-representativeness of parents of white students with disabilities described below. Finally, the expanded data collection window described in the FFY 2019 report will be continued to allow additional time and opportunities to provide feedback to the BSE.

Based on the increased participation of Spanish speaking stakeholders in the stakeholder input process this year, an emphasis will be placed in increasing the awareness of availability of the Spanish version of the survey. This minority group had greater participation in the stakeholder input process in 2021 and it is anticipated that increasing BSE's efforts to obtain their views will have a positive effect on the response rate.

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

The FFY 2021 family survey will be available online in two versions, one in English and one in Spanish. In addition, the materials developed for local Early Intervention programs to use when supporting families to complete the survey will be available in both English and Spanish. A toll free hotline will be available for families to use for any additional translation services.

A webinar will be held in early 2022 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 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 did not exceed 2% in any category, Comparisons in four disability categories found improved representativeness, and comparisons in two categories found a decline in representativeness. These changes were also examined for race/ethnicity, where only one comparison exceeded 2%. However, this change resulted in improved representativeness of the racial/ethnic category. In only one category was a decline in representativeness from the previous year observed. BSE will work with the Pennsylvania State Data Center to refine sampling strategies to improve representativeness, in both disability category and race/ethnicity. Analyses did not reveal notable nonresponse bias.

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 8.3 and 8.4 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. None of the 20 comparisons of the respondent group to the state population in Tables 8.3 and 8.4 were outside the state-established range. Through the demographic data that was gathered in the Family Survey, Pennsylvania was unable to match 8.7% of the respondents to specific children in the PELICAN data system and therefore disability category for those respondents is unknown.

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 should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.

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 16,709 parents of students with disabilities from 115 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 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 8.1 and 8.2 below, for parents of school age students, 18 of the 19 comparisons are within the state-established range. Only parents of white (not Hispanic) students are over-represented in this group. No groups are under-represented.

Table 8.1
Race/Ethnicity of School Age Students Represented by Parent Respondents

Race/Ethnicity	Total Respondent Group Percent	State Race/Ethnicity Population Percent
American Indian/Alaska Native	<1.0%	<1.0%
Asian	1.9%	1.8%
Black or African American	14.5%	17.6%
Hispanic	14.5%	14.0%
Multiracial	2.7%	5.2%
Native Hawaiian/Other Pacific Islander	<1.0%	<1.0%
White	66.2%	61.1%

Table 8.2
Disability Category of School Age Students Represented by Parent Respondents

Disability Category	Total Respondent Group Percent	State Race/Disability Population Percent
Autism	15.1%	12.1%
Deaf-Blindness	<1.0%	<1.0%
Emotional Disturbance	6.6%	8.5%
Hearing Impairment Including Deafness	<1.0%	<1.0%
Intellectual Disability (Mental Retardation)	9.0%	6.2%
Multiple Disabilities	1.1%	1.0%
Orthopedic Impairment	<1.0%	<1.0%
Other Health Impairment	16.1%	17.4%
Specific Learning Disability	36.3%	39.2%
Speech or Language Impairment	14.0%	14.1%
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)

The representativeness in the preschool respondent group by race/ethnicity and disability categories is displayed in Tables 8.3 and 8.4 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. None of the 20 comparisons of the respondent group to the state population in Tables 8.3 and 8.4 were within the state-established range. Through the demographic data that was gathered in the Family Survey, Pennsylvania was unable to match 8.7% of the respondents to specific children in the PELICAN data system and therefore disability category for those respondents is unknown.

Table 8.3
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%	<1.0%
Asian	4.0%	3.4%
Black or African American	11.7%	15.6%
Hispanic	14.5%	14.8%
Multiracial	6.8%	6.6%
Native Hawaiian/Other Pacific Islander	<1.0%	<1.0%
White	62.7%	59.5%

Table 8.4
Disability Category of Preschool Children Represented by Parent Respondents

Disability Category	Total Respondent Group	State Race/Disability Population
	Percent	Percent
Autism	10.7%	12.6%
Deaf-Blindness	<1.0%	<1.0%
Developmental Delay	43.9%	48.1%
Emotional Disturbance	<1.0%	<1.0%
Hearing Impairment Including Deafness	1.0%	1.2%
Intellectual Disability (Mental Retardation)	<1.0%	<1.0%
Multiple Disabilities	1.1%	1.1%
Orthopedic Impairment	<1.0%	<1.0%
Other Health Impairment	2.1%	2.1%
Specific Learning Disability	<1.0%	<1.0%
Speech or Language Impairment	29.0%	33.6%
Traumatic Brain Injury	<1.0%	<1.0%
Visual Impairment including Blindness	<1.0%	<1.0%
Unknown	8.7%	<1.0%

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)

Changes in year-to-year response rates by disability category were examined and did not exceed 2% in any category, Comparisons in four disability categories found improved representativeness, and comparisons in two categories found a decline in representativeness. These changes were also examined for race/ethnicity, where only one comparison exceeded 2%. However, this change resulted in improved representativeness of the racial/ethnic category. In only one category was a decline in representativeness from the previous year observed. BSE will work with the Pennsylvania State Data Center to refine sampling strategies to improve representativeness, in both disability category and race/ethnicity.

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

The FFY 2021 family survey will be available online in two versions, one in English and one in Spanish. In addition, the materials developed for local Early Intervention programs to use when supporting families to complete the survey will be available in both English and Spanish. A toll free hotline will be available for families to use for any additional translation services.

A webinar will be held in early 2022 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?	NO

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

School Age Programs (Bureau of Special Education)

Pennsylvania's School Age sampling plan was approved by OSEP with the original submission of the State's State Performance Plan in December, 2005. This plan has not been changed since its approval.

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)

8 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 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 2019 SPP/APR

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

8 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

8 - 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.

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 2020 reporting period (i.e., after June 30, 2021).

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 2020 SPP/APR, the data for FFY 2019), 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	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
0	0	623	0.00%	0%	0.00%	N/A	N/A

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 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

9 - Prior FFY Required Actions

None

9 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

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 FFY 2020, 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 2020 reporting period (i.e., after June 30, 2021).

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 2020 SPP/APR, the data for FFY 2019), 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	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

FFY 2020 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.

53

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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1	0	623	0.00%	0%	0.00%	N/A	N/A

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 Pennsylvania's 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 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

10 - Prior FFY Required Actions
None

10 - OSEP Response
The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

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 2020 SPP/APR, the data for FFY 2019), 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	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	98.40%	97.75%	96.67%	95.05%	94.33%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
23,318	22,144	94.33%	100%	94.97%	Did not meet target	No Slippage

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

1,174

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 2020 database for Indicator 11 confirms that all 617 school age students who did not receive a timely initial evaluation did receive an evaluation, although late. The database was modified to allow LEAs to indicate when an evaluation was late as a result of the COVID-19 pandemic. Of the total, 35% were completed within 61-90 days, and 55% were completed within 120 days. Reasons for delays were primarily attributed to errors in timeline calculations, staffing issues and administrative delays, COVID-19, as well as weather emergencies and scheduling problems with outside agency resources over which the LEA had limited control. The COVID-19 pandemic was cited by LEAs as the reason for 60% of the initial evaluations completed beyond 90 days.

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

The FFY 2020 data showed that 557 evaluations were not completed within 60 days. Of the late evaluations, 400 (72%) were 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 (n=157) that were late due to non-COVID-19 reasons, 73% 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 evaluations that were late due to COVID-19 reasons (N=400), 14.25% were completed within 61-90 days.

For the non-COVID-19 delays, one Preschool Early Intervention program accounted for 61% of the late evaluations. BEISFS Advisors have 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, 2020, through June 30, 2021.

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, 2020 through June 30, 2021.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
68	59	7	2

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)

The process for collecting data is explained above. Annually, in July-August, BSE reviews a database in which LEAs report data from the entire year for all students who have had initial evaluations for special education. 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 if the student was determined to be eligible for special education. Following BSE review of the database, all LEAs are provided with written notification of their compliance status. LEAs determined to be in noncompliance are informed that they must correct the noncompliance as soon as possible, but not later than one year from the notification. These LEAs are required to perform quarterly reporting, through which the LEA provides updated data on all new initial evaluations. When the LEA demonstrates 100% compliance with evaluation timelines for two consecutive reporting periods, BSE closes corrective action. If an LEA is not demonstrating progress, BSE conducts on-site and/or virtual reviews to assist in identifying root causes, including required technical assistance. BSE also informs 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 on-site and/or virtual reviews of student files as well as policies, procedures, and practices.

BSE conducted follow-up of all LEAs identified with ongoing noncompliance through quarterly reporting and conducted on-site and virtual reviews of student files as well as policies, procedures, and practices. Nine LEAs did not achieve closure of corrective action within one year of notification of noncompliance. The BSE directly informed these LEAs of pending enforcement actions. BSE advisers continued to examine policies and procedures and student files in each of the LEAs to verify correct implementation of 34 CFR §300.301(c)(1).

Three of the nine LEAs cited the state's mandatory school closures that occurred in March 2020 as well as 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 as the sole reason for failure to achieve compliance within the one-year timeline. These three LEAs closed corrective action within 51, 63, and 75 additional days. The other four LEAs cited the state's mandatory school closures and PA Department of Health's imposed school closures as a contributing factor in the inability of the LEAs to achieve closure of noncompliance within a year of notification. Of these four LEAs, three recognized, following BSE on-site visit and review, the need to revise and update procedures related to both the hiring and retention of certified school psychologists and the necessary documentation and tracking of timelines in order to ensure compliance. These three LEAs closed corrective action within 29, 46, and 46 additional days. The final LEA, which has very low enrollment, had difficulty demonstrating compliance because during 75% of their corrective action period, zero Permissions to Evaluate were issued because of no demonstrated need for evaluations. In order to close corrective action for this LEA, the BSE engaged in a series of administrative and staff interviews to confirm that the provisions of child find were being fully implemented. This LEAs closed corrective action within 91 additional days.

Two LEAs did not achieve compliance within one year of notification of noncompliance, and corrective action is ongoing. The BSE has verified that the two 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 two aforementioned LEAs that have not completed corrective action, the BSE has verified that all LEAs identified with noncompliance in FFY 2019 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 review 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 2019 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 that each LEA 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. This was verified through review of the database and/or onsite review of student files.

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 2019 provided evaluations for the identified child, unless the child was no longer within the jurisdiction of the Early Intervention program.

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 LEAs' policies, procedures, and practices to ensure they comply with timely initial evaluations. Because the two LEAs 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. In addition, the BSE helped develop schedules to assist the school psychologists catch-up 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.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

FFY 2018

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

School Age Programs (Bureau of Special Education)

The BSE provided additional oversight by identifying qualified school psychologists who were willing to enter into a contract with the LEA. The BSE also required bi-weekly data from the LEA to assess progress and scheduled monthly meetings to enforce timeline requirements in order to help the LEA 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 tracked 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.

In April 2021, the BSE formalized the department's expectations related to federal requirements by outlining the details of the LEA's status of ongoing non-compliance which initiated the BSE's monthly reviews. In September 2021, the BSE Assistant Director and the Division Chief met with the LEA to offer continued technical assistance and impress upon the LEA the importance of achieving compliance with SPP Indicator 11.

To further address the LEA's continued noncompliance, the BSE met with LEA leadership at the LEA in November 2021. At this meeting, the BSE provided additional technical assistance from the BSE Assistant Director, Division Chief, Data Manager, SPP/APR State Lead and the LEA's regional BSE Single Point of Contact.

In December 2021, the BSE informed the LEA 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.

11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2018 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and the LEA with remaining noncompliance identified in 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 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 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 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.

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 2020 SPP/APR, the data for FFY 2019), 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	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.71%	99.04%	97.65%	90.15%	93.45%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	8,474
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	522

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	7,172
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.	652
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	9
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 2019 Data	FFY 2020 Target	FFY 2020 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.	7,172	7,291	93.45%	100%	98.37%	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

119

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 119 children whose IEPs were not developed by their 3rd birthday, 46% had their IEP developed within 30 days and 32.8% 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 119 did have an IEP developed and implemented, although beyond their third birthday as confirmed through data reports.

Two EI programs accounted for 67% of the IEPs completed past the child's third birthday. BEISFS Advisors have 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.

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, 2020 through June 30, 2021.

Provide additional information about this indicator (optional)

The reliability and validity of FFY 2020 data for Indicator B12 on the number of children in the Part C program who transitioned to the EI Preschool program, were found eligible and had an IEP development by their third birthday has been impacted by COVID-19. Pennsylvania anticipates additional impact on data in FFY 2021-22 to be reported in its February 2023 SPP/APR.

Data analysis has identified the following impacts due to COVID-19: delays in evaluations due to the change from in-person to virtual, delays due to staff shortages due to the pandemic, and delays in evaluations due to the need to purchase and train staff on evaluation tools that can be used in virtual settings. EI Preschool program leaders did report that transition planning with the Part C program, a process that was typically done using virtual technologies, was not negatively impacted by COVID-19.

To mitigate the impact of COVID-19 on the B12 data reliability and validity, BEISFS has: 1) provided guidance on conducting evaluations through virtual practices; 2) provided professional development on strategies for virtual evaluations and tools that are appropriate for virtual evaluations; and 3) BEISFS advisors provided support to local programs who were experiencing staff shortages due to COVID-19; including discussion during statewide leadership meetings.

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
15	15	0	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*

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 review 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 2019 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 2019 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 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 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 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 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 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.

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 2020 SPP/APR, the data for FFY 2019), 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	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	83.07%	84.32%	82.18%	80.18%	81.11%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1,121	1,392	81.11%	100%	80.53%	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 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
225	225	0	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*

When findings of noncompliance are issued, the LEA is informed of the regulation that is being violated (linked to federal and state regulations) and must develop a CAVP that is approved by the BSE. The CAVP is also linked to technical assistance resources through the PaTTAN and IU systems. The CAVP addresses correction of policies, procedures, and practices to ensure systemic correction. CAVPs include required corrective action/evidence of change, timelines and resources required, and tracking of timelines to closure. The BSE monitors implementation of the CAVP through reviews of revised policies and procedures and verification of correction as evidenced by data in a sample of student files. The CAVP is monitored until all corrective action has been completed. All corrective action must be completed within one year of the notification of a finding. Because the system is web-based, BSE is able to track progress in closing the CAVP and can capture real-time data concerning status 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 not in compliance with indicator 13 transition requirements in FFY 2019 monitoring, and reviewed the 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 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 corrective action for all citations of noncompliance where corrective action can be implemented. This is done through the Individual Corrective Action Plan (ICAP) component of the overall CAVP web-based system. In the ICAP, the BSE reviews 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 reviews a new sample of student files to verify compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2019 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 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 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 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 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 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.

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 = [(# 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) divided by the (# 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 = [(# 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) divided by the (# 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 = [(# 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) divided by the (# 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 2021 on students who left school during 2019-2020, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2019-2020 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 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 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.

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 should consider categories such as race/ethnicity, disability category, and geographic location in the State.

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.

Beginning with the FFY 2021 SPP/APR, due Feb. 1, 2023, when reporting the extent to which the demographics of respondents 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.

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2015	2016	2017	2018	2019
A	2009	Target >=	26.40%	27.10%	27.80%	27.80%	28.50%
A	27.99%	Data	28.84%	33.08%	29.53%	27.55%	30.92%
B	2009	Target >=	60.80%	61.00%	62.00%	62.00%	65.00%
B	48.90%	Data	67.32%	70.78%	69.14%	71.66%	71.33%
C	2009	Target >=	68.80%	69.90%	70.90%	70.90%	72.00%
C	65.84%	Data	73.34%	76.90%	75.33%	77.58%	75.78%

FFY 2020 Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	29.33%	29.33%	29.33%	29.33%	29.33%	31.00%
Target B >=	70.71%	70.71%	70.71%	70.71%	70.71%	71.00%
Target C >=	76.23%	76.23%	76.23%	76.23%	76.23%	76.75%

Targets: Description of Stakeholder Input

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

FFY 2020 SPP/APR Data

Total number of targeted youth in the sample or census	3,841
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	2,152
Response Rate	56.03%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	595
2. Number of respondent youth who competitively employed within one year of leaving high school	835
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)	98
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).	7

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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Enrolled in higher education (1)	595	2,152	30.92%	29.33%	27.65%	Did not meet target	Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1,430	2,152	71.33%	70.71%	66.45%	Did not meet target	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)	1,535	2,152	75.78%	76.23%	71.33%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
A	According to the National Student Clearinghouse Research Center, college enrollments declined by 2.5% nationwide in the fall of 2020. In the spring of 2021, the Clearinghouse reported that undergraduate enrollment had declined 4.5% compared to the previous year. PA's performance decline on this measure reflects this national trend, but is less severe.
B	PA's unemployment rate rose from 4.5% in 2019 to 9.1% in 2020. This, coupled with declining enrollments in higher education, help explain the decline in performance on this measure.
C	While not as severe a decline as observed in Measure B, the cascading effects of lower enrollments in higher education and higher unemployment in PA can be detected in this measure.

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	2019	2020
Response Rate	59.31%	56.03%

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 in FFY 2020, there were no subgroups overrepresented or underrepresented in the respondent group.

LEAs use 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 provides 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 technical assistance 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 NPSO's Strategies for Hard to Reach Students with participating LEAs;

      • providing a mid-point status report alerting LEAs to any potential discrepancies in response rates for specific subgroups, leading to an increase in the intensity of efforts to contact former students, especially those in affected 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 PaPOS surveys; and

      • providing continued collaboration with the former NPSO (now a part of the National Technical Assistance Center on Transition) to research other states' survey procedures, with specific focus on effective strategies for improving representativeness in response rates.

The BSE, through the PaTTAN network, is currently developing a mobile application that will automate contact with leavers for a number of purposes, including the collection of post-school outcome data. This mobile application is expected to be piloted during FFY 2021 and fully implemented in FFY 2022. Direct contact with leavers through this mobile application is expected to increase the response rate for the post-school outcome survey.

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.

The response rate for PA's Post-School Outcome survey declined in FFY 2020 by more than 3%. However, there were no subgroups overrepresented or underrepresented in the respondent group, and 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 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.

To determine the representativeness of the respondent group, comparisons were made to the target population for all disability, racial/ethnic and leaver categories, as well as gender and geography. Each of the 27 comparisons made fell within a state-established ± 5.0% tolerance level. In fact, 17 comparisons were less than ± 1.0%, and only four comparisons were above ± 2.0%.

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)
YES

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

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 leaver categories, as well as gender and geography. Each of the 27 comparisons were made using a state-established ± 5.0% tolerance level.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	NO

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.

The FFY 2020 response rate of 56.03% 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?	NO

Provide additional information about this indicator (optional)

14 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether the FFY 2020 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.

Response to actions required in FFY 2019 SPP/APR

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

14 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

14 - Required Actions

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 EDFacts Metadata and Process System (E*MAPS*)).

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 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1 Number of resolution sessions	658
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1(a) Number resolution sessions resolved through settlement agreements	258

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 Stakeholder Involvement section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

Historical Data

Baseline Year	Baseline Data
2012	27.38%

FFY	2015	2016	2017	2018	2019
Target >=	24.00% - 35.00%	24.00% - 35.00%	24.00% - 35.00%	24.00% - 35.00%	28.00%-38.00%
Data	43.75%	32.21%	36.31%	35.06%	33.38%

Targets

FFY	2020 (low)	2020 (high)	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%	25.00%	35.00%

FFY 2020 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2019 Data	FFY 2020 Target (low)	FFY 2020 Target (high)	FFY 2020 Data	Status	Slippage
258	658	33.38%	25.00%	35.00%	39.21%	Met target	No Slippage

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

The State provided targets for this indicator, and OSEP accepts those targets.

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 EDFacts Metadata and Process System (E*MAPS*)).

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 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1 Mediations held	115
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.a.i Mediations agreements related to due process complaints	2
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.b.i Mediations agreements not related to due process complaints	75

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 Stakeholder Involvement section of the Introduction where the description for School Age Programs (Bureau of Special Education) resides.

Historical Data

Baseline Year	Baseline Data
2005	79.30%

FFY	2015	2016	2017	2018	2019
Target >=	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	79.50%-89.50%
Data	79.40%	80.83%	80.11%	76.58%	74.53%

Targets

FFY	2020 (low)	2020 (high)	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%	75.00%	85.00%

FFY 2020 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 2019 Data	FFY 2020 Target (low)	FFY 2020 Target (high)	FFY 2020 Data	Status	Slippage
2	75	115	74.53%	75.00%	85.00%	66.96%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Several mediators provided their perspectives on the decline in the proportion of agreements at mediation. A common perspective offered was related to the issue at the heart of the mediation. Those mediations with issues that were polarizing and/or involved a financial cost, such as private school placement, were anecdotally reported as being less likely to result in an agreement. Mediators also described fewer agreements when the issue was related to COVID-19 health and safety, such as allowing in-person schooling or providing services in the student's home. These decisions were reported to be outside the LEA representatives' authority and were determined by state or local mandates and decisions.

Mediators reported the switch to virtual mediations due to the COVID-19 pandemic made some mediations more difficult to conduct due to participants' discomfort with the virtual platform, time constraints, and the inability to "read the room" as well as one could during an in-person mediation. While it is likely that these initial challenges diminished as mediators and participants became more accustomed to virtual technologies, the idea that the movement to the virtual format resulted in fewer mediation agreements is plausible. Several mediators also referenced the climate of the country was generally one of less agreement and felt that trickled into some mediation sessions.

Mediators reported that even when parties did not agree to a written mediation agreement, there was often some movement toward agreement made during the mediation session. While these lesser forms of agreement may not have been documented in a signed mediation agreement, they demonstrate that while a mediation looks "unsuccessful" on paper, it has often times moved the dispute forward toward resolution.

Provide additional information about this indicator (optional)

Mediation in Pennsylvania underwent a significant change in this reporting period with the addition of attorney participation. Since the inception of Pennsylvania's special education mediation program in 1986, attorneys had not been permitted to attend or participate in mediation. In FFY 2020, the SEAP endorsed a change in this longstanding policy. As of March 1, 2021, if the family chooses to bring an attorney to mediation, the LEA may also bring counsel. If the family chooses not to have counsel, the LEA likewise does not bring counsel. It is noteworthy that prior to this change, Pennsylvania was one of only four states that did not allow attorneys at mediations.

16 - Prior FFY Required Actions

None

16 - OSEP Response

The State provided targets for this indicator, and OSEP accepts those targets.

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

<u>Baseline Data</u>*:* 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.

<u>Targets</u>*:* In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

<u>Updated Data:</u> In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2, 2022, 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 2020 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, is 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, is 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 2020 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 2021). 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 II 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 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

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 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) 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 SSIP has two iterations. This report summarizes Year 5 exit data and sustainability planning for the 12 learning sites of Iteration 1 (Implemented from January 2016 to August 2021) and Year 1 initial capacity building data for the 16 new learning sites in Iteration 2 (July 2021-June 2026). The current report is considered to be Phase III, Year 6 of the SSIP. Both iterations followed the five-phase Intervention Framework from the National Dropout Prevention Center for Students with Disabilities (NDPC-SD):

> • Year 1: focus on capacity building for theory of action adoption; Evidence Based Practices (EBPs) implementation and establishment of Early Warning System (EWS);

> • Year 2: build on data and infrastructure analysis, Coherent Improvement Strategy adoption, and evaluation planning;

> • Year 3: focus on progress toward short-term and long-term objectives for the SSIP and the SiMR;

> • Year 4: continue implementation monitoring, fidelity measurement, and sustainability planning; and

> • Year 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 Iteration 1 of the state's SSIP there were 12 learning sites with a baseline population of 832 students with disabilities eligible to graduate. These sites were treated as a cohort for data collection and reporting. For Iteration 2 the state identified a new cohort of 16 learning sites with a baseline population of 1,253 students with disabilities eligible to graduate. Considerations for selection of sites included factors such as low graduation rates, geographic distribution, rural, suburban, and urban demographics, and participation in other statewide improvement efforts. These sites will be treated as a cohort for data collection and reporting in the FFY 2020-25 reports.

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

Does the State intend to continue implementing the SSIP without modifications? (yes/no)
NO

If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or justification for the changes.

Although the SSIP model is not being modified, the state concluded Phases I-III of SSIP implementation in the original 12 learning sites in August 2021 and scaled up implementation of the model to 16 new learning sites in July 2021.

Scale up efforts for this second iteration of the SSIP will incorporate "lessons learned" to date and will continue to focus on improving graduation rates for students with disabilities. Model implementation again follows NDPC-SD's five-phase Intervention Framework across 5 years and continued alignment with Pennsylvania's State Personnel Development Grant (SPDG), which also focuses on dropout prevention and increasing graduation rates starting in the middle school grades.

This report summarizes the first half of Year 1, Phase 1 efforts of Iteration 2, including: learning site selection; establishment of local leadership teams; Professional Development (PD) and Technical Assistance (TA) on EWS implementation and Coherent Improvement Strategies (CIS) adoption and set up/training on use of a new online data entry platform. Student-level attendance, behavior, and course performance (ABC) data entry in the system

began in January 2022 and was not scheduled to be completed by the submission date for this report. These sites will implement the SSIP model as designed and refined in Iteration 1, and will receive direct onsite/virtual support from the Pennsylvania Training and Technical Assistance Network (PaTTAN) across the five phases of implementation, gradually helping sites move from intensive initial guidance to independent sustainability.

Two substantive changes from the Iteration 1 model implementation relate to data source and collection. Previously, the state used the 4- year adjusted cohort graduation rate to establish targets and measure and report on progress. Beginning with this iteration the state will shift to using 618 exiting data. This will align with OSEP's changes to reporting Indicator 1 data in the SPP/APR. For data collection the state will be using an online data management system that 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.

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	2020	2021	2022	2023	2024	2025
Target>=	61.76%	63.01%	64.26%	65.51%	66.76%	68.01%

FFY 2020 SPP/APR Data

Number Graduated with a Regular High School Diploma	Number Eligible to Graduate	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
810	1,151	61.76%	61.76%	70.37%	Met target	No Slippage

Provide the data source for the FFY 2020 data.

For Iteration 2, the data source shifted due to a change in the Indicator Measurement Table from the prior use of the 4- year Adjusted Cohort Graduation Rate (ACGR) to exiting data collected under section 618 of the IDEA, using the definitions in EDFacts file specification FS009. FFY 2019 year was selected with stakeholder input as the baseline year (school year 2018-19), as it was the last year that these data were collected prior to the COVID-19 pandemic. Data for this report are lagged, consistent with Indicator 1 of the SPP/APR.

Please describe how data are collected and analyzed for the SiMR.

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. For this report, these data are collected for each of the 16 learning sites participating in the SSIP and aggregated to obtain the section 618 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.

Additional data for SSIP Iteration 1 is summarized here: Pennsylvania concluded Iteration 1 of its first SSIP in August 2021 by collecting and analyzing student-level data for FFY 2016 (Group 2), and FFY 2017 (Group 3) including: EWS data, movement within and across "off-track" vs. "on-track" graduation status, and changes in the number and type of risk factors for school failure. Longitudinal improvement rates from 2016-2021 show a steady reduction in the number of students identified as off-track for graduation and increase in the number of students identified as on-track for graduation across all Groups. Specifically, 31% of Group 2 students were identified as off-track for graduation in 2016. By the end of the 2020-2021 school year only 1% of those students remained off track for graduation. Overall, 99% of Group 2 graduated-- a 68% increase across 5 years of implementation. Positive change in graduation trajectories also occurred for Group 3 students. 95% of Group 3 students moved from off-track to on-track status by August 2021—a 62% change across 4 years of implementation. Across the complete SSIP initiative, schools identified more at-risk students early, provided high quality intervention, tracked progress often to positively influence their path toward graduation. Students also exhibited fewer risk factors for school failure after multiple years of intervention and SSIP implementation. All groups saw a substantial reduction in the number of students exhibiting multiple risk factors known to negatively impact graduation outcomes. Group 2 reduced high risk levels by 44% and Group 3 by 34%. Over time, the most notable changes were evident in improved attendance and behavior, followed by improved academics. All learning sites completed exit surveys focused on model impact, lessons learned, and sustainability planning. Responses indicated that teachers saw the positive impact model implementation had on decreasing student risk over time, particularly a reduction in behavioral concerns/violations. One site noted that this impact was not only evidenced by improved student ABC data in core classes but evidenced by in improved performance in electives and special subject classes, as well.

Data for Iteration 2 is currently being collected.

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-(20-jan-22).pdf&hash=7211df5eafd6f9f8c4500305e5ed9433b76b59d4668e0ffea56881e73f84bd77

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.

The current evaluation plan remained as designed to guide completion of Iteration 1 through August 2021. There are no anticipated substantive changes to evaluation activities for Iteration 2 because it is a scale up of Iteration 1's SSIP model implementation. However, the plan has been updated to reflect new dates/timelines/personnel where appropriate and the shift to use of section 618 data for establishing baseline, setting targets, and annual reporting.

If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.

The plan was updated to be current with the FFY 2020-25 SSIP timelines and a change in data source.

Provide a summary of each infrastructure improvement strategy implemented in the reporting period:

As Iteration 1 concluded, the Pennsylvania Department of Education (PDE) continued to implement infrastructure strategies to support achievement of the SiMR, sustainability, and scale-up, including: 1) alignment of the PDE's and SSIP's EWS metrics; 2) tracking of SPP/APR graduation rates, dropout rates, and SSIP data through compliance monitoring and alignment of LEA Improvement Plans and SSIP Action Plans, and 3) alignment of SPDG and SSIP to offer intensive/ongoing PD to increase graduation and college/career readiness. SPDG alignment supports SSIP model scale-up as the state moves beyond Iteration 1 to current implementation of Iteration 2.

To support sustainability and scale-up in Year 5, PaTTAN provided TA as needed, but sites independently facilitated shared leadership toward enhanced collaboration and implementation of the infrastructure, comprehensive model, and EBPs. Teams independently assumed comprehensive sustainability of the model.

Through the end of the 2020-2021 school year/final year of Iteration 1 implementation at the original 12 learning sites:

        • Collaboration with LEAs, stakeholders, and experts continued;

        • Multiple data teams and stakeholders analyzed achievement, implementation, and outcome data, including the Bureau of Special Education (BSE), SSIP Core Team, SEAP, SSIP Local Leadership Teams, PaTTAN consultants, HUNE, and the external evaluator;

        • These teams analyzed EWS data and ABC data for Group 2 and Group 3 and identified those students with disabilities off-track for graduation;

        • Teams also reviewed the CIS s (see list in Theory of Action) and the EBPs (refer to EBP discussion on page 7) implemented at each action plan meeting or data-decision-making meeting;

        • Family Engagement strategies were embedded into action planning templates and meeting protocols. Learning sites selected CISs aligned to student needs based on data analyses conducted;

        • Culturally Responsive Practices (CRP) were reviewed by teams (2020 Equity survey data discussed in previous submission); and

        • Teams also completed/revised their Action Plans, incorporating the selected CIS, practices/interventions, tasks to be completed, person(s) responsible, timelines for implementation, resources needed to support implementation, and date completed/evidence.

As in previous years, 100% of SSIP learning sites completed 2020-21 action plans. All 12 plans documented faithful implementation of an EWS, layers of improvement strategies, leadership teaming, and data-based decision-making. All indicated they experienced some level of staff turnover or change, and that additional personnel and administrative support were necessary for effective implementation and would be necessary to sustain the model in the future. Data protocols indicated that building-level and LEA leaders and special education and general education teachers engaged in the process collaboratively, participated in the meetings, contributed to decisions, and shared leadership roles. Longitudinal analyses across all years of implementation indicated that the highest rate of improved graduation outcomes and the greatest reduction in risk status occurred at sites where both teachers and administrators from both general and special education participated in data-decision-making meetings. Exit/sustainability survey results highlighted increased collaboration among personnel using key phrases such as: teaming, collaboration, layers of support, planning, shared, eye-

opening, effective, mentorship, embedded.

Each of these efforts not only contributed to the success of Iteration 1 and made a positive impact on graduation rates, but also informed state-wide scale up of the model to the 16 sites of Iteration 2. Iteration 2 will replicate the Iteration 1 phases and process.

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.

Given the favorable results of Iteration 1 of the SSIP on positively changing student graduation trajectory and decreasing risk status (see page 4) of this report and previous report submissions, the state scaled-up the model for replication in 16 learning sites state-wide (Iteration 2). Iteration 2 only recently began (July 2021) it is early in Phase I of implementation at the time of this report., therefore outcome data are not yet available. Phase 1 activities completed thus far include:

      • SSIP Learning Site Selection

           > From fall 2020 to spring 2021 PDE and BSE held multiple meetings, data reviews, and planning sessions to inform SSIP scale-up. Input from these collaborations resulted in site selection for the SSIP Iteration 2.

           > BSE assigned LEAs to tiers based on analysis of 618 graduation data.

           > Tier 1 LEAs were selected to receive universal supports to improve and/or sustain graduation outcomes through PD and TA provided by PaTTAN via webinars, conferences, resource sharing, showcasing LEAs with high graduation rates and effective practices via peer-to-peer networking.

           > Tier 2 LEAs were selected to receive targeted supports by way of comprehensive SSIP model implementation and direct onsite/virtual support from PaTTAN throughout three phases across five years. 618 data analysis indicated these LEAs fell at least 10% below the state graduation rate for 2 or 3 years and had at least 15 students with disabilities eligible to graduate. Therefore, they were selected as the implementation cohort for SSIP Iteration 2's baseline, target setting, and annual progress reporting.

           > 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 will not be part of the current SSIP cohort, the PaTTAN SSIP Lead Consultant and the BSE SSIP team will collaborate with the Special Assistant to the Secretary for Federally Designated Schools to offer any needed support specific to improving graduation rates for students with disabilities.

      • Assignment and training of the PaTTAN consultants who will provide direct support to the 16 new SSIP sites

           > 10 consultants state-wide

           > 5 with prior experience in Iteration 1; 5 new

      • Professional Development and Technical Assistance to 16 SSIP Learning Sites

           > The SSIP model and Theory of Action

           > The online data management platform for SSIP data entry, action planning, teaming, tracking, and reporting

           > SSIP Model and EWS overview tor learning site administrators

           > SSIP Model and EWS training for Local Leadership Teams

Did the State implement any <u>new</u> (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)
YES

Describe each <u>new</u> (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.

Lessons learned from Iteration 1 implementation and feedback from learning sites on the EWS indicated that the data collection process (student-level EWS and ABC data entry, action planning, reporting, tracking and analysis, and data-based decision-making) was often burdensome because it required combinations of multiple hard-copy and digital forms; entry/transcription into multiple spreadsheets, documents; and extensive follow-up/clean up by school team members and PaTTAN consultants. Therefore, for Iteration 2, the State decided to enhance the online data management system originally designed for the Path to Graduation initiative (the SPDG) to meet the needs of the SSIP. Additionally, for Iteration 2 a statewide overview of SSIP was provided in August 2021 for administrators and leaders for all of the learning sites . A more detailed overview diving into the Theory of Action, data collection procedures/timelines, and SSIP teaming roles/functions, was provided to each Iteration 2 individual SSIP team in September 2021.

Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.

Pennsylvania will implement lessons learned from Iteration 1 of the SSIP and continue to focus on improving graduation rates for SWDs. Given positive results achieved across the previous implementation, Iteration 2 will follow the same scaffolded three-phased approach and timeline at the 16 new learning sites. The current phase for Iteration 2 focuses on capacity building and will progress from baseline data collection to comprehensive data-based decision making in EWS implementation for early risk identification as the SSIP moves into Year 2.

Actions and anticipated outcomes for the 2021-2022 reporting period activities for Phase 1 and Phase II include:

  • Professional Development and Technical Assistance to 16 SSIP Learning Sites to Build Capacity

  • Frequent direct support and TA from PaTTAN Consultants (virtually, phone conferences, and/or onsite)

> Initial EWS implementation for early identification and support to SWDs off-track for graduation;

> EWS data collection and entry into the SSIP online data management system;

> ABC analysis/data-decision teaming to make informed decisions about progress and intervention; and

> Creation of site Action Plans and assist sites with the implementation of CISs.

  • State Infrastructure Development and Capacity Building

> Continued engagement with stakeholders to improve two-way communication;

> Continued 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.

> Continued interdepartmental meetings with other PDE leaders/departments focused on increasing graduation rates;

> Continued partnership with HUNE and PEAL to support building capacity in agencies and families;

> Communicating on an ongoing basis with OSEP, NTACT:C, IDC, and NCSI staff, as well as the SSIP external evaluator, to plan and monitor implementation of the SSIP;

> Ongoing distribution statewide of print/digital publications and SSIP training materials; and

> CIS and EBP trainings through close collaboration with Intermediate Unit Training and Consultation, (TaCs).

List the selected evidence-based practices implement in the reporting period:

Aligned with the theory of action, Pennsylvania selected 7 EBPs known to positively impact school completion and reduce dropout rates of students with disabilities for both Iteration 1 and Iteration 2 of the SSIP.

1. Utilize data systems to identify, inform, monitor, and increase the number of students with disabilities that graduate from high school (Early Warning System).

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).

6. Embrace a philosophy of partnership that empowers families and communities to become more meaningfully involved (Family engagement, mentoring, partnering with federally funded centers - Parent Training and Information Centers and Community Parent Resource Centers).

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.

Throughout the final months of Iteration 1 of SSIP implementation, the original 12 learning sites continued to deliver CISs with layers of embedded EBPs. All SSIP sites continued implementation of the EWS as designed, with embedded Family Engagement and CRPs with at least one additional layer of EBPs chosen because they are known to have high impact on student outcomes and increase the likelihood of graduation.

  • 9 sites implemented combinations of various Attendance and Alternative Programming interventions

• 8 sites implemented multiple combinations of MTSS Academics and MTSS Behavior interventions

• 4 sites implemented Secondary Transition supports

• 7 sites implemented multiple programs of MTSS Academics, MTSS Behavior, Attendance and Alternative Programming, and Secondary Transition.

Each local leadership team decided on a specific intervention program (or combinations thereof) aligned to these 7 EBPs based on student data/needs (e.g., Check & Connect; Language Live, Mastery Connect, etc.) and implemented those interventions according to program guidelines/fidelity requirements. Layers of intervention changed throughout the year based on student response, data trends, and team decision-making. Exit/sustainability survey data indicated that the vast majority (75%) thought combinations of the EWS plus SWPBIS with Check & Connect implementation were most effective. Seven of twelve sites plan on sustained implementation of the same layers of EBPs and standard protocol interventions long term because of familiarity, consistency, and positive results throughout the SSIP. 4/12 sites plan on enriching their existing EBPs with additional mental health interventions and Universal Design for Learning supports. One site plans on exploring different EBPs.

Based on the success of Iteration 1 outcomes, the same EBP framework is in place for the scale-up of Iteration 2. In Year 1, all 16 SSIP learning sites are required to implement an EWS. Family Engagement and Culturally Responsive Practice EBPs are embedded into action planning

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.

Iteration 1: As evidenced by the trajectory changes for Groups 1-3 SWD at risk for failure from "Off-Track" to "On-Track" summarized in this and previous SSIP reports, the implemented CISs and EBPs favorably impacted student outcomes. Various qualitative data from surveys, action plans, meeting protocols, and consultant reports also suggest that faithful EWS implementation with additional layers of EBPs helped teachers become more "knowledgeable", "equipped", "responsive", and "data-driven". Exit/Sustainability survey responses from the 12 implementation sites highlighted common themes of:

• improved daily student attendance and academic performance for the highest risk groups;

• improved graduation rates for SWD overall;

• improved school culture and climate of accountability and success;

• stronger connections with students;

• stronger collaboration and teaming among general educators, special educators, and school administrators/leadership;

• better outreach to families, community, and student mentorship; and

• wide-spread system-wide changes to improve data-based decision making and early support for students at risk.

Given the early status of new SSIP implementation Iteration 2 for this reporting period, EBPs are not yet selected or implemented in the new sites. Outcome/impact data will be reported in subsequent reports.

Describe the data collected to monitor fidelity of implementation and to assess practice change.

For Iteration 1, fidelity data were collected by using the standard published protocols for specific CIS programs or by using protocols developed by PaTTAN in Years 3 and 4 of SSIP implementation. As discussed in previous reports, permitting learning sites to select the CISs that would best meet their needs resulted in eight different combinations of these strategies, confounding the ability to compare the effectiveness of any one of them in isolation. Fidelity ratings for any/all of the CISs were consistently high across all 5 years at all learning sites, meeting or exceeded protocol requirements of 85%-100%. PaTTAN/HUNE developed toolkits to support 100% engagement with Culturally Responsive Instruction EBPs and 100% documentation of Family Engagement EBPs. All sites demonstrated 100% fidelity of Action Plan completion and 100% fidelity of EWS implementation.

Fidelity data has not yet been collected for the Iteration 2 SSIP initiative. However, measures, process, analysis, and TA for fidelity monitoring will mirror that of Iteration 1.

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.

No additional student-level data were collected for the culmination of Iteration 1 other than EWS and graduation data summarized earlier in this report. However, SSIP Team leaders at each site completed exit/sustainability surveys. As discussed previously in this report, the surveys included questions asking team members to reflect on the effectiveness of implemented EBPs.

Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.

All data collection on SSIP implementation and EBP effectiveness at Iteration 1 sites was confirmed as complete in August 2021. All 12 sites' exit/sustainability survey responses indicated they plan to continue with all components of model implementation due to its positive effect on graduation, achievement, behavior, instruction, and relationships.

Next steps for Iteration 2 sites adoption and implementation of EBPs will be determined after teams analyze EWS and ABC data to plan for interventions in response to student risk factors and performance.

Section C: Stakeholder Engagement
Description of Stakeholder Input

SSIP Iteration 1

Stakeholders at all iteration 1 learning sites, including families, youth, and practitioners, were engaged in activities focused on sustainability planning, including meetings, forums, and surveys across the 5-years of SSIP implementation. Feedback from teachers was particularly valuable in refining and enhancing the model for effective scale-up. Teacher input influenced the development of the new online data management system. Exit/sustainability survey data also highlighted perceived implementation strengths & weaknesses to inform considerations for iteration 2. Additional analysis of results revealed that 100% of teachers recommend that iteration 2 sites take advantage of PaTTAN support, PD, & TA at all phases of upcoming implementation; 42% suggest more support for sites to address teacher shortages and frequent administrative changes; 58% viewed all implemented CIS as successful in improving student & instructional outcomes in measurable ways (e.g., graduation; course grades; office referrals; attendance; etc.) and informal ways (e.g., relationships; connections; communication; SEL; etc.). Individual survey responses described the benefit of specific programs like Check & Connect, Credit Recovery and specific PD opportunities focused on "trauma" & "mindfulness".

The BSE 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 throughout Year 5. The BSE also continued collaboration with national OSEP-funded partners, including NCSI, NTACT: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 in iteration 2.

SSIP iteration 2

Please refer to the Stakeholder Involvement Section of the Introduction to this SPP/APR for a complete description of the process BSE used to engage stakeholders in providing input for all indicators. Below is an excerpt of that information specific to stakeholder engagement for the SSIP.

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 that could assist the BSE with outreach to groups and individuals. The decision was made to hold a series of public forums and to also develop a dedicated website to both inform stakeholders and receive their input on targets.

The PDE widely disseminated announcements inviting participation in the forums and online options. These announcements were distributed to the state's SEAP, PTI, and CPRC, state and local advocacy organizations representing various disability and demographic groups, such as the Arc, Autism Society, Easter Seals, Local Task Forces on Right to Education, colleges and universities, school districts, charter schools, intermediate units, approved private schools, the ODR Stakeholder Council, and a large number of individual parents and professionals that have been engaged in previous SPP/APR/SSIP work or may wish to participate. PaTTAN also disseminated the announcement to the Families to the Max Network, Pennsylvania's grassroots Statewide Family Network that includes hundreds of families of students with disabilities. The announcements were also posted on websites customarily accessed by educators, agencies, and families of students with disabilities.

Due to the pandemic all forums were conducted virtually. Forums began with an overview, after which participants moved to breakout rooms which were kept small to promote optimal participation. Each breakout room had a trained facilitator to support the group throughout the process. The breakout session began with a detailed power point presentation showing how the indicator is defined and calculated, how data are analyzed, the state's performance on prior targets, baseline and trend analyses, special considerations such as the potential impact of the COVID-19 pandemic on performance, and how progress is evaluated. Stakeholders were then asked to discuss the information in depth, provide input on targets and recommendations for improvement strategies, and reach consensus where feasible. Notetakers recorded all input.

The BSE collaborated with the PEAL Center to plan and conduct an evening forum, open exclusively to families, to solicit stakeholder input on targets and improvement strategies for all indicators, including the SSIP. The BSE Director and Executive Director of PEAL gave joint opening comments, and the forum was facilitated by staff that work in the family engagement initiative at PaTTAN. Twenty-three families registered for the event.

The BSE collaborated with HUNE to focus on outreach to Hispanic parents. HUNE conducted six public forums over five months, and provided feedback to the BSE for all indicators, including the SSIP. Sixty- three family members participated.

A forum focused exclusively on the SSIP. One hundred twenty- eight individuals registered to participate; parents and advocates represented 21% of the total.

The BSE conducted three meetings with the SEAP. At these meetings, the BSE provided feedback to the Panel about the public forums and gathered the Panel's input and recommendations for targets and improvement strategies for all indicators, including the SSIP. The Panel includes 11 parents of a student with a disability, as well as several advocates.

Interested stakeholders, including parents and parent representatives, also provided online input through a dedicated website.

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 SSIP targets for 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.

Describe the specific strategies implemented to engage stakeholders in key improvement efforts.

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 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, 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/SSIP. SEAP includes a diverse group of parents and advocates.

Specific to increasing capacity of diverse groups of parents in the process of setting targets, analyzing data, developing improvement strategies, and evaluating progress for the SSIP, the BSE developed and posted 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 Indicator. PaTTAN consultants facilitated breakout groups at all forums and content experts for each Indicator were available throughout the forums to respond to any requests for clarification or provide further explanations if participants had questions This increased the capacity of stakeholders to provide high quality feedback on complex topics.

PaTTAN and HUNE continued 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 were reported as widely used and effective.

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 SWDs 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 of the SSIP are being incorporated into major BSE-sponsored conferences. Additionally, a dedicated website is being developed to post updates, respond to questions and concerns, and receive stakeholder input on the state's SPP/APR, including its SSIP.

Were there any concerns expressed by stakeholders during engagement activities? (yes/no)
NO
Describe how the State addressed the concerns expressed by stakeholders.

Not Applicable

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.

The current SSIP (Iteration 2) is a scale up of the previous SSIP, therefore follows NDPC-SD's five-phase Intervention Framework.

    • Year 1 (Phase 1): focus on capacity building for theory of action adoption; Evidence Based Practices (EBPs) implementation and establishment of an Early Warning System (EWS);

    • Year 2: build on data and infrastructure analysis, Coherent Improvement Strategy adoption, and evaluation planning;

    • Year 3: focus on progress toward short-term and long-term objectives for the SSIP and the SIMR;

    • Year 4: continue implementation monitoring, fidelity measurement, and sustainability planning; and

    • Year 5: focus on site's independent implementation, sustainability and scale-up of the comprehensive model.

Describe any newly identified barriers and include steps to address these barriers.

Several of the Iteration 2 sites are cyber schools serving thousands of students with disabilities across the entire Commonwealth.   Tracking students

may prove difficult because historical data shows that enrollment data fluctuates frequently as students transfer in and out of different cyber schools, and back and forth to brick-and-mortar schools. Moreover, ABC data may be confounded by the unique course structure of some of the cybers that offer broad flexibility in the number and type of academic courses vs. electives that students can enroll in at any given time. Furthermore, although all will monitor attendance with the EWS, each measures attendance differently (e.g., login time, completed classwork, synchronous sessions, asynchronous sessions, etc.) The State is working closely with consultants and experts at the national and state levels to address these challenges.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - OSEP Response

The State has established the baseline for this indicator, using data from FFY 2018, and OSEP accepts that baseline.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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

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Submitted on:

04/28/22 12:02:36 PM

ED Attachments

pa-resultsmatrix-202
2b.pdf

PA-B-Dispute-Resolu
tion-2020-21.pdf

PA-2022DataRubricP
artB.xlsx