STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

For reporting on
FFY 2022

Pennsylvania

PART B DUE February 1, 2024

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 2022, there were approximately 1.7 million students enrolled in Pennsylvania's public schools, with 19.3% of these students receiving special education services. The state has 500 school districts and 177 charter schools. These entities serve as the responsible Local Education Agency (LEA) for the provision of a Free Appropriate Public Education (FAPE) for students with disabilities. The Pennsylvania Department of Education (PDE) provides general supervision of all public schools, school districts, and other public education agencies within the state. The PDE also has comprehensive systems for the provision of technical assistance and professional development, as described in detail in the next sections of this report.

On July 8, 2022, Governor Wolf signed Act 55 of 2022 into law, which permitted a student with a disability who was enrolled during the 2021-22 school year and turned 21 during the 2021-22 school year, or between the end of the 2021-22 and the beginning of the 2022-23 school year, to attend a school entity during the 2022-23 school year. Elementary and Secondary School Emergency Relief II funding applications opened on January 15, 2021, and once awarded, may be applied to costs dating back to the onset of the national emergency (March 13, 2020) and were available through September 30, 2023. Additional information on the distribution of these funds is available on the PDE website.

Beginning on January 15, 2023, and in accordance with guidance from the Office of Special Education (OSEP), the Office of Dispute Resolution (ODR) is no longer responsible for calculating the 15-day resolution meeting timeframe and the 30-day resolution period for the parties. This responsibility has been shifted to LEAs that are in turn asked to provide the hearing officer with the dates they received parents' due process complaint notices. The hearing officer uses those dates to calculate the decision due dates. In addition, the LEA is now responsible for calculating the 15 and 30-day time frames based upon the date it received parent's due process complaint notice and provide this information in the Resolution Meeting Data Form, which the Bureau of Special Education (BSE) uses to document its compliance obligations.

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

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

The Pennsylvania Office of Child Development and Early Learning, Bureau of Early Intervention Services and Family Supports (BEISFS) contracts with 34 intermediate units, school districts, and agencies which have responsibility for the provision of Part B 619 Preschool Early Intervention (PSEI) services to enrolled children and their families. BEISFS partners with the Pennsylvania Department of Education and the Department of Human Services on the development and implementation of policy and guidance for local Early Intervention (EI) and school-age special education programs.

BEISFS provides general supervision of both the Part C Infant Toddler and the PSEI programs that ensures that the EI program meets IDEA and state regulations and requirements. Through the general supervision systems, BEISFS ensures that all instances of systemic and child-specific noncompliance are identified and corrected.

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 collaborates with two federal Parent Training and Information Centers, the Parent Education and Advocacy Leadership (PEAL) Center and HUNE. BEISFS provides a comprehensive technical assistance and professional development system, through Early Intervention Technical Assistance (EITA), that supports both the Part C and Part B 619 EI leadership, service providers, and families. Pennsylvania's State Professional Development Grant, Success for Pennsylvania's Early Learners (SPEL) is a collaborative effort across school-age special education, Part B 619, and Part C EI, providing professional development activities focused on the Part C SSIP.

During FFY 2022, Pennsylvania's EI program continued to respond to the challenges of the continued impact of the COVID-19 pandemic on the provision of services to children enrolled in EI and their families. EI programs were challenged with the decreased availability of early childhood programs since the pandemic. Early childhood programs, including childcare, Head Start and PreK Counts programs are the educational environment for many preschoolers in the EI program. Retaining and recruiting EI staff also remained a concern that impacted the provision of services in FFY 2022.

Additional information related to data collection and reporting

School Age Programs (Bureau of Special Education)

Pennsylvania uses a comprehensive, integrated monitoring system (IMS). The IMS data management system provides student level individual corrective action reports, system wide corrective action reports and system wide improvement planning reports to ensure a multidimensional approach to enforcing compliance and leveraging technical assistance for Part B in Pennsylvania.

Data in IMS are routinely and rigorously analyzed by BSE staff for fiscal and programming compliance of Pennsylvania's LEAs across educational settings. The integrated system provides robust reports that support supervision of program management, improvement processes and procedures, and correction of identified noncompliance. IMS affords Pennsylvania the ability to exercise data driven enforcement and technical assistance for continuous compliance and improvement.

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

Pennsylvania uses a comprehensive data management system, PELICAN-EI, that enables the review of individual child and statewide data. The data management system supports referral information, service coordination activities, planning information, financial management, quality measures and other reporting needs for BEISFS. PELICAN-EI generates evaluation and educational plan documents. The information in PELICAN-EI is used to create reports to assist in program management, verification processes, and the identification and correction of noncompliance. Rigorous analysis of the data on a monthly, quarterly and annual basis allows BEISFS to ensure data driven decision making for quality improvement.

Number of Districts in your State/Territory during reporting year

679

General Supervision System:

The systems that are in place to ensure that the IDEA Part B requirements are met (e.g., integrated monitoring activities; data on processes and results; the SPP/APR; fiscal management; policies, procedures, and practices resulting in effective implementation; and improvement, correction, incentives, and sanctions).

School Age Programs (Bureau of Special Education)

The BSE monitors all LEAs on a six-year cycle, including county prisons, detention facilities, nursing homes and other facilities where children are placed by a public entity. State juvenile facilities and state correctional institutions are monitored on a three-year cycle. Pennsylvania Training and Technical Assistance Network (PaTTAN) consultants, Intermediate Unit (IU) Training and Consultation (TaCs), and the BSE work collaboratively to support and ensure timely correction of noncompliance, effective implementation of policies, procedures and practices, including improvement, correction, incentives and sanctions activities.

As part of the BSE's monitoring system, the BSE conducts focused monitoring based on data and recommendations from stakeholders and when information from sources such as complaints or other data, including dispute resolution data, suggests a systemic concern. The BSE examines requirements related to the rights of children with disabilities and their families such as the extent to which children with disabilities are receiving the IDEA services as prescribed in their Individualized Education Program (IEP).

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

When findings of noncompliance are issued, the LEA is informed of the regulation violated and is required to develop a BSE approved and monitored corrective action plan. The procedures required systemic correction of policies, procedures and practices and verification of correction through file reviews, consistent with OSEP QA 23-01. 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 and ensures the information reviewed to determine systemic correction represents the population served within the LEA, and that no outstanding corrective action exists under a state complaint or due process hearing decision. The BSE maintains documentation and evidence demonstrating that each LEA has corrected each individual case of the previously noncompliant files, records, data files or data source used to identify the original noncompliance, if applicable, and that the review of updated data and information did not reveal continued noncompliance.

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.

BSE's monitoring system is aligned with OSEP's Results Driven Accountability and ensures compliance with regulatory requirements. The system incorporates outcome data, such as graduation rates and child-specific educational benefit review data. LEAs are required to develop improvement plans where SPP/APR targets are not met.

Dispute Resolution

PA has procedures in place to review, identify and correct child-specific noncompliance identified in a compliant, mediation or hearing decision and to correct policies, procedures and practices that may affect other students with disabilities within the LEA. Independent mediators and impartial hearing officers in the Office for Dispute Resolution (ODR) ensure most mediations are resolved in agreements and most due process complaints are resolved prior to full adjudication. In reviewing complaints and decisions, the BSE looks for patterns that suggest systemic noncompliance with IDEA requirements. Where patterns exist, the BSE determines whether systemic noncompliance occurred and ensures correction in a timely matter.

The ODR oversees timely implementation of the resolution process. While not required by federal regulations, the ODR provides additional resources to assist parents and LEAs to resolve disputes. Information about these resources can be found at odr-pa.org.

Fiscal

The BSE's Division of Analysis and Financial Reporting is responsible for monitoring Part B 618 and 619 subrecipient's compliance with IDEA, GEPA, EDGAR, and the OMB Uniform Guidance. Monitoring occurs on a cyclical basis. BSE reserves the right to monitor when an area of concern is identified. This risk assessment tool looks at any credible allegation regarding an IDEA policy, procedure, practice, or other requirement that raises one or more potential implementation or compliance issue.

The division monitors compliance with timely submission in relation to Adoption Policies and Procedures, Maintenance of Effort, Coordinated Early Intervening Services, Significant Disproportionality, Equitable Participation, certification, time, and effort logs as they relate to training and consultation, and parent involvement policies.

After BSE's fiscal reviews, 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 no later than one year from the notification. During this time, the BSE conducts reviews.

Once compliance is achieved, BSE conducts reviews to assist in the identification of root causes, including required technical assistance. BSE informs the subrecipients of pending enforcement actions should they fail to correct the noncompliance within one year.

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

BEISFS ensures that IDEA and state requirements are met through its general supervision system. PSEI programs are assigned a BEISFS advisor who, as the primary contact to the PSEI, is responsible for monitoring budget concerns, compliance issues, complaint issues and policy requirements. Advisors have contact with their PSEI programs including verification and validation visits, development of Quality Enhancement Plans (QEP), complaint investigations, leadership conferences and statewide leadership meetings. This process ensures BEISFS fulfillment requirements for effective general supervision; ensures the correction of systemic and child specific noncompliance according to timelines; and implementation of improvement and enforcement strategies.

PSEI programs participate in a verification visit every four years. Additional visits from BEISFS occur at the discretion of BEISFS if, during the verification cycle, there is a significant decrease in performance or if individual or systemic areas of noncompliance are identified. Verification is conducted through data reviews, policy reviews, individual child record reviews and observations of EI services.

PSEI programs must develop a QEP to correct systemic and child specific noncompliance, which are approved by BEISFS. QEPs are based on findings of noncompliance from visits and the determination process. The QEP identifies specific programmatic outcomes and how progress will be measured. The QEP is a flexible document that is updated annually, or as additional needs arise. If a PSEI program does not correct noncompliance according to timelines, additional procedures are implemented.

BEISFS's determination process includes APR/SPP indicators, complaint data and data quality indicators. The annual determination process provides ratings of meets requirements, needs assistance, needs intervention, or needs substantial intervention. Based on the determination results, PSEI programs update QEPs with strategies to correct identified noncompliance. The determination is used to identify and provide differentiated levels of support to PSEI programs.

The Pennsylvania ODR implements a dispute resolution system for BEISFS. Trends are analyzed, and improvement strategies, including training, are implemented.

Technical Assistance System:

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

School Age Programs (Bureau of Special Education)

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

PaTTAN also offers multiple TA opportunities throughout the year to support the implementation of federal and state regulations, including procedural safeguards.

The Attract Prepare Retain (APR) initiative has developed grants and supports to address the special education work force, including school psychology paid internships for out of state graduate students, Developing Future Special Educators Grants to high schools, and paraprofessional development grants to IUs. In addition, this initiative has developed mentoring and networking opportunities for retention efforts.

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 (PD) systems. TA is based on current research and EBPs and is aligned with the principles of OSEP's RDA.

PaTTAN has three locations, one each in the eastern, central, and western areas of the commonwealth. The BSE funds five full-time equivalent Training and Consultation (TaCs) positions within each of the state's 29 IUs. PaTTAN and IU TaCs fulfill the federal requirement for consultation and TA functions. Further, because PA has established regional PaTTAN offices, training and TA are localized and highly customized through ongoing collaboration between PaTTAN and IU consultants and LEAs.

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

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

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

Due to significant shortages of staff resulting in vacancies and less qualified, inexperienced special education professionals without veteran educators to guide them, the BSE has shifted it's professional development (PD) and TA vision. Customized Professional Development and Technical Assistance (CPDTA) is designed to provide accessible, customizable, and evidence-based PD and TA to educators. By collaborating with IUs, LEAs, researchers, and other stakeholders, the BSE is developing and implementing effective strategies that bridge the gap between research and practice, and that promote the professional growth and retention of special education teachers. These efforts promote a more equitable and inclusive education system that meets the needs of all learners.

Within the opportunity for customized supports LEAs can choose from the following four distinct support types: Systematic Customized Support; Critical Customized Supports; Emergent Short-Term Customized Supports; and Professional Development Customized Supports.

Systemic Customized Supports offers a broad range of training and TA opportunities, including long-term plans that align with an LEA's specific goals and objectives. PaTTAN works collaboratively to identify areas of need and develop comprehensive training and TA plans. Additionally, grant funding is available to support coordinated efforts.

Critical Customized Supports provide individualized training and TA to help educators build skills and knowledge needed to overcome immediate challenges. The goal is to provide targeted support that improves student outcomes and builds capacity within an LEA.

Emergent Short-Term Customized Supports provide training and TA for unforeseen needs that arise. This flexible approach allows for a quick response to an LEA's needs, providing immediate support tailored to specific requirements.

Professional Development Customized Supports allow LEAs to request specific training or TA that addresses a particular challenge or area of need. Consultants collaborate with LEAs to design a training plan that meets any unique requirements and aligns with the LEA's goals and objectives.

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

- Educational Consultants;
- Conferences, Institutes, and Forums;
- Collaboration with other agencies and Institutions of Higher Education (IHEs);
- Webinars and face-to-face training sessions;
- Schoology Courses; and
- Website resources.

BSE Is an active member of the Workforce Innovation and Opportunity Act state plan revision, providing critical connections between the technical assistance provided to schools and employers to ensure continuity of support for students with disabilities in competitive integrated employment settings.

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

Early Intervention Technical Assistance (EITA) provides statewide training and technical assistance on behalf of BEISFS. The primary recipients of EITA services are the local Infant Toddler and PSEI programs. EITA is part of PaTTAN, the school-age training and technical assistance system. EITA supports statewide initiatives that are identified through the analysis of statewide data, including verification results, determinations, compliance with state and federal requirements, evidence based EI practices, and planning with BEISFS staff. Statewide professional development events are provided 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 EI service delivery using coaching and embedded instruction, positive behavior supports, family engagement, leadership skill development, and essential skills for implementing EI services.

An EITA Consultant is assigned as the primary contact for each PSEI program and is responsible for assisting the PSEI program in providing local training as needed. EITA participates in verification visits and assists each PSEI program in the development of annual QEPs.

Professional Development System:

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

School Age Programs (Bureau of Special Education)

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

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

PD includes but is not limited to:

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

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

- Pennsylvania Learning Environment and Engagement Initiative: The PDE and BSE, in conjunction with PaTTAN, provide effective behavior supports to LEAs, schools, classrooms, and students. Notable improvements were made to the BSE restraint manual to shift the paradigm from reaction to pro-action and emphasizes prevention before crisis and the reduction of the use of restraints.

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

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

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

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

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

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

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

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

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

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

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

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

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

• Disability Innovation Fund: Pathway to Partnerships: BSE works diligently and collaboratively with Office of Vocational Rehabilitation and Office of Developmental programs on the design and implementation of the Disability Innovation Fund: Pathway to Partnerships grant. The intention of that grant is to build capacity at the local level through professional development and training of providers as well as increasing the work based learning models available regionally.

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

Pennsylvania's professional development system is designed to ensure high quality EI services that are provided by skilled, highly qualified EI staff. EITA provides four core functions used by EITA to support BEISFS's management of the EI system including:

1. Verification Support - providing support to BEISFS's verification process to ensure high-quality EI services; participation in infant toddler and PSEI 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 BEISFS in the 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, statewide leadership activities, policy-related research, and materials development.

3. PD 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. PD 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; materials development and dissemination, and collaboration with Pennsylvania's State Professional Development Grant, Success for Pennsylvania's Early Learners (SPEL).

Stakeholder Engagement:

The mechanisms for broad stakeholder engagement, including activities carried out to obtain input from, and build the capacity of, a diverse group of parents to support the implementation activities designed to improve outcomes, including target setting and any subsequent revisions to targets, analyzing data, developing improvement strategies, and evaluating progress.

School Age Programs (Bureau of Special Education)

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

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

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

The SPP/APR team is frequently engaged by stakeholders in informal settings. This proves to be a valuable tool in building trust and understanding with one another while working to improve outcomes for children with disabilities.

During FFY 2022, the BSE extended efforts to further develop broad and diverse stakeholder engagement, by including activities to build capacity beyond those who attend PDE sponsored conference and summits. Specifically, the BSE began presenting at the annual PA Family Involvement Conference and at the University of Pittsburgh sponsored Special Education and Educational Law Symposium.

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

The EI system has two primary stakeholder groups, one with a birth-5-year-old focus, the State Interagency Coordinating Council (SICC), and one with a 3-21 year old focus, the Special Education Advisory Panel (SEAP). These two groups allow BEISFS to gather statewide stakeholder input across all ages and across all geographic regions. BEISFS also collaborates with two federal Parent Training and Information Centers, the PEAL Center and HUNE.

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

BEISFS holds bi-monthly meetings with the Infant Toddler and PSEI program leaders. The EI leaders were offered an opportunity for feedback on the APR data, targets, and improvement activities throughout FFY 2022. BEISFS staff also provide updates and gathered feedback on the APR from the Pennsylvania Association of Intermediate Units Special Education Directors, Pennsylvania Association of County Administrators, and the Early Intervention Providers Association.

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

NO

Number of Parent Members:

144

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)

During FFY 2021, the BSE planned and led sessions designed to provide parents Indicator-specific definitions, data, statistics, opportunities to ask clarifying questions and to suggest improvement strategies. In FFY 2022, the focus of these ongoing sessions shifted from coaching to facilitating member-led discussions, while gathering recommendations and other input. A specific component of these presentations displayed each Indicator's baseline data, interim and terminal targets, performance, and whether the state met the specific interim target for the reporting period. These sequential illustrations utilized data visualization techniques to clearly signify the difference between Indicators where values for performance need to increase or decrease, and to simplify the understanding of desired performance. This concept is often lost with number and/or percentage only displays.

With the support of PaTTAN, these sessions continue to be offered synchronously in-person and through virtual offerings. Participants are encouraged to submit written feedback during the session, via a dedicated SPP/APR email account, and/or through specific committee work summaries. The dedicated SPP/APR email account, established in FFY 2020, is monitored by the SPP/APR team, and will remain active and available to stakeholders, including parents, through FFY 2025.

The SPP/APR team regularly attends SEAP meetings to discuss specific SPP/APR Indicators. This type of engagement is a valuable tool in promoting informal and authentic advisement that supports the development of implementation activities designed to improve outcomes for children with disabilities. Included in the SEAP panel are 18 parents of students with a disability.

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

In FFY 2022, Pennsylvania's EI program used existing stakeholder meetings as an opportunity to engage family members in setting targets, analyzing data, developing improvement strategies, and evaluating progress. Meetings held in FFY 2022 reviewed APR data, results of implementation of improvement strategies, APR progress, and allowed families to provide feedback.

Information on the APR was provided to the SICC on December 1, 2022. On September 29, 2022, and January 18, 2023, APR data was discussed with SEAP.

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, 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. 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 the 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)

Statewide and local training activities are the primary methods used to increase the capacity of diverse groups of parents to support the implementation of APR improvement activities to improve outcomes for children in the PSEI program. During FFY 2022, statewide training events included SICC/LICC Policy Family Forum, SICC Meet and Greets, Parents as Partners in Professional Development, and Competence and Confidence: Partners in Policy. These activities included updates on APR improvement activities, reviews of APR data, and provided feedback to BEISFS. Local PSEI programs and LICCs also offered training to families in their programs on topics related to improving outcomes for children in PSEI programs.

Pennsylvania's Part C Statewide Systemic Improvement Plan (SSIP) has a birth to five focus on evidence-based strategies for EI service delivery, specifically Family Guided Routines Based Intervention using family coaching and Embedded Instruction. The overall goal of the SSIP for both Infant Toddler and PSEI programs is to build and support family competence in helping their child learn. The PSEI component of the SSIP includes professional development activities for both family members and professionals.

BEISFS is a partner in implementing the SPEL grant which supports coaching and embedded instruction professional development activities, the development of Family Ambassadors to support families and children transitioning from PSEI to kindergarten programs, and the development of transition and family engagement resources for families.

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)

With targets set for results Indicators, BSE has solicited input from stakeholders, especially the SEAP, on improving data collection methods for parent input.

The BSE is investigating methods of survey data collection to improve the response rate of parents of students with disabilities. Options being considered include a reduction in the number of questions to which parents are asked to respond and changes in the delivery method of surveys to parents sampled for response. As BSE is currently engaged in the planning process, it is not yet known whether there will be sufficient time to have all improvements in data collection procedures in place for FFY 2022.

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

In addition to the events described in the Parent Members Engagement section above, meetings were held with stakeholder groups that included EI administrators, EI providers, and early childhood agencies. These groups included the Early Intervention Providers Association, the Pennsylvania Association of Intermediate Units, Early Learning Resource Centers, and the Pennsylvania Association of County Administrators. Meetings were held with these groups in FY 2022 and included opportunities for input on the review of APR data, target setting, and improvement activities.

Throughout FFY 2022, BEISFS held bi-monthly meetings with the leaders of the local Infant Toddler and PSEI programs. Leaders received updates on data analysis of APR indicators and were asked to provide input on improvement strategies on October 28, 2022 and April 28, 2023.

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)

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

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

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

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

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

Updates are provided to the public during each of the BSE's annual topical conferences such as the PDE conference, the Special Education Leadership Academy, the National Autism Conference, and the Pennsylvania Community of Practice Transition Conference. These sessions include opportunities to discuss the results for each Indicator and how students with disabilities are impacted. In addition, specific sessions are provided to the state's SEAP, PTI, CPRCs, and Local Task Forces on the Right to Education. PaTTAN disseminates announcements and supports the data presentations to ensure the public has numerous opportunities to learn about and conceptualize performance.

During FFY 2022, the BSE extended efforts to further disseminate results by presenting at the annual PA Family Involvement Conference and at the University of Pittsburgh sponsored Special Education and Educational Law Symposium. These two specific opportunities include a cadre of school personnel who would also benefit from understanding the impact of these Indicator data.

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

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

Reporting to the Public

How and where the State reported to the public on the FFY 2021 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 2021 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 revisions if the State has revised the targets that it submitted with its FFY 2021 APR in 2023, is available.

School Age Programs (Bureau of Special Education)

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

https://penndata.hbg.psu.edu/Public-Reporting/SEDR-Report-Dashboard .

Here, data are presented in the dashboard format, and the LEA and year of interest can be selected through drop-down menus.

Data prior to FFY 2020 can be found here in a static form:

https://penndata.hbg.psu.edu/Public-Reporting/SEDR-Reports-Archive .

The FFY 2021 SPP/APR can be located at the following websites:

https://www.education.pa.gov/K-12/Special%20Education/IDEA/Pages/StatePerformancePlan.aspx

and

https://www.pattan.net/Legal/Federal-Laws-and-Regulations/PA-Laws-and-Regulations/The-State-Performance-Plan-Annual-Performance-Repo .

The report for FFY 2022 will appear on these pages when Pennsylvania receives its state determination in June 2024.

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 PSEI program.

Announcements are 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.

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 includes FFY 2005 through FFY 2021 APR data for each PSEI program and a link to the entire SPP/APR. The dashboard will be updated to include FFY 2022 data no later than 120 days from submission of the SPP/APR. Information can be found at:

https://penndata.hbg.psu.edu/PublicReporting/EarlyIntervention/tabid/2534/Default.aspx .

Additional links to the SPP/APR can be found on Pennsylvania Department of Education's Early Intervention page (https://www.education.pa.gov/Early%20Learning/Early%20Intervention/Pages/default.aspx) and the Department of Human Services' Early Intervention page (https://www.dhs.pa.gov/Services/Children/Pages/Early-Intervention-Services.aspx) .

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 ED*Facts* 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 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	86.13%

FFY	2017	2018	2019	2020	2021
Target >=	75.15%	72.60%	73.70%	85.90%	85.90%
Data	73.64%	70.24%	70.74%	89.34%	89.88%

Targets

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

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for School Age Programs (Bureau of Special Education) reside.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	20,996
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	8
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	29

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2,869

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
20,996	23,902	89.88%	85.90%	87.84%	Met target	No Slippage

Graduation Conditions

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

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

These expanded options are:

- Keystone Proficiency Pathway (Scoring proficient or advanced on each exam); or

- Keystone Composite Pathway (earning a satisfactory composite score and at least a proficient score on at least one of the Keystone Exams, and no less than a basic score on the remaining two); or

- Alternate Assessment Pathway (successful completion of locally established grade-based requirements for academic content areas associated with each Keystone Exam, and one of the 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 graduating class of 2022. However, due to the COVID-19 pandemic, the effective date was moved to 2023. For school years 2019-20, 2020-21, and 2021-22 there was no statewide graduation requirement.

In July 2022, Governor Tom Wolf signed Act 55 of 2022 into law. Act 55 amends the Pennsylvania School Code to further assist students in meeting statewide high school graduation requirements. Local policies govern graduation practice. Under Act 158, all LEAs are required to notify students, parents, and guardians of the LEA's high school graduation requirements, and must publish such requirements on the LEA's website.

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

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

NO

Provide additional information about this indicator (optional)

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in ED*Facts* 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 dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the section 618 exiting data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a

state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	13.39%

FFY	2017	2018	2019	2020	2021
Target <=	10.97%	10.97%	9.00%	12.79%	12.79%
Data	12.02%	13.55%	13.39%	10.59%	9.89%

Targets

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

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for School Age Programs (Bureau of Special Education) reside.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	20,996
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	8
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	29
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2,869

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2,869	23,902	9.89%	12.79%	12.00%	Met target	No Slippage

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

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

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

NO

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

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* 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	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

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

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for School Age Programs (Bureau of Special Education) reside.

FFY 2022 Data Disaggregation from ED*Facts*

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

01/10/2024

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	27,273	27,988	24,475
b. Children with IEPs in regular assessment with no accommodations (3)	6,745	7,292	8,801
c. Children with IEPs in regular assessment with accommodations (3)	16,072	14,756	10,383
d. Children with IEPs in alternate assessment against alternate standards	2,469	2,429	2,153

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

01/10/2024

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	27,265	27,964	23,087
b. Children with IEPs in regular assessment with no accommodations (3)	7,135	7,579	7,749
c. Children with IEPs in regular assessment with accommodations (3)	15,785	14,417	9,751
d. Children with IEPs in alternate assessment against alternate standards	2,472	2,430	2,158

(1) The children with IEPs who are English learners and took the ELP in lieu of the regular reading/language arts assessment are not included in the prefilled data in this indicator.

(2) 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.

(3) The term "regular assessment" is an aggregation of the following types of assessments, as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	25,286	27,273	91.45%	95.00%	92.71%	Did not meet target	No Slippage
B	Grade 8	24,477	27,988	85.22%	95.00%	87.46%	Did not meet target	No Slippage

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
C	Grade HS	21,337	24,475	82.07%	95.00%	87.18%	Did not meet target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	25,392	27,265	91.64%	95.00%	93.13%	Did not meet target	No Slippage
B	Grade 8	24,426	27,964	84.84%	95.00%	87.35%	Did not meet target	No Slippage
C	Grade HS	19,658	23,087	77.12%	95.00%	85.15%	Did not meet target	No Slippage

Regulatory Information

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

Public Reporting Information

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

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

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

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

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

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

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

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

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

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

None

3A - OSEP Response

3A - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3B. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* 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	2022	2023	2024	2025
Reading	A >=	Grade 4	28.78%	31.77%	34.76%	37.75%
Reading	B >=	Grade 8	21.53%	24.78%	28.03%	31.28%
Reading	C >=	Grade HS	18.70%	21.47%	24.24%	27.01%
Math	A >=	Grade 4	19.59%	22.74%	25.89%	29.04%
Math	B >=	Grade 8	10.87%	14.52%	18.17%	21.82%
Math	C >=	Grade HS	25.93%	29.00%	32.07%	35.14%

Targets: Description of Stakeholder Input

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

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for School Age Programs (Bureau of Special Education) reside.

FFY 2022 Data Disaggregation from ED*Facts*

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

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	22,817	22,048	19,184
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,610	1,661	2,338
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,788	1,892	2,168

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

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	22,920	21,996	17,500
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,601	650	787
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,906	452	627

(1)The term “regular assessment” is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	4,398	22,817	20.32%	28.78%	19.28%	Did not meet target	Slippage
B	Grade 8	3,553	22,048	17.88%	21.53%	16.11%	Did not meet target	Slippage
C	Grade HS	4,506	19,184	22.48%	18.70%	23.49%	Met target	No Slippage

Provide reasons for slippage for Group A, if applicable

Grade 4 Reading performance for all students slightly declined . Demographically, the proportion of economically disadvantaged students increased from the prior year. Post-pandemic circumstances (e.g., staff shortages, variability in student attendance) continued during the 2022-23 testing cycle. While statewide test participation increased, it remained below the 95% target. Low test participation may negatively impact proficiency calculations in multiple ways. Lower participation rates may create a non-representative sample of the student population thus affecting performance results of subgroups.

Provide reasons for slippage for Group B, if applicable

Grade 8 Reading performance for all students declined. Demographically, the proportion of economically disadvantaged students increased from the prior year. Post-pandemic circumstances (e.g., staff shortages, variability in student attendance) continued during the 2022-23 testing cycle. While statewide test participation increased, it remained below the 95% target. Low test participation may negatively impact proficiency calculations in multiple ways. Lower participation rates may create a non-representative sample of the general student population thus affecting performance results of subgroups.

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	4,507	22,920	17.91%	19.59%	19.66%	Met target	No Slippage
B	Grade 8	1,102	21,996	3.89%	10.87%	5.01%	Did not meet target	No Slippage
C	Grade HS	1,414	17,500	12.08%	25.93%	8.08%	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

Grade 11 Math performance for all students declined by a large measure. Demographically, the proportion of economically disadvantaged students increased from the prior year. Post-pandemic circumstances (e.g., staff shortages, variability in student attendance) continued during the 2022-23 testing cycle. This included the COVID-19 waiver regarding high school course completion and state assessment participation for accountability and graduation purposes. This waiver ended. Therefore, more students participated in the high school assessment for graduation purposes in this testing cycle. This increase in student participation resulted in a more variable group of students. Participants in the FFY 2021 were fewer and less likely to be a representative sample of students. Proficiency rates were likely higher last year as a result.

Regulatory Information

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

Public Reporting Information

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

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

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

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

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

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

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

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

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

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

None

3B - OSEP Response

3B - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3C. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* 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	2022	2023	2024	2025
Reading	A >=	Grade 4	28.94%	28.94%	28.94%	29.94%
Reading	B >=	Grade 8	34.30%	34.30%	34.30%	35.30%
Reading	C >=	Grade HS	38.40%	38.40%	38.40%	39.40%
Math	A >=	Grade 4	52.14%	52.14%	52.14%	53.14%
Math	B >=	Grade 8	10.96%	10.96%	10.96%	11.96%
Math	C >=	Grade HS	36.24%	36.24%	36.24%	37.24%

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for School Age Programs (Bureau of Special Education) reside.

FFY 2022 Data Disaggregation from ED*Facts*

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	2,469	2,429	2,153
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	491	762	849

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/10/2024

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	2,472	2,430	2,158
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	1,167	250	603

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	491	2,469	22.34%	28.94%	19.89%	Did not meet target	Slippage
B	Grade 8	762	2,429	31.62%	34.30%	31.37%	Did not meet target	No Slippage
C	Grade HS	849	2,153	37.01%	38.40%	39.43%	Met target	No Slippage

Provide reasons for slippage for Group A, if applicable

Students with disabilities in grade 4 did not meet the target for the reading alternate assessment in FFY 2022. Continued post-pandemic circumstances (e.g., staff shortages, variability in student attendance) continued during this testing cycle.

An increase in participation rates of students with the most significant cognitive disabilities may also be a contributing factor in the decline in performance data for this alternate assessment. In FFY 2020 and FFY 2021, many of the state's most vulnerable students continued to be educated in fully remote environments and were unable to participate in the assessment. In FFY 2022, there was an increase in participation rates in the alternate assessment as more students returned to in-person instruction; a larger number of the most complex learners were able to participate in the assessment and their performance included this year's reporting.

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	1,167	2,472	44.80%	52.14%	47.21%	Did not meet target	No Slippage
B	Grade 8	250	2,430	11.53%	10.96%	10.29%	Did not meet target	Slippage
C	Grade HS	603	2,158	30.38%	36.24%	27.94%	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

Provide reasons for slippage for Group B, if applicable

Students with disabilities in grade 8 did not meet the target for the mathematics alternate assessment in FFY 2022. Continued post-pandemic circumstances (e.g., staff shortages, variability in student attendance) continued during this testing cycle.

An increase in participation rates of students with the most significant cognitive disabilities may also be a contributing factor in the decline in performance data for this alternate assessment. In FFY 2020 and FFY 2021, many of the state's most vulnerable students continued to be educated in fully remote environments and were unable to participate in the assessment. In FFY 2022, there was an increase in participation rates in the alternate assessment as more students returned to in-person instruction; a larger number of the most complex learners were able to participate in the assessment and their performance included this year's reporting.

Provide reasons for slippage for Group C, if applicable

Students with disabilities in grade 11 did not meet the target for the mathematics alternate assessment in FFY 2022. Continued post-pandemic circumstances (e.g., staff shortages, variability in student attendance) continued during this testing cycle.

An increase in participation rates of students with the most significant cognitive disabilities may also be a contributing factor in the decline in performance data for this alternate assessment. In FFY 2020 and FFY 2021, many of the state's most vulnerable students continued to be educated in fully remote environments and were unable to participate in the assessment. In FFY 2022, there was an increase in participation rates in the alternate assessment as more students returned to in-person instruction; a larger number of the most complex learners were able to participate in the assessment and their performance included this year's reporting.

Regulatory Information

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

Public Reporting Information

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

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

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

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

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

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

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

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

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

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

None

3C - OSEP Response

3C - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3D. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* 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 2022-2023 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2022-2023 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 2022-2023 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2022-2023 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	2022	2023	2024	2025
Reading	A <=	Grade 4	30.85	29.45	28.05	26.65
Reading	B <=	Grade 8	34.21	32.61	31.01	29.41
Reading	C <=	Grade HS	32.65	30.95	29.25	27.55
Math	A <=	Grade 4	20.04	19.04	18.04	17.04
Math	B <=	Grade 8	16.55	15.65	14.75	13.85
Math	C <=	Grade HS	39.05	37.35	35.65	33.95

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for School Age Programs (Bureau of Special Education) reside.

FFY 2022 Data Disaggregation from ED*Facts*

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	117,987	120,819	115,571
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	22,817	22,048	19,184
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	52,439	58,362	67,105
d. All students in regular assessment with accommodations scored at or above proficient against grade level	8,308	4,870	8,011
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,610	1,661	2,338
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,788	1,892	2,168

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	119,133	121,310	85,554
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	22,920	21,996	17,500
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	48,382	29,556	25,409
d. All students in regular assessment with accommodations scored at or above proficient against grade level	6,333	1,629	3,556
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,601	650	787
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,906	452	627

(1)The term “regular assessment” is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	19.28%	51.49%	31.55	30.85	32.21	Did not meet target	No Slippage
B	Grade 8	16.11%	52.34%	37.41	34.21	36.22	Did not meet target	No Slippage
C	Grade HS	23.49%	65.00%	42.08	32.65	41.51	Did not meet target	No Slippage

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	19.66%	45.93%	23.87	20.04	26.26	Did not meet target	Slippage
B	Grade 8	5.01%	25.71%	18.39	16.55	20.70	Did not meet target	Slippage
C	Grade HS	8.08%	33.86%	51.26	39.05	25.78	Met target	No Slippage

Provide reasons for slippage for Group A, if applicable

While statewide test participation increased in FFY 2022, it did not meet the 95% target. In grade 4, the number of students participating increased in both the “All Students" group and IEP subgroup. Both groups increased performance from the prior year. Although performance increased for the IEP subgroup, the observed gains were smaller than those for the remaining students in the All Students group, resulting in slippage.

Provide reasons for slippage for Group B, if applicable

While statewide test participation increased in FFY 2022, it did not meet the 95% target. In grade 8, the number of students participating increased in both the “All Students" group and IEP subgroup. Both groups increased performance from the prior year. Although performance increased for the IEP subgroup, the observed gains were smaller than those for the remaining students in the All Students group, resulting in slippage.

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs 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 2022 SPP/APR, use data from 2021-2022), 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 rates of suspensions and expulsions for 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 section 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 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 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 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon LEAs 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 child-specific and regulatory/systemic 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 QA 23-01, dated July 24, 2023.

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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target <=	1.97%	1.97%	1.00%	1.82%	1.82%
Data	1.79%	2.22%	2.80%	1.04%	

Targets

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

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for School Age Programs (Bureau of Special Education) reside.

FFY 2022 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.

3

Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
29	676		1.66%	4.29%	Did not meet target	N/A

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

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

State's definition of "significant discrepancy" and methodology

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

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

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2022 using 2021-2022 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, 2023, the BSE conducted on-site reviews of all 29 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 QA 23-01, dated July 24, 2023.

The BSE conducted on-site reviews as described above, and determined that two LEAs 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 LEAs were required to develop a Corrective Action Verification Plan (CAVP) that was approved by BSE. The BSE monitored implementation of corrective action through interviews with administrative personnel, analysis of updated suspension data, and student file reviews. During the reviews to verify correction of noncompliance, the BSE looked 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 QA 23-01. 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 2021

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 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4A - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

PA believes that it has a sound methodology in place that is reasonably designed to determine if significant discrepancies are occurring in long-term suspensions and expulsions of children with disabilities. This methodology has served the state well in prior years in identifying individual LEAs with significant discrepancies. In the 2020-21 school year, LEAs were in the first full year of the coronavirus pandemic. To ensure student safety during this time, various educational delivery models were developed to serve all students, including students with disabilities. These included regular in-person instruction, but also included a hybrid model where students attended school in-person part time and attended virtually the remaining time. Some LEAs provided instruction to students using only a virtual delivery model.

Since a large proportion of students were not physically attending in-person instruction full time, suspension and expulsion rates declined. This caused the methodology used to identify LEAs with significant discrepancies to appear to be ineffective. However, despite no LEAs suspending more than eight students the entire school year, it still functioned as expected. The reduction in suspensions and expulsions across the state caused every LEA to be excluded from the analysis for this Indicator since none met the minimum n size of 10. For the 2021-22 school year, LEAs in PA generally returned to in-person instruction and analyses of suspension and expulsion data show that the methodology has again identified LEAs with significant discrepancies in long-term suspensions and expulsions of children with disabilities.

To demonstrate whether PA's methodology was reasonably designed, the BSE took several steps:

- the options of comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the state, or to the rates of suspensions and expulsions for children with IEPs to rates of suspensions and expulsions for nondisabled children within the LEAs were reexamined;
- the minimum cell/n sizes were reexamined to determine whether an unusually large number of LEAs were excluded from the analysis;
- the standard of two times the state baseline rate was reexamined to determine whether too few LEAs were being identified as having a significant discrepancy;
- researched whether statistically sound alternative methodologies being used by similarly situated states would yield different results; and
- examined longitudinal data to determine whether the lack of LEAs identified as having a significant discrepancy was part of a pattern or trend.

Stakeholder input was obtained from the SEAP after it was presented with the results of the analyses regarding each of these steps. As a part of this process, the panel engaged in meaningful discussions among themselves and asked clarifying questions when additional information or background was desired. Finally, panel members were encouraged to suggest changes if there was a belief that the methodology described was insufficient or inadequate.

The panel endorsed the current methodology as reasonably designed to determine whether significant discrepancies were occurring in LEAs in the rate of suspensions and expulsions greater than 10 days in a school year for children with IEPs. The panel also requested that BSE maintain the focus on examining state patterns of suspensions and expulsions and the ability to identify outlier LEAs, and to carry on with the BSE/SEAP mission of continual reduction in the numbers of students with disabilities who are suspended or expelled.

4A - OSEP Response

4A - Required Actions

The State must report, in the FFY 2023 SPP/APR, on the correction of noncompliance that the State identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022 SPP/APR, use data from 2021-2022), 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 the rates of suspensions and expulsions for 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 section 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 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 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 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 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, 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.

Provide detailed information about the timely correction of child-specific and regulatory/systemic 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 QA 23-01, dated July 24, 2023.

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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	9.09%	9.09%	7.14%	7.14%	

Targets

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

FFY 2022 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.

3

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
20	0	676		0%	0.00%	Met target	N/A

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

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

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 2021-22, 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 2022 using 2021-2022 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, 2023, the BSE conducted on-site reviews of all 20 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 QA 23-01, dated July 24, 2023.

The BSE conducted onsite reviews as described above, and determined that six LEAs 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 LEAs were required to develop a Corrective Action Verification Plan (CAVP) that was approved by BSE. The BSE monitored implementation of corrective action through interviews with administrative personnel, analysis of updated suspension data, and student file reviews. During the review to verify correction of noncompliance, the BSE looked 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 QA 23-01. 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 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4B - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

PA believes that it has a sound methodology in place that is reasonably designed to determine if significant discrepancies are occurring in long-term suspensions and expulsions of children with disabilities. This methodology has served the state well in prior years in identifying individual LEAs with significant discrepancies. In the 2020-21 school year, LEAs were in the first full year of the coronavirus pandemic. To ensure student safety during this time, various educational delivery models were developed to serve all students, including students with disabilities. These included regular in-person instruction, but also included a hybrid model where students attended school in-person part time and attended virtually the remaining time. Some LEAs

provided instruction to students using only a virtual delivery model.

Since a large proportion of students were not physically attending in-person instruction full time, suspension and expulsion rates declined. This caused the methodology used to identify LEAs with significant discrepancies to appear to be ineffective. However, despite no LEAs suspending more than eight students the entire school year, it still functioned as expected. The reduction in suspensions and expulsions across the state caused every LEA to be excluded from the analysis for this Indicator since none met the minimum n size of 10 for any race. For the 2021-22 school year, LEAs in PA generally returned to in-person instruction and analyses of suspension and expulsion data show that the methodology has again identified LEAs with significant discrepancies, by race and ethnicity, in long-term suspensions and expulsions of children with disabilities.

To demonstrate whether PA's methodology was reasonably designed, the BSE took several steps:

- the options of comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the state, or to the rates of suspensions and expulsions for children with IEPs to rates of suspensions and expulsions for nondisabled children within the LEAs were reexamined;

- the minimum cell/n sizes were reexamined to determine whether an unusually large number of LEAs were excluded from the analysis (e.g., the LEA had a total enrollment of students with disabilities of at least 40; the LEA had suspended or expelled at least 10 eligible students for greater than 10 days in the school year; and the LEA had at least 10 students of one race suspended or expelled;

- the standard of 1.5 times the state rate for the reporting year was reexamined to determine whether too few LEAs were being identified as having a significant discrepancy;

- researched whether statistically sound alternative methodologies being used by similarly situated states would yield different results; and

- examined longitudinal data to determine whether the lack of LEAs identified as having a significant discrepancy by race and ethnicity was part of a pattern or trend.

Stakeholder input was obtained from the SEAP after it was presented with the results of the analyses regarding each of these steps. As a part of this process, the panel engaged in meaningful discussions among themselves and asked clarifying questions when additional information or background was desired. Finally, panel members were encouraged to suggest changes if there was a belief that the methodology described was insufficient or inadequate. To expand upon members' understanding of the maturation of this Indicator, the origin of and the requirement to use a single bar or standard for all races was explained. Finally, panel members were encouraged to suggest changes if there was a belief that the methodology described was insufficient or inadequate.

The panel endorsed the current methodology as reasonably designed to determine whether significant discrepancies, by race and ethnicity, were occurring in LEAs in the rate of suspensions and expulsions greater than 10 days in a school year for children with IEPs. The panel also requested that BSE maintain the focus on examining state patterns of suspensions and expulsions and the ability to identify outlier LEAs, and to carry on with the BSE/SEAP mission of continual reduction in the numbers of students with disabilities who are suspended or expelled.

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 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the districts identified with noncompliance in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 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 2022.

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 ED*Facts* 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	2017	2018	2019	2020	2021
A	2019	Target >=	64.10%	64.10%		61.48%	61.48%
A	61.48%	Data	61.97%	61.52%	61.48%	62.08%	61.81%
B	2019	Target <=	8.10%	8.10%		9.62%	9.62%
B	9.62%	Data	9.27%	9.39%	9.62%	9.80%	9.89%
C	2019	Target <=	4.60%	4.60%		4.81%	4.81%
C	4.81%	Data	4.86%	4.77%	4.81%	4.70%	4.43%

Targets

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

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for School Age Programs (Bureau of Special Education) reside.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	Total number of children with IEPs aged 5 (kindergarten) through 21	325,955

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	200,760
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	32,579
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	13,130
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	746
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	368

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 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	200,760	325,955	61.81%	62.36%	61.59%	Did not meet target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	32,579	325,955	9.89%	9.62%	9.99%	Did not meet target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements *[c1+c2+c3]*	14,244	325,955	4.43%	4.81%	4.37%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and

B. Separate special education class, separate school or residential facility.

C. Receiving special education and related services in the home.

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

Data Source

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

Measurement

A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

Instructions

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

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

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

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

For Indicator 6C: States may express their targets in a range (*e.g.*, 75-85%).

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data (Inclusive) – 6A, 6B, 6C

Part	FFY	2017	2018	2019	2020	2021
A	Target >=	64.50%	64.80%		46.91%	47.00%
A	Data	66.05%	66.66%	58.69%	46.91%	53.93%
B	Target <=	15.00%	14.70%		17.70%	17.50%
B	Data	14.56%	14.47%	17.53%	17.70%	18.43%
C	Target <=				17.08%	17.00%
C	Data				17.08%	12.24%

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for Preschool Programs (Bureau of Early Intervention and Family Supports) reside.

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

Inclusive Targets – 6C

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

Prepopulated Data

Data Source:

SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

08/30/2023

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	11,466	14,821	5,675	31,962
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	5,254	9,375	3,749	18,378
b1. Number of children attending separate special education class	2,018	2,275	781	5,074
b2. Number of children attending separate school	63	115	103	281
b3. Number of children attending residential facility	0	3	1	4
c1. Number of children receiving special education and related services in the home	1,765	1,136	366	3,267

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 2022 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2021 Data	FFY 2022 Target	FFY 2022 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	18,378	31,962	53.93%	47.00%	57.50%	Met target	No Slippage
B. Separate special education class, separate school or residential facility	5,359	31,962	18.43%	17.50%	16.77%	Met target	No Slippage
C. Home	3,267	31,962	12.24%	17.00%	10.22%	Met target	No Slippage

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 3 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	2017	2018	2019	2020	2021
A1	2020	Target >=	89.84%	90.84%	90.84%	84.04%	84.04%
A1	84.04%	Data	83.72%	84.06%	86.09%	84.04%	84.13%

A2	2020	Target >=	68.02%	69.02%	69.02%	65.21%	65.21%
A2	65.21%	Data	66.09%	66.99%	67.93%	65.21%	65.74%
B1	2020	Target >=	91.69%	92.69%	92.69%	85.65%	85.65%
B1	85.65%	Data	86.78%	87.31%	87.61%	85.65%	86.46%
B2	2020	Target >=	66.54%	67.54%	67.54%	62.41%	62.41%
B2	62.41%	Data	62.62%	64.47%	64.19%	62.41%	63.19%
C1	2020	Target >=	89.48%	90.48%	90.48%	83.46%	83.46%
C1	83.46%	Data	84.46%	84.23%	85.63%	83.46%	83.26%
C2	2020	Target >=	70.37%	71.37%	71.37%	66.59%	66.59%
C2	66.59%	Data	67.40%	68.34%	69.33%	66.59%	66.82%

Targets

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

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for Preschool Programs (Bureau of Early Intervention and Family Supports) reside.

FFY 2022 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

14,631

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	68	0.46%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,716	11.73%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,387	23.15%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	4,640	31.71%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	4,820	32.94%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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	8,027	9,811	84.13%	84.04%	81.82%	Did not meet target	Slippage

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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)*	9,460	14,631	65.74%	65.21%	64.66%	Did not meet target	Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	66	0.45%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,773	12.12%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,683	25.17%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	6,014	41.10%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	3,095	21.15%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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)*	9,697	11,536	86.46%	85.65%	84.06%	Did not meet target	Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	9,109	14,631	63.19%	62.41%	62.26%	Did not meet target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	84	0.57%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,732	11.84%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,222	22.02%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	4,730	32.33%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	4,863	33.24%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)*	7,952	9,768	83.26%	83.46%	81.41%	Did not meet target	Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	9,593	14,631	66.82%	66.59%	65.57%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
A1	In FFY 2022, Pennsylvania did not meet the target for outcome A1 Positive Social-Emotional Skills for children who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. The FFY 2022 data showed that child outcome data was collected from 79.53% of the children in the PSEI program who exited in the fiscal year. The A1 scores ranged from 68.64% to 90.91% in PSEI programs, with an average score of 82.89%. No pattern of low performing programs was noted for geographic area or size of the program. No data anomalies were noted in the A-E Progress Categories. Analysis suggests that the COVID pandemic continued to have an impact on child outcomes as measured through this indicator.
A2	In FFY 2022, Pennsylvania did not meet the target for outcome A2 Positive Social-Emotional Skills for children who were functioning within age expectations by the time they turned 6 years of age or exited the program. The FFY 2022 data showed that child outcome data was collected from 79.53% of the children in the PSEI program who exited in the fiscal year. The A2 scores ranged from 34.81% to 82.32% in PSEI programs. No pattern of low performing programs was noted for geographic area or program size. No data anomalies were noted in the A-E Progress Categories. Analysis suggests that the COVID pandemic continued to have an impact on child outcomes as measured through this indicator.
B1	In FFY 2022, Pennsylvania did not meet the target for outcome B1 Acquisition and Use of Knowledge and Skills for children who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. The FFY 2022 data showed that child outcome data was collected from 79.53% of the children in the PSEI program who exited in the fiscal year. The B1 scores ranged from 59.25% to 91.62% in PSEI programs. No pattern of low performing programs was noted for geographic area or program size. No data anomalies were noted in the A-E Progress Categories. Analysis suggests that the COVID pandemic continued to have an impact on child outcomes as measured through this indicator.
C1	In FFY 2022, Pennsylvania did not meet the target for outcome C1 Use of Behaviors to Meet Needs, for children who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. The FFY 2022 data showed that child outcome data was collected from 79.53% of the children in the PSEI program who exited in the fiscal year. The C1 scores ranged from 70.90% to 90.48% in PSEI programs. No pattern of low performing programs was noted for geographic area or program size. No data anomalies were noted in the A-E Progress Categories. Analysis suggests that the COVID pandemic continued to have an impact on child outcomes as measured through this indicator.
C2	In FFY 2022, Pennsylvania did not meet the target for outcome C2 Use of Behaviors to Meet Needs, for children who were functioning within age expectations by the time they turned 6 years of age or exited the program. The FFY 2022 data showed that child outcome data was collected from 79.53% of the children in the PSEI program who exited in the fiscal year. The C2 scores ranged from 39.03% to 83.61% in PSEI programs. No pattern of low performing programs was noted for geographic area. However, many of the lowest performing PSEI programs served over a 1,000 children in FY 2022, suggesting that larger programs had more difficulty with C2. No data anomalies were noted in the A-E Progress Categories. Analysis suggests that the COVID pandemic continued to have an impact on child outcomes as measured through this indicator.

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 (COS) process? (yes/no)

YES

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

Pennsylvania's PSEI and Part C EI program used the same instruments, policies, and procedures for gathering child outcome data for indicator B7 and for the Part C indicator C3.

For both entry and exit data collection, one member of the IEP team collected and entered the child outcome data. This designated member was also charged with engaging the family in the child outcome data collection process and in reviewing all data collection and ratings with the family. All local EI programs selected an authentic assessment tool from an approved list to gather child development information. The list of approved tools can be found at:

https://www.pakeys.org/updated-ocdel-approved-listings-of-curricula-and-developmental-assessment-tools-in-keystone-stars/ .

All child outcome ratings were entered into the PELICAN-EI data system. PELICAN-EI converted the 1 – 7 COS ratings into progress categories and summary statements. It has built-in data checks to ensure quality data entry. PELICAN-EI allowed for reporting at both the state and local EI program levels. The PELICAN-EI data system provided an alert to the user when inaccurate or incomplete data has been entered.

For entry data collection, the designated member of the IEP team has 60 days from the child's initial IEP date to complete the child outcome process and enter the COS rating into PELICAN-EI. The child outcome process included: 1) completing the approved authentic assessment tool, 2) using the data from the authentic assessment tool and the publisher's Instrument Crosswalk to identify the child's skills in each of the three child outcomes 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.

Exit data is collected in the same manner as Entry data. Exit data also included a yes/no response to a question on whether the child had made progress since their entry to the EI program. The designated member of the IEP team had 60 days from the child's anticipated exit from the EI 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 EI service prior to their exit, with the starting point of service being the IEP date. For children who stay in Pennsylvania's EI 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.

To ensure high quality child outcome data, Pennsylvania's EI system has incorporated quality checks for child outcome data in the annual determination process. PSEI programs are rated on 1) the percentage of children who have received at least 6 months of EI Services prior to exiting and have both entry and exit ECO data and 2) the PSEI program's ranking on summary statements 1 and 2 for each of the child outcome indicators. For the FFY 2022 determination, an additional data quality measure related to child outcomes was added to the determination process. PSEI programs are now measured on the number of invalid child outcome entries. Invalid entries occur when the combination of the entry rating, exit rating, and the progress question is an impossible combination.

State training and guidance documents provide instructions on how to collect accurate and complete ratings. Policies and procedures for child outcome data collection and reporting can be found at:

https://www.education.pa.gov/Documents/Early%20Learning/Early%20Intervention/Laws%20Regulations%20and%20Announcements/Announcements/2012/EI%2012-07%20Child%20Outcome.pdf .

Child outcome training materials can be found at:

http://www.eita-pa.org/early-childhood-outcomes/ .

Two online ECO courses, ECO 101 and ECO 201, are available for continuing education credits applicable to PSEI educators. A child outcome Decision Tree job aide is available on the EITA Mobile App. The Decision Tree job aide provides PSEI educators and therapists with an interactive, mobile version of the ECO Decision Tree that can be used while making ECO determinations in the field. ECO resources include online Frequently Asked Questions about ECO data, Family Tip Sheets, an ECO Process Infographic, an ECO Conversation Starters, and forms that may be used for data collection. Links to additional national resources can be found on the website.

Provide additional information about this indicator (optional)

Pennsylvania's child outcome data is collected in the PELICAN-EI data system. This allows for a consistent method for data collection and reporting across all PSEI programs. The child outcome data screens have several data quality rules built into the system. For example, when entering child outcome data, all the fields are mandatory so ratings cannot be skipped for one of the child outcomes. If ratings are not entered for all outcomes, the data can not be saved.

PELICAN-EI also provides an alert to the user when an invalid or impossible combination of entry data, exit data, and progress data has been entered. The alert is "Based on the Entry ECO Rating, the Exit ECO Rating, and the corresponding Progress Determination the OSEP Category is Invalid. Do you wish to continue?" If the user clicks YES, the information is saved but the OSEP category appears as "Invalid". Allowing invalid OSEP categories to be entered occasionally allows an exiting child to have less than 3 valid OSEP categories for the child outcome data.

Monthly child outcome reports showed PSEI programs any invalid child outcome data. In FFY 2022, BEISFS worked closely with leaders of PSEI programs to ensure that all invalid data was corrected. Multiple communications and contacts from BEISFS Advisors were sent to PSEI programs requesting that they correct invalid ratings.

BEISFS has worked diligently to ensure the highest quality EI data through professional development designed for EIPS staff. Two online courses, ECO 101 and ECO 201 are available to all PSEI staff. Two hundred, fifty-six (256) staff who work in a PSEI program took the ECO 101 course in FFY 2022 and 78 staff took the ECO 201 course in FFY 2022. In addition, 47 local PSEI programs engaged in technical assistance activities to enhance their child outcome data collection. Technical assistance activities included: virtual workshops on gathering reliable ECO data, supporting the PSEI program's data team to review and analyze ECO data, and sharing resources related to ECO data collection.

7 - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

In FFY 2022, there were no differences between the number of child outcome ratings across the three child outcomes.

7 - OSEP Response

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 3 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 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 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 must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

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

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

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where these descriptions reside.

Historical Data

Group	Baseline	FFY	2017	2018	2019	2020	2021
Preschool	2008	Target >=	87.50%	88.00%	85.27%	89.00%	90.00%
Preschool	84.10%	Data	86.88%	85.29%	92.20%	89.70%	87.43%
School age	2008	Target >=	41.34%	41.34%	41.34%	46.37%	40.66%
School age	34.50%	Data	41.30%	40.97%	45.59%	44.04%	45.24%

Targets

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

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Preschool	7,147	8,163	87.43%	91.00%	87.55%	Did not meet target	No Slippage
School age	285	700	45.24%	47.91%	40.71%	Did not meet target	Slippage

Provide reasons for School Age slippage, if applicable

A review of the 2022-23 school year found no singular antecedent event that may have impacted the results of the parent survey. However, the decline in performance may be related to the appreciable shortages of qualified professionals, including school social workers, counselors and administrators who had historically supported family engagement with the LEAs. These staff shortages result in constantly changing assignments of priority levels to tasks or individuals to determine the most effective use of staff resources and may also have impacted this Indicator.

The number of parents to whom the surveys were distributed.

49,376

Percentage of respondent parents

17.95%

Response Rate

FFY	2021	2022
Response Rate	15.08%	17.95%

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 population of children receiving special education services, that category would be considered representative.

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 population of preschool children receiving special education services, that category would be considered representative.

Include the State's analyses of 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.

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 16,887 parents of students with disabilities from 137 LEAs. Included in this distribution was an over-sampling of parents of Black or African American (not Hispanic) and Hispanic students to compensate for historically lower response rates from parents within these groups.

The state has determined that if the percentage of the respondent group in a category was within the range between 5% above and below the percentage of the population of children receiving special education services, the category would be considered representative. As shown in Tables 8.1 and 8.2 below, for parents of school age students receiving special education services, 16 of the 19 comparisons are within the state-established range. Only parents of white (not Hispanic) students receiving services are over-represented in this group. Parents of Black or African American (not Hispanic) students receiving services and parents of students with specific learning disabilities receiving services are under-represented.

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

Race/Ethnicity	Total Respondent Group Percent	Children Receiving Special Education Services Percent
American Indian/Alaska Native	<1.0%	<1.0%
Asian	1.3%	1.9%
Black or African American	11.7%	17.0%
Hispanic	17.0%	15.1%
Multiracial	2.9%	5.8%
Native Hawaiian/Other Pacific Islander	<1.0%	<1.0%
White	67.0%	59.9%

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

Disability Category	Total Respondent Group Percent	Children Receiving Special Education Services Percent
Autism	17.9%	13.2%
Deaf-Blindness	<1.0%	<1.0%
Emotional Disturbance	7.4%	7.9%
Hearing Impairment Including Deafness	1.7%	<1.0%
Intellectual Disability (Mental Retardation)	8.1%	6.2%
Multiple Disabilities	1.4%	<1.0%
Orthopedic Impairment	<1.0%	<1.0%
Other Health Impairment	17.0%	18.2%
Specific Learning Disability	31.7%	38.3%
Speech or Language Impairment	13.7%	13.9%
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. 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 preschool of children receiving special education services, that category would be considered representative.

None of the race/ethnicity comparisons of the respondent group to the population of preschool of children receiving special education services was outside the state-established range.

In the FFY 2022 EI Family Survey, respondents of children receiving special education services in the PSEI program were asked to identify their child's disability category from a list that included 13 disability categories, including developmental delay. Families were also provided with an option to choose "I'm not sure". Out of the 14 options available, 2 disability categories were over-represented when compared to the population of children receiving special education services, and 1 disability category was under-represented in the responses. Families of children with Autism were over-represented by 8.35% and families of children with Speech and Language Impairment were over-represented by 9.53%. Families of children with Developmental Delay were under-represented by 30.33%. A total of 8.52% of respondents chose to not identify their child in a specific disability category and chose "I'm not sure".

It is hypothesized that the over and under-representation in these disability categories were due to: 1) PSEI programs who may not have updated the disability category for children who had recent changes in diagnosis; and 2) the change in data collection procedures from identifying disability category data by matching data within PELICAN-EI to asking parents to choose a disability category.

Table 8.3
Race/Ethnicity of Preschool Children Represented by Parent Respondents

Race/Ethnicity	Total Respondent Group Percent	Children Receiving Special Education Services Percent
American Indian/Alaska Native	<1.0%	<1.0%
Asian	3.84%	3.40%
Black or African American	11.41%	16.15%
Hispanic	18.48%	15.54%
Multiracial	8.50%	8.80%
Native Hawaiian/Other Pacific Islander	<1.0%	<1.0%
White	57.48%	55.82%

Table 8.4
Disability Category of Preschool Children Represented by Parent Respondents

Disability Category	Total Respondent Group Percent	Children Receiving Special Education Services Percent
Autism	24.47%	16.12%
Deaf-Blindness	<1.0%	<1.0%
Developmental Delay	13.97%	44.30%
Emotional Disturbance	<1.0%	<1.0%
Hearing Impairment Including Deafness	<1.0%	1.05%
Intellectual Disability (Mental Retardation)	<1.0%	<1.0%
Multiple Disabilities	<1.0%	5.81%
Orthopedic Impairment	<1.0%	<1.0%
Other Health Impairment	1.10%	2.08%
Specific Learning Disability	<1.0%	<1.0%
Speech or Language Impairment	44.09%	34.56%
Traumatic Brain Injury	<1.0%	<1.0%
Visual Impairment including Blindness	<1.0%	<1.0%
Unknown/I'm not sure	8.52%	<1.0%

The demographics of the children for whom parents are 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)

The BSE continues to investigate methods of data collection from parents that would improve representativeness of students with disabilities. Stakeholders are conducting meetings to assist the BSE in developing a variety of options to improve representativeness, including a reduction in the number of questions asked of parents and changes to delivery and response methods. As BSE is currently engaged in this planning process with stakeholders, final decisions on changes have not been made. Improvements that can be accomplished for FFY 2023 will be implemented, while those that require more extensive planning will be developed and piloted before they are adopted for the survey as a whole. Stakeholders have encouraged the BSE to ensure that any revised survey process is accessible both to parents who themselves may have a disability or may lack technology to access an online version of the survey.

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

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

To ensure the accuracies of the disability categories identified in the PELICAN-EI data system, BEISFS will send communications in FFY 2023 to PSEI programs prompting them to review and update disability categories for children who will be receiving the survey as needed.

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)

To increase the response rate for the survey, PA enlisted its Special Education Advisory Panel to provide input on changes they believed would have a positive impact. Multiple options were discussed, and adding QR codes to the letters mailed to parents was recommended and implemented. However, for FFY 2022 this did not result in the expected increase in online completion of the survey and had no effect in increasing the response rate or representativeness of respondents.

Stakeholders are conducting meetings to assist the BSE in developing a variety of options to improve representativeness, including a reduction in the number of questions asked of parents and changes to delivery and response methods. As BSE is currently engaged in this planning process with stakeholders, final decisions on changes have not been made. Improvements that can be accomplished for FFY 2023 will be implemented, while those that require more extensive planning will be developed and piloted before they are adopted for the survey as a whole. Stakeholders have encouraged the BSE to ensure that any revised survey process is accessible both to parents who themselves may have a disability or may lack technology to access an online version of the survey.

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

To ensure the accuracies of the disability categories identified in the PELICAN-EI data system, BEISFS will send communications in FFY 2023 to PSEI programs prompting them to review and update disability categories for children who will be receiving the survey as needed.

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)

Analysis of nonresponse bias was conducted using the application developed by the IDEA Data Center for this purpose. BSE examined both disability category and race/ethnicity as part of these analyses.

The analysis by disability category found a range of responses that met the standard for Indicator 8 varied, ranging from 32.7% to 54.4%. Responses of the underrepresented group, parents of students with specific learning disabilities, met the standard with a rate of 37.8%. The differences among disability category were not found to be statistically significant. Therefore, although parents of students with specific learning disabilities were underrepresented in the respondent group, there was no evidence of nonresponse bias with respect to disability category.

With regard to nonresponse bias by race/ethnicity, the percent of responses varied from 31.7% for parents of Black or African American students to 60.0% for parents of multiracial students. These differences were also not statistically significant, for either the category that was overrepresented (parents of white students) or the category that was underrepresented (parents of Black or African American students). Therefore, there was no nonresponse bias with respect to race/ethnicity. Nonetheless, continuing to increase both the overall response rate, as well as the proportional responses of those parents of underrepresented children will be important to reducing the potential impact of nonresponse bias in the future.

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

To assess for nonresponse bias, BEISFS analyzed the differences between the percentage of agreement on the family survey from families who completed the survey in the first four weeks of the data collection period (February 1 – 28) compared to families who completed the survey during the last four weeks of the data collection period (June 4 – 30).

Results showed:

- as a combined group, families showed increased but small rates of agreements in the final data collection period (+1.31%);
- families who were Black or African American, White, or Asian showed increased but small rates of agreement in the final data collection period (Range: +2.70% - + 3.88%); and
- families who were Hispanic showed small decreased rates of agreement in the final data collection period (-1.53%).

As recommended by the IDEA Data Center, in Parent Involvement Data: How to Measure and Improve Representativeness for Part B Indicator 8 (July 2021), responses collected at the end of a data collection period can be a “proxy for nonresponders”. Pennsylvania’s data showed a small but positive increase in the percent of agreement from respondents answering at the end of the data collection period. It is BEISFS’s conclusion that there was little to no nonresponse bias in the family survey.

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)

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

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

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

Response to actions required in FFY 2021 SPP/APR

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

Information on the representativeness of survey respondents and actions to address this issue can be found in the following sections 1) Describing the strategies that the State will use to ensure that in the future the response data are representative of those demographics, 2) Describing strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented, and 3) Describing 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.

8 - OSEP Response

8 - Required Actions

In the FFY 2023 SPP/APR, the State must report whether the FFY 2023 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 response data 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. 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 2022 reporting period (i.e., after June 30, 2023).

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. Provide the actual numbers used in the calculation.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

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

FFY 2022 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.

52

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
0	0	627	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

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

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

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

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

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

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

Not applicable

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

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 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the section 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), (e.g., using monitoring data; reviewing policies, practices and procedures). 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 2022 reporting period (i.e., after June 30, 2023).

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. Provide the actual numbers used in the calculation.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

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

FFY 2022 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.

52

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1	0	627	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

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

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

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

Pennsylvania analyzed data for children in each LEA in the following six disability categories: intellectual disability, specific learning disability, emotional disturbance, speech or language impairment, other health impairment, and autism, and for all racial and ethnic groups in the LEA that met the minimum cell size. The decision to require two consecutive years of data is based on fluctuation in enrollment in 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 2021

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 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Data Source

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

Measurement

a. # of children for whom parental consent to evaluate was received.
b. # of children whose evaluations were completed within 60 days (or State-established timeline).
Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

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

Instructions

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

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

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

Targets must be 100%.

Provide detailed information about the timely correction of child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	96.67%	95.05%	94.33%	94.97%	95.56%

Targets

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

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
38,700	36,021	95.56%	100%	93.08%	Did not meet target	Slippage

Provide reasons for slippage

School Age Programs (Bureau of Special Education)

Slippage did not occur in the school age program.

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

In FFY 2022, Pennsylvania did not meet the target for the number of children who received their initial evaluation within 60 days. No pattern of low performing programs was noted for geographic area, race/ethnicity, disability category or program size. Analysis suggests that staffing shortages are impacting the delivery of timely evaluation services in some PSEI programs.

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

2,679

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 2022 database for Indicator 11 confirms that all 906 school age students who did not receive a timely initial evaluation did receive an evaluation, although late. Of the total number of students evaluated, 5.7% were completed within 61-90 days, and 1.7% were completed within 120 days. Reasons for delays were primarily attributed to staff shortages, errors in timeline calculations, and administrative delays.

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

The FFY 2022 data showed that 1,773 evaluations were not completed within 60 days. Analysis of the data showed that of those evaluations that were late, 60% were completed by 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.

A total of 22 PSEI programs had at least one late evaluation. One PSEI program accounted for 61.31% of the late evaluations. An additional PSEI program accounted for 16.69% of the late evaluations.

BEISFS Advisors implemented targeted technical assistance activities with all 22 PSEI programs. The activities included notification in writing to the program administrator of the findings of noncompliance; analysis of data to identify specific areas of concern; development of an action plan (QEP) with data-based targets for correction of compliance; revision to procedures for in-time monitoring of late evaluations; and verification of the implementation of new procedures and the timely correction of noncompliance.

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, 2022 through June 30, 2023.

Preschool Early Intervention Programs (Bureau of Early Intervention Services 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, 2022 through June 30, 2023.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
43	38	4	1

FFY 2021 Findings of Noncompliance Verified as Corrected

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

School Age Programs (Bureau of Special Education)

The process for collecting data is explained above. In July-August, BSE reviewed a database in which LEAs reported data from the entire year for all students for whom initial evaluations for special education had been conducted. The database includes mandatory reporting fields to document that, for any student where the LEA did not meet required timelines, an initial evaluation was conducted, although late, and an IEP was developed when the student was determined to be eligible for special education. Following this BSE review of the database, all LEAs were provided with written notification of their compliance status. LEAs determined to be in noncompliance were informed that they must correct the noncompliance as soon as possible, but not later than one year from the notification. These LEAs were required to perform quarterly reporting, through which the LEA provided updated data on all new initial evaluations. When these LEAs demonstrated 100% compliance with evaluation timelines for two consecutive reporting periods, BSE closed corrective action. For those LEAs that did not achieve 100% compliance, BSE conducted onsite reviews to assist in the identification of root causes, including required technical assistance. BSE also informed the LEA of pending enforcement actions should the LEA not correct the noncompliance within the one-year timeline (from the date of the original notification). BSE conducted follow-up reviews of all LEAs identified with ongoing noncompliance through quarterly reporting and conducted onsite reviews of individual student files as well as policies, procedures, and practices. The result of this process allowed BSE to determine that findings of noncompliance were verified as corrected within one year for 38 findings for FFY 2021. BSE reviewed all evaluations that were completed beyond the 60-day requirement and verified evidence of compensatory education, when appropriate.

BSE conducted follow-up of all LEAs identified with ongoing noncompliance through monthly reporting and regular on-site reviews of student files, including policies, procedures, and practice. Five 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 advisors continued to examine individual student files, practices, and procedures to verify correct implementation of 34 CFR §300.301(c)(1). In addition, the BSE facilitate recruitment of new school psychologists to help increase staffing, which has been cited as the ongoing reason for the delay in completing initial evaluations within the 60-day requirement. These LEAs stated that due to this and the shortage of eligible candidates for hire, they found it difficult to achieve compliance. Of these five, four LEAs subsequently did achieve closure within 381, 442, 451, and 545 additional days, respectively.

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

With the exception of the three aforementioned LEAs that have not completed corrective action, the BSE has verified that all LEAs identified with noncompliance in FFY 2021 are correctly implementing the regulatory requirements related to the provision of timely evaluations, consistent with OSEP QA 23-01, dated July 24, 2023.

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

To verify that local Preschool Early Intervention programs with identified instances of systemic noncompliance are correctly implementing the regulatory requirements for the provision of timely initial evaluations, BEISFS Advisors reviewed a sample of child records from that EI program. The records were reviewed either through the PELICAN-EI data system or onsite child record review. BEISFS Advisors reviewed 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 PSEI program is now correctly implementing the regulatory requirement for timely evaluations.

In addition to a review of child records, PSEI programs submitted a Quality Enhancement Plan (QEP), to address correction of all areas of systemic noncompliance. Implementation of the QEP was validated within one year of issuance of the findings report. BEISFS Advisors reviewed documentation of completion of all QEP activities as part of the validation of correction of systemic noncompliance. Documentation included reviewing updated local policies and procedures, reviewing documentation of staff training on new procedures, and observing service delivery, as appropriate.

BEISFS verified that all PSEI programs with identified systemic noncompliance in FFY 2021 are correctly implementing regulatory requirements related to the provision of timely evaluations, consistent with State General Supervision Responsibilities Under Parts B and C of IDEA (OSEP QA 23-01).

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

School Age Programs (Bureau of Special Education)

BSE has verified, through a review of the database and on-site reviews of student files, that all but two LEAs with noncompliance reported in its FFY 2021 APR has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-1, dated July 24, 2023.

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

For each individual case of noncompliance, BEISFS Advisors reviewed the record of every identified child, either through the PELICAN-EI data system or onsite record review. The BEISFS Advisors verified that the child received an evaluation, although late.

BEISFS verified that all PSEI programs with individual cases of noncompliance identified in FFY 2021 provided evaluations for every identified child, unless the child was no longer within the jurisdiction of the PSEI program, consistent with State General Supervision Responsibilities Under Parts B and C of IDEA (OSEP QA 23-01).

FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

School Age Programs (Bureau of Special Education)

The BSE reviewed the LEAs' policies, procedures, and practices to ensure they comply with timely initial evaluations. Because the three LEAs cited difficulties related staff shortages, 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 in managing caseloads within requirements.

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 evaluations. The BSE reviewed all evaluations that went beyond the 60-day required timeline, mandated compensatory education documentation, and monitored student files monthly. The BSE interviewed administrative personnel responsible for the special education evaluation process and compliance to conduct root cause analyses and revise action plans.

The BSE formalized the department’s expectations related to federal requirements by outlining the details of each LEA’s status of ongoing noncompliance which initiated the BSE’s monthly reviews.

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	3	1	2
FFY 2019	1	0	1

FFY 2020

Findings of Noncompliance Verified as Corrected

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

School Age Programs (Bureau of Special Education)

At the end of June, BSE reviewed a database in which LEAs reported data from the entire year for all students for whom initial evaluations for special education had been conducted. The database includes mandatory reporting fields to document that, for any student where the LEA did not meet required timelines, an initial evaluation was conducted, although late, and an IEP was developed when the student was determined to be eligible for special education. Following this BSE review of the database, the two LEAs from FFY 2020 were provided with written notification of their compliance status and were informed that they must correct the noncompliance as soon as possible. These LEAs were required to perform monthly reporting, through which the LEAs provided updated data on all new initial evaluations. One LEA demonstrated 100% compliance with evaluation timelines for two consecutive reporting periods, and BSE closed corrective action.

For the two LEAs that did not achieve 100% compliance, BSE conducted onsite reviews to assist in the identification of root causes, including required technical assistance. BSE also informed the LEA of pending enforcement actions should the LEA not correct the noncompliance. BSE conducted follow-up of both LEAs identified with ongoing noncompliance through quarterly reporting and conducted onsite reviews of individual student files as well as policies, procedures, and practices. BSE reviewed all evaluations that were completed beyond the 60-day requirement and verified evidence of compensatory education, when appropriate.

The BSE provided further oversight for these two LEAs by requiring bi-weekly data to assess progress and scheduled monthly meetings to enforce timeline requirements to help the LEAs achieve closure of corrective action. This allowed BSE to close corrective action and verify correction of noncompliance, consistent with OSEP QA 23-01 for one of the two LEAs.

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

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

BSE has verified that each LEA with noncompliance reported in its FFY 2020 APR has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. This was verified through review of the database and/or reviews of student files.

FFY 2020

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

School Age Programs (Bureau of Special Education)

The BSE reviewed the LEAs' policies, procedures, and practices to ensure they comply with timely initial evaluations. Because the three LEAs cited difficulties related to the COVID-19 pandemic's quarantine and closure protocol that forced remote and/or hybrid learning that occurred throughout the 2021-22 school year, the BSE provided additional oversight by increasing onsite visits and providing technical assistance. In addition, the BSE helped develop schedules to assist the school psychologists recover from lost days to bring all the initial evaluations into compliance. The BSE is requiring biweekly data from the LEAs to assess progress and is meeting monthly with the LEAs to enforce timeline requirements and achieve closure of corrective action.

To address this 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 to determine that LEAs offered the required compensatory services. The BSE interviewed administrative personnel responsible for the special education evaluation process and compliance to conduct root cause analyses and revise action plans.

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

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

FFY 2019

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The BSE reviewed the LEA's policies, procedures, and practices to ensure they comply with the requirements of timely initial evaluations. Since this charter school remained noncompliant, the BSE increased supports to ensure students are receiving FAPE. The increased supports consisted of tracking and mandating compensatory education for students denied FAPE, onsite visits, training resources and redirections of IDEA funds as an enforcement measure to achieve compliance. The charter school's authorizer has taken action to revoke the it's charter, which the charter school has twice appealed.

11 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

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

11 - OSEP Response

The State did not demonstrate that each LEA corrected the findings of noncompliance identified in FFY 2021 and FFY 2020 because it did not report that it verified correction of those findings, consistent with OSEP QA 23-01. Specifically, the State did not report that that it verified that each LEA with noncompliance identified in FFY 2021 and FFY 2020: (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.

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the remaining 43 uncorrected findings of noncompliance identified in FFY 2021, three findings in FFY 2020 and one finding in FFY 2019 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2022 and each LEA with remaining noncompliance identified in FFY 2021, FFY 2020 and FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	97.65%	90.15%	93.45%	98.37%	98.32%

Targets

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

FFY 2022 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	10,084
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	675

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	8,119
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.	919
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 2021 Data	FFY 2022 Target	FFY 2022 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.	8,119	8,481	98.32%	100%	95.73%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

In FFY 2022, Pennsylvania did not meet the target for the number of children transitioning from Part C and had an IEP in place by their third birthday. No pattern of low performing programs was noted for geographic area, race/ethnicity, disability category or program size. Analysis suggests that staffing shortages are impacting the delivery of timely evaluation services in some PSEI programs.

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

362

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 362 children whose IEPs were not developed by their 3rd birthday, 46.13% had their IEP developed within 30 days, 43.65% had their IEP developed between 31–90 days, and 10.22% had their IEPs developed greater than 90 days. Reasons for delays were primarily attributed to staffing issues and administrative delays, as well as weather emergencies and scheduling problems over which PSEI programs have limited control. As confirmed through analysis of data reports, all 362 children did have an IEP developed and implemented, although beyond their third birthday.

In FFY 2022, 14 PSEI programs had at least 1 late IEP. One PSEI program accounted for 48.07% of the IEPs completed past the child's third birthday and one additional PSEI program accounted for 19.34% of late IEPs.

BEISFS Advisors implemented targeted technical assistance activities with all of the14 programs. The activities included notification in writing to the program administrator of the findings of noncompliance, analysis of data to identify specific areas of concern, development of an action plan (QEP) with data-based targets for correction of compliance, revision to procedures for in-time monitoring of late IEPs, and verification of the implementation of new procedures and the timely correction of noncompliance.

Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

BEISFS used a state database that includes data for the entire reporting year from all PSEI 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, 2022, through June 30, 2023.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
10	10	0	0

FFY 2021 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 PSEI programs with identified instances of systemic noncompliance are correctly implementing the regulatory requirements for the provision of IEPs by the third birthday of children transitioning from the Part C program and eligible for the Part B program, BEISFS Advisors reviewed a sample of child records from that EI program. The records were reviewed either through the PELICAN-EI data system or onsite child record review. BEISFS Advisors reviewed the date of the IEP, the child's birthdate, and any reason for a delay in meeting this timeline, to determine that the PSEI program is now correctly implementing the regulatory requirement for IEPs by the child's third birthday.

In addition to a review of child records, PSEI programs submitted a Quality Enhancement Plan (QEP), to address correction of all areas of systemic noncompliance. Implementation of the QEP was validated within one year of issuance of the findings report. BEISFS Advisors reviewed documentation of completion of all QEP activities as part of the validation of correction of systemic noncompliance. Documentation included reviewing updated local policies and procedures, reviewing documentation of staff training on new procedures, and observing service delivery as appropriate.

BEISFS verified that all PSEI programs with identified systemic noncompliance in FFY 2021 are correctly implementing regulatory requirements related to the provision of IEPs by the third birthday for children transitioning from the Part C program, consistent with State General Supervision Responsibilities Under Parts B and C of IDEA (OSEP QA 23-01).

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 every identified child, either through the PELICAN-EI data system or onsite record review. Using the PELICAN-EI data reports, BEISFS advisor verified that the eligible child received an IEP, although late.

BEISFS verified that all PSEI programs with individual cases of noncompliance identified in FFY 2021 developed an IEP for every identified child, unless the child was no longer within the jurisdiction of the PSEI program, consistent with State General Supervision Responsibilities Under Parts B and C of IDEA (OSEP QA 23-01).

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Response to actions required in FFY 2021 SPP/APR

The 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 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	82.18%	80.18%	81.11%	80.53%	84.99%

Targets

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

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
800	920	84.99%	100%	86.96%	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 NTACT:C 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 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
151	151	0	0

FFY 2021 Findings of Noncompliance Verified as Corrected

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

In FFY 2021, there were 151 findings of noncompliance through the cyclical monitoring process. BSE explored a root cause analysis with the LEAs involved for the noncompliance of the regulation that had been violated. LEAs were subsequently required to develop a Corrective Action Verification Plan (CAVP) to address the noncompliance and its root cause. The CAVP is also linked to technical assistance resources through the PaTTAN and IU systems. Advisors also examined LEAs' policies, procedures, and practices, and where necessary, the LEAs were required to address the correction of policies, procedures, and practices in their CAVP to ensure systemic correction. CAVPs included required corrective action/evidence of change, timelines and resources required, and tracking of timelines to closure. The BSE monitored implementation of the CAVP through reviews of revised policies and procedures and verification of 100% correction of noncompliance as evidenced by updated data in a subsequent sample of additional student files. The CAVP was monitored until all corrective action was completed. All corrective action was required to be completed within one year of the notification of a finding. Because the system is web-based, BSE was able to track progress in closing the CAVP and captured real-time data concerning the LEAs' statuses in completing corrective action.

BSE has follow-up procedures in place to verify correction of noncompliance. In addition to systemic correction of noncompliance, the BSE reviewed the files of all students whose IEPs were found to be in noncompliance with indicator 13 transition requirements in monitoring, and reviewed those students' updated IEPs until all noncompliance was corrected. The BSE ensured correction of noncompliance systemically and specifically for every individual student whose IEP had noncompliance, unless the student was no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01.

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

In accordance with OSEP QA 23-01, the BSE's procedures required systemic correction of policies, procedures, and practices, as well as verification of correction through file reviews. Updated data must demonstrate 100% compliance with regulatory requirements prior to closure of corrective action. Based upon the root cause analyses in the LEAs involved, the BSE required student-specific corrective action for each of the 151 citations of noncompliance where corrective action could be implemented. This was done through the Individual Corrective Action Plan (ICAP) component of the overall CAVP web-based system. In the ICAP, the BSE reviewed updated data for each student whose file included a finding of noncompliance to ensure correction (unless the student is no longer within the jurisdiction of the LEA); additionally, BSE reviewed a new sample of student files to verify compliance of this requirement.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Response to actions required in FFY 2021 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 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

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 3 for additional instructions on sampling.)*

Collect data by September 2023 on students who left school during 2021-2022, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2021-2022 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).

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 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 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 analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in their analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2017	2018	2019	2020	2021
A	2009	Target >=	27.80%	27.80%	28.50%	29.33%	29.33%
A	27.99%	Data	29.53%	27.55%	30.92%	27.65%	23.91%
B	2009	Target >=	62.00%	62.00%	65.00%	70.71%	70.71%
B	48.90%	Data	69.14%	71.66%	71.33%	66.45%	71.87%
C	2009	Target >=	70.90%	70.90%	72.00%	76.23%	76.23%
C	65.84%	Data	75.33%	77.58%	75.78%	71.33%	76.09%

FFY 2021 Targets

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

Targets: Description of Stakeholder Input

Please refer to the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where the descriptions for School Age Programs (Bureau of Special Education) reside.

FFY 2022 SPP/APR Data

Total number of targeted youth in the sample or census	4,482
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	2,210
Response Rate	49.31%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	537
2. Number of respondent youth who competitively employed within one year of leaving high school	992
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)	104
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).	13

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Enrolled in higher education (1)	537	2,210	23.91%	29.33%	24.30%	Did not meet target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1,529	2,210	71.87%	70.71%	69.19%	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)	1,646	2,210	76.09%	76.23%	74.48%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
B	The proportion of respondent leavers who reported being competitively employed within one year of leaving school fell more than 3% from FFY 2021 and impacted the performance on this measure.
C	The proportion of respondent leavers who reported being competitively employed within one year of leaving school fell more than 3% from FFY 2021 and impacted the performance on 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	2021	2022
Response Rate	54.73%	49.31%

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

To determine the representativeness of the respondent group, comparisons were made to the target population for all disability, racial/ethnic and exit categories, and gender. Each of the 24 comparisons made fell within a state-established ± 5.0% tolerance level. In fact, 19 comparisons were less than ± 1.0%, and only two comparisons were above ± 2.0%.

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

This year, surveys were returned for nearly half of the targeted group of student leavers. Although the response rate for PA's Post-School Outcome Survey declined more than 5% in FFY 2022, no disability categories or racial/ethnic groups were overrepresented or underrepresented in the respondent group. This was also true for exit reason and gender.

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

There were no subgroups with in the respondent group that were underrepresented in FFY 2022.

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

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

The response data were found to be representative of the demographics of the targeted group across disability, racial/ethnic and exit categories, and gender. Although nonresponse bias analysis isn't needed, BSE did analyze data across these key subgroups using the nonresponse bias analysis application developed by the IDEA Data Center. The analyses demonstrated natural variances in the data and a lack of nonresponse bias with regard to these particular subgroups.

Throughout the data collection window, the new data collection system described above will allow monitoring of responses by student leavers at both the state level and by LEAs in each year's sample. Armed with this information, the state can prompt LEAs with higher nonresponse rates to begin personal contact with student leavers to encourage them to either reply to the electronic notifications and complete the post-school outcome survey, or to participate in telephone interviews to collect the data needed for this Indicator.

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. Additional details about this plan were requested by OSEP on 4 January, 2023, and the response to this request was provided on 23 January, 2023. OSEP's evaluation of the sampling plan indicated that it is approvable.

The FFY 2022 response rate of 49.31% 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 2022 SPP/APR, the State must report whether the FFY 2022 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

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

Response to actions required in FFY 2021 SPP/APR

As noted above, the FFY 2022 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school,

The survey used in both FFY 2021 and FFY 2022 is the same survey used in prior years and is not new or revised. In FFY 2023, the same survey will be used again, but delivered to school leavers in a different form than has been used to date.

14 - OSEP Response

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 ED*Facts* 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 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1 Number of resolution sessions	707
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1(a) Number resolution sessions resolved through settlement agreements	101

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 Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where these descriptions reside.

Historical Data

Baseline Year	Baseline Data
2012	27.38%

FFY	2017	2018	2019	2020	2021
Target >=	24.00% - 35.00%	24.00% - 35.00%	28.00%-38.00%	25.00%-35.00%	25.00%-35.00%
Data	36.31%	35.06%	33.38%	39.21%	35.22%

Targets

FFY	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%

FFY 2022 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2021 Data	FFY 2022 Target (low)	FFY 2022 Target (high)	FFY 2022 Data	Status	Slippage
101	707	35.22%	25.00%	35.00%	14.29%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

A review of the data found no discernable patterns that may have negatively impacted the agreement rate.

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements.

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

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the ED*Facts* Metadata and Process System (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 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 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	183
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	5
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	121

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 Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction where these descriptions reside.

Historical Data

Baseline Year	Baseline Data
2005	79.30%

FFY	2017	2018	2019	2020	2021
Target >=	75.00% - 85.00%	75.00% - 85.00%	79.50%-89.50%	75.00%-85.00%	75.00%-85.00%
Data	80.11%	76.58%	74.53%	66.96%	71.35%

Targets

FFY	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%

FFY 2022 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 2021 Data	FFY 2022 Target (low)	FFY 2022 Target (high)	FFY 2022 Data	Status	Slippage
5	121	183	71.35%	75.00%	85.00%	68.85%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The Stakeholder Council for the Office for Dispute Resolution had been urging the BSE to allow attorneys to be present during mediation sessions, believing that more positive outcomes for students with disabilities would result. In March 2021, with the endorsement of the SEAP, the BSE changed its long-standing policy and allowed attorneys to participate in mediation sessions. This change may have unintentionally suppressed the percentage of mediations held that resulted in mediation agreements. In FFY 2022, the agreement rate observed for mediations conducted without attorneys was just over 70%, while the agreement rate observed for mediations conducted with attorneys was just 54%.

Provide additional information about this indicator (optional)

ODR remains committed to providing opportunities for families and schools to resolve special education disagreements in a productive manner. As such, alternatives to due process, such as mediation, are promoted through presentations, publications, and other media. The number of mediation requests and mediation sessions held has increased over the last few years and, when considered together with the decrease in due process complaints in Pennsylvania, is seen as a positive outcome.

When a mediation session is held that does not result in a mediation agreement, ConsultLine specialists reach out to the family, the LEA, and the attorneys (if attorneys were present at the mediation) to hear their perspectives on why an agreement was not reached. This information is used to learn more about any barriers that prevented an agreement and to monitor training needs.

Mediators and parties frequently report that even in cases when a written mediation agreement is not drafted, the mediation helps move parties toward agreement. This is demonstrated by the mediation cases that are related to a due process complaint. Even though a number of these cases did not reach a mediation agreement, only one advanced to a fully adjudicated hearing with a hearing officer decision. The remaining cases were resolved without a need for a hearing.

16 - Prior FFY Required Actions

None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

The State's SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

Measurement

The State's SPP/APR includes an SSIP that is a comprehensive, ambitious, yet achievable multi-year plan for improving results for children with disabilities. The SSIP includes each of the components described below.

Instructions

Baseline Data*:* The State must provide baseline data that must be expressed as a percentage and which is aligned with the State-identified Measurable Result(s) (SiMR) for Children with Disabilities.

Targets*:* 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.

Updated Data: In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 through February 2027, 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) 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 SPPs/APRs, 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., February 1, 2023). 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 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2023-June 30, 2024).

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 (e.g., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (e.g., 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 2022 APR, report on activities it intends to implement in FFY 2023, i.e., July 1, 2023-June 30, 2024) 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 (SWD).

PA's FFY 2020 through FFY 2025 SSIP is a scaled-up implementation and expansion of its previous SSIP. This report overviews the second full year of implementation of activities/outcomes for the learning sites during the 2022-23 school year (FFY 2022). The implementation plan follows the National Dropout Prevention Center for Students with Disabilities (NDPC-SD's) five-phase Intervention Framework, as outlined below.

- Phase 1: focus on capacity building for Theory of Action adoption; Evidence Based Practices (EBPs) implementation and establishment of Early Warning System (EWS);
- Phase 2: build on data and infrastructure analysis, Coherent Improvement Strategy (CIS) adoption, and evaluation planning;
- Phase 3: focus on progress toward short-term and long-term objectives for the SSIP and the SiMR;
- Phase 4: continue implementation monitoring, fidelity measurement, and sustainability planning; and
- Phase 5: focus on site's independent implementation, sustainability and scale-up of the comprehensive model.

Has the SiMR changed since the last SSIP submission? (yes/no)

NO

Is the State using a subset of the population from the indicator (*e.g.*, a sample, cohort model)? (yes/no)

YES

Provide a description of the subset of the population from the indicator.

The subset population was identified in FFY 2020. The BSE assigned LEAs to tiers of support based on analysis of 618 graduation data to identify the learning site cohort for a state-wide scale-up of the SSIP.

- Tier 1 LEAs were identified to receive universal supports to improve and/or sustain graduation outcomes. All LEAs across the Commonwealth receive universal supports. They participate in PD and TA focused on best practices provided by PaTTAN via webinars, conferences, resource sharing, and peer-to-peer networking in general.

- Tier 2 LEAs were identified to receive targeted supports by way of comprehensive SSIP model implementation. SSIP learning sites were selected based on low graduation rates (10% below the state graduation rate for two consecutive years), geographic location (rural, suburban, or urban), LEA type (school district or charter schools), type of charter school (brick and mortar or cyber) and participation in other statewide improvement efforts. In total, the implementation cohort includes 7,583 students with IEPs in grades 9-12 across the eastern, central, and western regions of the state.

- Tier 3 LEAs did not meet Tier 1 or Tier 2 criteria because they are identified as a Comprehensive Support Improvement (CSI) school under the state's ESSA Consolidated State Plan and are already receiving intensive support through PA's System for LEA and School Improvement. Although these schools are not part of the current SSIP cohort, the PaTTAN SSIP Lead Consultant and the BSE SSIP team collaborate with the Special Assistant to the Secretary for Federally Designated Schools to offer support specific to improving graduation rates for SWD.

Rationale for Resetting Baseline and Targets

Initially, 16 learning sites were identified to receive Tier 2 targeted supports via SSIP model implementation. (See Year 1 outcomes summarized in the report submitted Feb 1, 2023). However, one site exited the SSIP mid-school year 2022 because it is configured to provide specialized graduation supports to students in a time frame of one year or less, such as credit recovery or alternative programming. Therefore, the school structure did not successfully align with the implementation requirements of the SSIP model, or the timeline/type of activities embedded into each of the phases of implementation. The selection of the site was statistical, and when the programmatic aspects were fully understood by SSIP staff, the decision was made to remove this site from the project and to provide continued support to achieve the desired outcome of graduating students with disabilities. Removing this learning site was a collaborative decision between the BSE and learning site and required the BSE to reset the baseline for the SiMR to FFY 2022. Using the same process that OSEP accepted in the previous cycle when a learning site was removed, baseline was reset, and targets were adjusted using the increments adopted with stakeholder input in the target setting process for this cycle. There is no target set for FFY 2022 as it is now the baseline year. Even though this learning site is no longer included Tier 2, PaTTAN consultants continue to provide Tier 1 tailored technical assistance to support their goals.

Opportunity for Stakeholder Input Regarding Changes to Baseline and Targets

In May 2023, the need to reset baseline and targets was discussed with Pennsylvania's Special Education Advisory Panel. The BSE presented baseline data calculated for the remaining learning sites and offered an option for SEAP consideration for target setting which included a terminal target and a method for calculating interim annual targets for graduation rates. SEAP members were also invited to suggest other options for a different terminal target that exceeded the newly calculated baseline, and to propose a different method for calculating interim annual targets. The panel declined this invitation and unanimously recommended (with no abstentions) the offered methodology for calculating the interim and the terminal targets.

This report details continued activities and outcomes of the second year of SSIP model implementation in the remaining 15 Tier 2 learning sites during the 2022-23 school year (FFY2022).

Is the State's theory of action new or revised since the previous submission? (yes/no)

NO

Please provide a link to the current theory of action.

https://www.pattan.net/CMSPages/GetAmazonFile.aspx?path=~\pattan\media\publications\2019%20accessible%20pdfs\ssip-theory-of-action_3-30-22b.pdf&hash=4b67433e26b91a34aeb4b6151b6de6eda512cbee0a2662f8a67fec6cd8a20c7c

Progress toward the SiMR

Please provide the data for the specific FFY listed below (expressed as actual number and percentages).

Select yes if the State uses two targets for measurement. (yes/no)

NO

Historical Data

Baseline Year	Baseline Data
2022	70.53%

Targets

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target		71.78%	73.03%	74.28%

FFY 2022 SPP/APR Data

Number Graduated with a Regular High School Diploma	Number Eligible to Graduate	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,235	1,751	71.49%		70.53%	N/A	N/A

Provide the data source for the FFY 2022 data.

The data are the same data used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS009.

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

The section 618 data are collected for the 15 learning sites participating in the current SSIP and aggregated to obtain the baseline graduation rate for students with disabilities 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.

Progress toward the SiMR was assessed both qualitatively and quantitatively. The qualitative data included documentation of the frequency and characteristics of Phase 1 and Phase 2 implementation activities during the 2022-23 school year (FFY 2022). Specifically:

Phase 1 Implementation Activities Continued from FFY 2021 Implementation

Capacity Building for Theory of Action Adoption and Implementation

- PaTTAN consultants facilitated trainings on SSIP model implementation and the Theory of Action for new administrators and new team members at learning sites that experienced turnover or role changes from the previous year.
- All learning sites convened local leadership teams meetings at least monthly with key administrators, special education personnel, general education personnel, and student data personnel to review SSIP implementation efforts and student graduation trajectory data.
- PaTTAN consultants continued to provide direct, ongoing implementation support, professional development, and technical assistance.

Use of an Early Warning System (EWS)

- All learning sites continued to implement an EWS to track and analyze student Attendance, Behavior, and Course (ABC) performance data for students with disabilities.

Building of Data and Infrastructure Analysis

- All sites continued to integrate their chosen EWS with the SSIP online data collection platform to streamline alerts, analyses, and action planning for students identified as off-track and on-track for graduation.
- Student-level EWS and ABC data were collected and inputted for quarterly analyses and risk factor identification throughout the 2022-23 school year.

Teaming, Data-Based-Decision-Making, and Action Planning

- Site-level data were analyzed to determine the influence of the model on students' graduation trajectories.
- Student-level EWS and ABC data were collected quarterly by teams at each learning site for analyses and risk factor identification.
- Teams developed and executed action plans in response to data to inform adoption and implementation of Coherent Improvement Strategies rooted in Evidence Based Practices known to positively influence high school completion.

Phase 2 Implementation Activities Newly Implemented in FFY 2022

Adoption and Implementation of Coherent Improvement Strategy (CIS) Grounded in Evidence Based Practices (EBPs)

- In accordance with action plans, all sites collected quarterly student-level EWS and ABC data to capture risk factors impacting students' paths to graduation.
- Teams analyzed EWS and ABC data to plan intervention for students "off track" for graduation using at least one CIS grounded in EBPs based on each student's areas of need.
- Teachers implemented the chosen CIS with the goal of positively influencing student ABC data to help students move to "on track" for graduation status.

Evaluation Planning

- Leadership Team members at each learning site completed a "SSIP Implementation Survey" documenting both established and evolving components of the model to better understand the factors influencing implementation and outcomes.
- Action plans for each learning site were reviewed to track implementation of SSIP model components and to build toward faithful model implementation in preparation for Phase 3 and 4 evaluation goals and fidelity assessments.
- Team protocols were reviewed to document CIS implementation for students "off track" in anticipation of Phase 3 and 4 evaluation goals and fidelity of CIS implementation assessments.

Additional analyses, outcomes, and fidelity data will be included in subsequent submissions.

The quantitative data included within-year and cross-year student risk outcomes for the second full year of SSIP implementation throughout the 2022-23 school year (FFY 2022). The data in this report capture outcomes of the second full year of SSIP implementation throughout the 2022-23 school year (FFY 2022) and demonstrate progress toward achieving Pennsylvania's SiMR. Within-year and cross-year trends are reported below.

Within-Year Outcomes

Across the learning sites, more than half of the students with disabilities (58%) were identified by the EWS at the beginning of the 2022-23 school year as "on track" for graduation, and 42% were identified as "off track". After data-based decision making and CIS implementation of the SSIP model, "off track" percentages dropped to 38%. Site-to-site comparisons showed that 13 of the 15 learning sites successfully reduced the proportion of students "off-track" for graduation and successfully increased the proportion of students "on-track" within the 2023 school year. All 15 sites saw decreases in the prevalence and type of risk factors known to negatively impact graduation outcomes (e.g., low attendance; misconduct, state behavioral offenses, failing course grades). The total number of students exhibiting multiple risk factors decreased by 65%. Sixty percent of students originally identified as having poor attendance and academic failure were no longer identified at risk for those reasons by year's end. Five sites reduced the number of students identified as at risk for failure due to behavioral infractions by 37%. Grade level breakdown show positive rates of change, with 27% more 9th graders identified as "on-track" for graduation by the end of the year, 21% more students in grade 10; 15% more students in grade 11; and 9% more students in grade 12 also showing progress.

Cross-Year Outcomes (Two-Year Trends)

Fourteen percent of the 9th-11th grade students identified as "off track" for graduation before SSIP implementation in Fall 2021 achieved "on track" status in Spring 2023 after two years of implementation. Highest change rates were evident for 9th graders, 37% of whom moved from "off track" to "on track" by the end of their 10th grade year. These data suggest positive impact of early risk identification through the SSIP for changing students' paths to graduation. Moreover, analysis of risk factor trends show a 56% decrease in the number of risk factors exhibited by students across two years of SSIP implementation. Of this group, students at risk due to low attendance experienced higher rates of change than students at risk due to academic failure or students at risk due to behavioral problems.

Because research suggests it takes 3-5 years of systems change to measurably influence achievement, additional longitudinal trends across multiple years in the model will be the focus of future reports. There is substantial agreement that planned change is a recursive process that happens in discernible stages (Bierman et al., 2002; Fixsen, Blase, Timbers, and Wolf, 2001; Panzano and Roth, 2006; Prochaska and DiClemente, 1982; Solberg, Hroscikoski, Sperl-Hillen, O'Conner, and Crabtree, 2004).

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/getmedia/a7bb5e60-ecd8-4bd1-a7fe-e8f191680145/Evaluation_Plan_for-Pennsylvania-s-Part-B-State-Systemic-Improvement-Plan_2-FFY-2020-thru-FFY-2025

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 parameters for the EWS were revised to more accurately reflect what learning sites considered failing grades for students. The plan has also been revised to reflect new dates and timelines, where appropriate.

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

A technical correction was made in the plan to reflect the parameters for failing grades used by learning sites in the data collection system provided for this purpose.

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

SSIP implementation of infrastructure strategies to support achievement of the SiMR include: 1) use of EWS metrics; 2) alignment of LEA compliance monitoring improvement plans for graduation and dropout rates with SSIP Action Plans, and 3) alignment of State Professional Development Grant (SPDG) and SSIP to offer intensive/ongoing PD to increase graduation rates and enhance college/career readiness.

To support use of EWS metrics, PaTTAN consultants continue to provide intensive support to learning sites including:

- assuring sites met Phase 1 and 2 goals of implementing an EWS to collect ABC data for students with IEPs;
- facilitating continued use of the SSIP online data management system;
- consulting with local leadership teams in the use of data-based decision-making team meeting protocols;
- reviewing action plans for CIS selection and intervention in response to student data; and
- providing PD and resources on CIS including EBPs (see link below).

https://www.pattan.net/CMSPages/GetAmazonFile.aspx?path=~\pattan\media\materials\publications\files\ssip-coherent-improvement-blkt-3-23-wbl_2.pdf&hash=99265a719c0adc20c6662e4fb2cc84241b2c791c56e3f3b6042b4a32d2224c59&ext=.pdf

To support alignment of school improvement plans for graduation and dropout rates with SSIP Action Plans, PaTTAN consultants provided guidance to learning sites by:

- reviewing data and action items related to Comprehensive School Improvement (CSI), Additional Targeted School Improvement (ATSI) or Targeted School Improvement (TSI) plans at SSIP leadership team meetings to assure coordinated implementation efforts; and
- adding CSI, ATSI and TSI focused prompts to SSIP Action Plan templates and data meeting protocols to embed improvement planning discussions into standard model implementation and assure continuity of implementation goals/activities/outcomes.

To support alignment of the SPDG with SSIP, PaTTAN consultants continued to offer intensive/ongoing PD to increase graduation and college/career readiness, and multiple collaboration efforts with LEAs, stakeholders, and experts occurred including:

- continued collaboration with previous and current SPDG partners (Path to Graduation (P2G) and Success for PA Early Learners (SPEL)) to identify and connect parallel intervention components occurring in both the SPDG and SSIP such as using EBPs, family engagement strategies, MTSS for literacy/ELA, transition supports, and Check & Connect to assure learners at-risk for school failure are identified early and supported continuously throughout their school lives to positively impact long term achievements trajectories and outcomes;
- analyzing achievement, implementation, and outcome data, with multiple data teams and stakeholders including the BSE, PDE internal stakeholders (bureaus, offices, divisions, and initiatives). SSIP Core Team, Special Education Advisory Panel (SEAP), learning site leadership teams, PaTTAN consultants, Hispanos Unidos para Ninos Exceptionales (HUNE), and the external evaluator;
- analyzing Phase 1 and Phase 2 EWS data and ABC data and identified those students with disabilities off-track for graduation;
- reviewing the CISs and their connected EBPs (see Theory of Action section above) to inform action planning and evaluation; and
- embedding Family Engagement strategies and Culturally Responsive Practices (CPRs) into action planning templates and meeting protocols as part of standardized model implementation at all sites.

All 15 SSIP learning sites completed action plans for the 2022-23 school year. All documented implementation of an EWS, leadership teaming, and data-based decision-making based on EWS alerts and ABC data. Qualitative review of action plan narratives, team meeting protocols, and consultant meeting notes indicated that all sites experienced some level of staff turnover or change throughout the year impacting SSIP implementation. More than 80% included phrases/language suggesting that additional personnel and more consistent administrative support were necessary for effective implementation and would be necessary to sustain the model over time. Each learning site noted at least one challenge of implementation related to high attrition rates in leadership or faculty, as well as staff and teacher shortages. All team meeting protocols indicated that building-level and LEA leaders, special education teachers, and general education teachers collaboratively engaged in the process, participated in meetings, contributed to decisions, and shared leadership roles.

Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.

Pennsylvania's SSIP centered on providing professional development and technical assistance as part of a systems framework. Phase 1 and 2 outcomes focused on building infrastructure and capacity for SSIP implementation and Coherent Improvement Strategy (CIS) adoption, and evaluation planning:

Short Term Outcomes

The 15 SSIP learning sites participated in the following PD provided by PaTTAN consultants to promote systems change:

- 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 implementation;
- Action Plan protocols and process; and
- Student-level EWS and ABC data analyses, data-based-decision-making, and data team meeting protocol.

Leadership team members completed an “SSIP Implementation Survey” documenting both established and evolving aspects of model implementation. Results indicated all sites implemented an EWS, engaged in data-based-decision-making around EWS and ABC data, and implemented at least one CIS in response to data trends and student needs. One quarter of respondents reported that teaming and follow-through was difficult due to high teacher turnover and changes in school/district administration. Seventy percent reported experiencing model implementation barriers related to staff shortages and high staff turnover. Whereas 24% responded that they have not encountered any barriers to implementation thus far and attribute that to stable team make-up, consistent administrative support, and effective PD.

PaTTAN consultants responded to learning site concerns about leadership and administration attrition by establishing a virtual Administrators Professional Learning Community to increase dialogue, enhance operational supports, and overcome barriers to SSIP implementation.

As a result of this PD, learning sites:

- Established their leadership teams to implement the SSIP model at their school.
- Adopted an action plan process and aligned it to the Theory of Action.
- Implemented the required EWS to collect and analyze student level ABC data on the online data management platform.
- Used these data inform strategic interventions and supports for students off-track.
- Recorded all teaming activities and data based decision making using a data team meeting protocol.

Intermediate Outcomes

The SSIP learning sites received TA:

- to identify, adopt and implement at least one CIS in addition to the EWS in response to student-level data:
- to review Pennsylvania’s selected seven CIS known to positively impact school achievement, continuity, and completion; and
- to select a CIS(s) based on student data.

The SSIP learning sites also received TA to implement the newly selected CIS(s), including:

- training from PaTTAN consultants and Intermediate Unit Training and Consultation staff (TaCs) on EBPs with standard-protocol intervention programs, and
- training focused on school improvement planning in concert with SSIP action plans and teaming protocols.

Each will intensify across the span of SSIP implementation to inform sustainability overtime to influence SiMR achievement and improved outcomes for students with disabilities.

As a result of this TA, learning sites:

- used the Theory of Action to select at least one CIS in addition to the EWS in response to student-level data;
- documented their CIS in their Action Plan;
- participated in relevant implementation trainings from the PaTTAN and IU consultants for the identified CIS(s); and
- aligned SSIP action planning with School Improvement plans to guide comprehensive support.

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

NO

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

The current phase of the SSIP focuses on continued capacity building in EWS implementation for early risk identification and CIS implementation to provide intervention to students “off track” for graduation based on ABC data. These actions will continue and evolve as implementation advances in upcoming phases.

Actions and anticipated outcomes beginning with the next reporting period include:

- continued PD and TA to all SSIP Learning Sites in preparation for upcoming fidelity measurements and evaluation of model implementation success;
- continued direct support from PaTTAN consultants to help sites move toward independent implementation and sustainability over time;
- TA and PD in using fidelity measures to assess and improve quality of model implementation as well as CIS delivery;
- continued TA in aligning school improvement planning with SSIP Action Planning and team decision making;

• continued State Infrastructure Development and Capacity Building;

• continued engagement with stakeholders to improve two-way communication;

• alignment of SSIP with the newly implemented SPDG (SPEL) grant and additional collaboration to enhance/leverage corroborative elements of each model providing needed PreK-12 supports resulting in long term school success for SWD across Pennsylvania;

• interdepartmental meetings with PDE bureaus, offices, divisions, and initiatives focused on increasing graduation rates;

• partnership with HUNE and the Parent Education and Advocacy Leadership Center (PEAL) to support building capacity in agencies and families;

• communication on an ongoing basis with OSEP, the National Technical Assistance Center on Transition: the Collaborative (NTACT-C), the IDEA Data Center (IDC), and the National Center on Systemic Improvement (NCSI) staff, and the SSIP external evaluator, to plan and monitor implementation of the SSIP;

• ongoing statewide distribution of print/digital publications and SSIP training materials; and

• continued CIS and EBP trainings through close collaboration with PaTTAN Consultants and Intermediate Unit Training and Consultation staff (TaCs).

CIS and related EBP intervention will change continuously within and across phases of implementation as student data are dynamic. CIS selection is responsive, not prescriptive, and is based on individual needs, ABC trends, and EWS patterns. Therefore, teams will need ongoing support and collaboration as they choose different strategies for different students at different times.

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

Aligned with the Theory of Action, Pennsylvania selected seven CISs rooted in EBPs known to positively impact school completion and reduce dropout rates of students with disabilities. Each are described below with examples of interventions adopted and delivered at SSIP learning sites in response to student-level data The current phase of the SSIP required sites to implement an Early Warning System and add at least one additional CIS in response to student-level data.

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

2. Multi-Tiered System of Supports Academic: Implementation of Multi-Tiered System of Supports (MTSS) with increasingly intensive evidence-based methodologies toward improved academic outcomes

3. Multi-Tiered System of Supports Behavior: Implementation of Multi-Tiered System of Support (MTSS) with increasingly intensive evidence-based methodologies toward improved social, emotional and behavioral outcomes

4. Attendance Strategies and Alternative Programming: Implementation of attendance strategies and alternative programming to increase the likelihood of graduation

5. Culturally Responsive Practices (CRPs): Implementation of instructional practices and interactions that personalize the learning environment for students of various ethnicities, races, and linguistic level

6. Family Engagement: Implementation of programs and practices to cultivate family and community partnerships and empower them to become more meaningfully involved

7. Secondary Transition: Implementation of rigorous and relevant instruction to better engage students in learning, and provide the skills needed to graduate and have positive post school outcomes

Provide a summary of each evidence-based practices.

At this phase of implementation (Phase 2), SSIP learning sites were required to continue utilization of the EWS established in Phase 1 as well as at least one additional CIS based on quarterly student attendance, behavior, and course grade data. To align with best practices in data-based decision making, each site had autonomy in deciding what EBP (or combination of EBPs) to implement for the selected additional CIS to ensure interventions were student-centered and data-driven. Since the SSIP is designed as model implementation and not as controlled research design, leadership teams have flexibility in combining or changing CISs/EBPs based on student outcomes as long as they adhere to model requirements. Family Engagement CIS and Culturally Responsive Practices CIS continued to be embedded into Action Plan protocols in alignment with the National Network of Partnership Schools at John Hopkins University's recommendations for building successful school-family-community partnerships.

Action Plan and Implementation Survey data indicate all 15 SSIP sites met the Phase 2 requirements. In fact, 14 sites implemented multiple CIS in combination beyond those required.

• All sites implemented the required EWS plus at least one additional CIS

• 1 site implemented only the required EWS plus the one additional CIS

- EWS + Secondary Transition (school-to-work programs in food services)

• 8 sites implemented the EWS plus two additional CIS

- EWS + Attendance Strategies and Alternative Programming (credit recovery programs and Check & Connect) + MTSS Academic (Actively Learn)
- EWS + MTSS Academic (Sonday reading program) + MTSS Behavior (School Wide Positive Behavior Intervention Support (SWPBIS))
- EWS + Attendance Strategies and Alternative Programming (designated specific support staff roles focused on improving attendance and engagement) + MTSS Academic (Universal Design for Learning (UDL))
- EWS + Attendance Strategies and Alternative Programming (credit recovery programs) + MTSS Behavior (student mentoring initiatives)
- EWS + Attendance Strategies and Alternative Programming (credit recovery programs, summer extension programs; 1:1 communication/ advising) + MTSS Academic (tutoring programs)
- EWS + Secondary Transition (partnerships with the Office for Vocational Rehabilitation (OVR)) + Attendance Strategies and Alternative Programming (graduation recovery mentoring)
- EWS + Attendance Strategies and Alternative Programming (Check & Connect) + MTSS Academic (intervention programs and tutoring)
- EWS + Secondary Transition (transition surveys; transition support programs; community partnerships) + MTSS Behavior (SWPBIS)

• 6 sites implemented the EWS plus three additional CIS

- EWS + Secondary Transition (Attract Prepare Retain (APR) Grant) + Attendance Strategies and Alternative Programming (Resilience, Empowerment, and Natural Supports for Education and Work (RENEW)) + MTSS Academic (tutoring programs)
- EWS + Secondary Transition (post-secondary enrollment options) + Attendance Strategies and Alternative Programming (RENEW) + MTSS Behavior (Big Brothers Big Sisters)
- EWS + Attendance Strategies and Alternative Programming (Safe Organized Accountable Respectful (SOAR)) + MTSS Academic (alternative schedules; 1:1 support; tutoring) + MTSS Behavior (Check & Connect)
- EWS + Attendance Strategies and Alternative Programming (Everfi Pathways) + MTSS Academic (local university Upward Bound program) + MTSS Behavior (Can Do U - Social Emotional Learning curriculum)
- EWS + Secondary Transition (transition surveys) + MTSS Academic (Star Reading/Math Interventions; EdInsight,; IXL; Step Up to Writing) + MTSS Behavior (Check & Connect)
- EWS + Attendance Strategies and Alternative Programming (RENEW) + MTSS Academic (Reading Plus) MTSS Behavior (SWPBIS)

Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.

The seven CISs were selected by the BSE for Iteration 1 of the SSIP and for continued implementation in this iteration based on multiple stakeholder input and activities including collaboration with LEAs statewide, national technical assistance centers, SEAP, and leading education experts/researchers. Each is research- and evidenced-based high leverage strategies known to address root causes for low performance and to build capacity to achieve the SiMR for students with disabilities (see link below).

https://www.pattan.net/CMSPages/GetAmazonFile.aspx?path=~\pattan\media\materials\publications\files\ssip-coherent-improvement-blkt-3-23-wbl_2.pdf&hash=99265a719c0adc20c6662e4fb2cc84241b2c791c56e3f3b6042b4a32d2224c59&ext=.pdf

In the current year of implementation, learning sites were on required to implement two strategies—utilizing an EWS and one additional strategy of their choice based on student data. Permitting learning sites to select data-driven CISs resulted in several different combinations of EBP implementation, confounding the ability to measure the effectiveness of any one of them in isolation. End-of-year 2023 outcome data did suggest, however, that sites using standard protocol intervention programs had more students change risk categories and more students move from “off track” to “on track” status than sites who used self-designed or informal interventions. Sustained use of an EWS made measurable positive impact on both student achievement and instructional practice in the prior SSIP iteration; therefore, positive results are anticipated in the current iteration. As reported in previous sections of this report, all SSIP sites implemented the EWS as designed as well as successfully implemented at least one additional CIS. Additional outcome and impact data for CIS selection and EBP implementation will be discussed in future reports of this SSIP as fidelity measurements occur and longitudinal trends are identified.

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

SSIP learning sites are in the Phase 2 of model implementation—year two of a multiyear school change process. Fidelity monitoring is scheduled for Phases 3 and 4; therefore, fidelity data have not been collected yet at the current SSIP learning sites. TA for fidelity monitoring, engagement in model implementation evaluation and fidelity measurement of CISs, analysis of results, and monitoring will occur in Phase 3 and 4 of implementation across the next two years. Data will be described in upcoming submissions.

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.

Learning sites were required to utilize an EWS plus one additional CIS with EBP. As described earlier, data collected shows that all sites met or exceeded those requirements. Additional outcome and impact data for CIS selection, EBP implementation, and fidelity will be discussed in upcoming submissions.

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

Next steps include continued implementation of the EWS, with embedded Family Engagement CIS and use of Culturally Responsive Practices, as well as implement at least one CIS grounded in EBP. Specific CIS/EBP selections will be determined by local leadership teams after analyzing EWS and ABC data to plan for interventions in response to changes in student risk factors and performance. Strategy selection will be data-driven and dynamic based on student needs and progress. Therefore, sites will retain autonomy to implement whatever CIS (or combination of CISs) meets student needs to provide robust layers of intervention throughout the school year. Based on the within-year and the cross-year outcomes described above, similar trend data is anticipated. Additional outcome and impact data for CIS selection, EBP implementation, and fidelity will be discussed in upcoming submissions.

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

YES

If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

Implementation of the model is progressing as planned, and sites have met the implementation requirements for Phases 1 and 2. Outcome data that appear in Section A indicate that the model is positively influencing graduation trajectories and reducing student risk. Implementation Survey responses from SSIP site leadership team members suggest strong belief in the model and adequate understanding of model components. Seventy-two percent respondents said they believe that the SSIP will improve graduation rates of their students with disabilities, 74% responded that the teaming process of the SSIP has been beneficial professionally, 60% responded that the EWS, ABC data analysis, and CIS implementation has benefitted students.

No substantive changes to the SSIP model implementation will occur and the BSE intends to continue implementation as designed.

Section C: Stakeholder Engagement

Description of Stakeholder Input

In addition to the stakeholder input described in the Stakeholder Engagement, Parent Members Engagement, Activities to Improve Outcomes for Children with Disabilities, and Soliciting Public Input sections of the Introduction, a visual representation of PA's SSIP stakeholder involvement process can be found at the link below.

https://www.pattan.net/CMSPages/GetAmazonFile.aspx?path=~\pattan\media\materials\misc\pa-voice-of-stakeholders_visual-rep_1.pdf&hash=59879a5a04babd0beaf7615166b0ac0e867a11546a43d1f81538be629aaa2f12

Stakeholder input was also obtained when revising baseline and targets, as described in Section A under the subsection entitled "Provide a description of the subset of the population from the indicator".

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

Stakeholders at all learning sites, including families, youth, and practitioners, engaged in activities focused on Phase 1 and Phase 2 SSIP implementation planning including meetings and forums, using both in-person and virtual modes. Feedback from local leadership teams and PaTTAN consultants were particularly valuable in refining and enhancing the model for continued implementation.

The BSE also continued collaboration with formal advisory groups through regular meetings with SEAP, and semi-annual meetings with the PDE Collaborative Work Group to examine SSIP evaluation questions and outcomes. The BSE also continued collaboration with national OSEP-funded partners, including NCSI, NTACT:C, and IDC. BSE uses multiple resources recommended by NCSI, including the Leading by Convening: A Blueprint for Authentic Engagement publication. PaTTAN consultants and BSE staff continue to participate in monthly virtual meetings with the IDC SSIP Data Quality Peer Group to address key topics related to SSIP implementation, sustainability, and scale-up plans, including data collection and stakeholder input. These collaborations will continue throughout the next five years of SSIP implementation.

There is a continuous focus on building capacity of families to support improved outcomes for students with disabilities. PaTTAN has an active family engagement initiative that promotes equitable partnerships among schools, families, and communities to advance student achievement. An extensive collection of resources designed to increase capacity of diverse groups of parents, including information specific to the SSIP, is available at https://www.pattan.net/Graduation-Post-Secondary-Outcomes/State-Systemic-Improvement-Plan-1/SSIP-Resources-for-Families .

The BSE and PaTTAN incorporate information about the SPP/APR, including implementation activities and performance on targets, at the state's major annual conferences, including 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, including the SSIP.

The continued partnership with HUNE to serve Hispanic students with disabilities and their families included the 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. Sites used the "Are You On-Track for Graduation? Check your A-B-C's" checklist for students, the "Educator Toolkit", and "Family Toolkit". Sites also used "The ABCs of Equity" to affirm racial, cultural, and linguistic identities to foster positive outcomes for marginalized students. Stakeholders and families continue to access the "Insightful Classroom Tips and Strategies Amplified by Student Voices" resource, which offers practical tips and strategies for educators, incorporating valuable input from students. New to 2023, HUNE developed a family engagement publication disseminating essential information about connecting families and programs. Stakeholders, including SEAP, families, and SWDs informed the development and review of each of these materials. HUNE posts all SSIP-related resources on their websites in both English and Spanish. All HUNE Youth Program seniors enrolled in SSIP sites graduated.

Learning Site administrators completed an "Administrator Community Survey" to identify common topics for future professional learning community sessions focused on SSIP efforts. As reported earlier, learning sites completed an "SSIP Implementation Survey" to provide internal stakeholder input to inform current and future implementation activities.

On-going work with SEAP and enhanced communication and opportunities for collaboration with PEAL, HUNE, and other stakeholder groups has been planned. Opportunities for receiving feedback on improvement strategies and evaluating progress are being incorporated into major BSE-sponsored conferences. Stakeholder input informs resource revisions, BSE newsletters, and ongoing dissemination efforts on all SPP/APR initiative, including the SSIP.

Were there any concerns expressed by stakeholders during engagement activities? (yes/no)

NO

Additional Implementation Activities

List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.

Not applicable.

Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR.

Not applicable.

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

Implementation of the SSIP in the four cyber school sites has been successful but continues to be challenging. The cyber school learning sites serve thousands of students with disabilities across the Commonwealth. These students make up over 59% of the SSIP population. Systematic tracking of students is difficult because students are highly transient and do not remain in cyber charters for the same length of time that students spend in traditional school settings. Students transfer in and out of different cyber schools and to and from brick-and-mortar schools at an unusually high rate. Moreover, the unique course structures and grading frameworks for these sites makes ABC data difficult to capture. Students have broad flexibility in the type and number of academic courses and elective courses in which they enroll during a school year, quarter, or semester.

For example, a student may be enrolled in only English/Language Arts courses and not in mathematics courses or restrict their enrollment to elective courses at any given time. Furthermore, although all cyber charter schools monitor attendance with the EWS, each measures attendance differently (e.g., login time, completed classwork, synchronous sessions, asynchronous sessions, etc.). Although attendance rates are calculated in the system, attendance may not be defined the same way across learning sites, thus making comparisons difficult. Additionally, instructional models and methodology are also widely variable across each site, including levels of intervention, intensity, and duration. Finally, behavioral data cannot be measured, tracked, and analyzed in the same ways as during in-person instruction in brick-and-mortar schools. Over time, these factors may impact EWS implementation, CIS delivery, and ultimately graduation trajectories for students with disabilities. BSE continues to solicit ideas and support targeting cyber school interventions to address these challenges these variables. It appears that Pennsylvania may be the only state that includes cyber schools in its SSIP.

Provide additional information about this indicator (optional).

PaTTAN Consultants, BSE Staff and SSIP partners presented and participated in multiple professional conferences related to SSIP implementation and graduation outcomes for students with disabilities on Pennsylvania, including:

- 2023 PA Department of Education (PDE) Conference -- Graduation for All Students: PA's State Systemic Improvement Plan (SSIP) Can Help – March 2023 – Hershey, PA;
- Special Education Advisory Panel (SEAP) – Highlights of State Systemic Improvement Plan (SSIP) – April 2023 – Harrisburg, PA;
- 2023 IDEA Data Center (IDC) Interactive Institute – SSIP Coordinator participated in a panel discussion sharing PA's progress of SSIP implementation – June 2023 – Charlotte, NC;
- 2023 National Autism Conference – August 2023 – State College, PA —Poster session on SSIP; and
- 2023 PA Community of Practice Transition Conference -- Graduation for All Students: PA's State Systemic Improvement Plan (SSIP) Can Help – August 2023 – State College, PA.

SSIP-focused content was embedded in multi-series professional development sessions offered by PaTTAN, including:

- Principals Understanding how to Lead Special Education (PULSE)- Fall 2022; Winter 2023; Summer 2023; and
- SSIP Administrators Professional Learning Community - Fall 2022; Winter 2023; Spring 2023.

In April 2023, PaTTAN began publishing a bimonthly SSIP newsletter called, "The Analysis" which provides updates about SSIP implementation and outcomes, resources on CIS and related EBP, upcoming PD opportunities, information about HUNE and other partners, and resources for stakeholder engagement.

17 - Prior FFY Required Actions

None

17 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.

The State revised its targets for this indicator, and OSEP accepts that/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:

Dr. Carole L. Clancy

Title:

Bureau Director of Special Education

Email:

caclancy@pa.gov

Phone:

17178031811

Submitted on:

04/24/24 3:17:11 PM

Determination Enclosures

RDA Matrix

Pennsylvania
2024 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
82.50%	Meets Requirements

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	20	16	80.00%
Compliance	20	17	85.00%

(1) For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2024: Part B."

2024 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment (2)	Grade 4	93%	0
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	87%	0
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	30%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	91%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	32%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	93%	1

Math Assessment Elements

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4	93%	0
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	87%	0
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	45%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	92%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	28%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	94%	1

(2) Statewide assessments include the regular assessment and the alternate assessment.

Exiting Data Elements

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	12	2
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	88	2

**When providing exiting data under section 618 of the IDEA, States are required to report on the number of students with disabilities who exited an educational program through receipt of a regular high school diploma. These students meet the same standards for graduation as those for students without disabilities. As explained in 34 C.F.R. §300.102(a)(3)(iv), in effect June 30, 2017, "the term regular high school diploma means the standard high school diploma awarded to the preponderance of students in the State that is fully aligned with State standards, or a higher diploma, except that a regular high school diploma shall not be aligned to the alternate academic achievement standards described in section 1111(b)(1)(E) of the ESEA. A regular high school diploma does not include a recognized equivalent of a diploma, such as a general equivalency diploma, certificate of completion, certificate of attendance, or similar lesser credential."

2024 Part B Compliance Matrix

Part B Compliance Indicator (3)	**Performance (%)**	**Full Correction of Findings of Noncompliance Identified in FFY 2021** (4)	**Score**
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	0.00%	N/A	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	N/A	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	0.00%	N/A	2
Indicator 11: Timely initial evaluation	93.08%	NO	1
Indicator 12: IEP developed and implemented by third birthday	95.73%	YES	2
Indicator 13: Secondary transition	86.96%	YES	1
Timely and Accurate State-Reported Data	97.62%		2
Timely State Complaint Decisions	97.89%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			1
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	Yes, 2 to 4 years		

(3) The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2024_Part-B_SPP-APR_Measurement_Table.pdf

(4) This column reflects full correction, which is factored into the scoring only when the compliance data are >=5% and <10% for Indicators 4B, 9, and 10, and >=90% and <95% for Indicators 11, 12, and 13.

Data Rubric
Pennsylvania

FFY 2022 APR (1)
Part B Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1

APR Score Calculation

Subtotal	21
Timely Submission Points - If the FFY 2022 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	26

(1) In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 8/30/23	1	1	1	3
Personnel Due Date: 2/21/24	1	1	1	3
Exiting Due Date: 2/21/24	1	1	1	3
Discipline Due Date: 2/21/24	1	1	1	3
State Assessment Due Date: 1/10/24	1	1	1	3
Dispute Resolution Due Date: 11/15/23	1	1	1	3
MOE/CEIS Due Date: 5/3/23	1	0	1	2

618 Score Calculation

Subtotal	20
Grand Total (Subtotal X 1.23809524) =	24.76

(2) In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

Indicator Calculation

A. APR Grand Total	26
B. 618 Grand Total	24.76
C. APR Grand Total (A) + 618 Grand Total (B) =	50.76
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	52.00
D. Subtotal (C divided by Denominator) (3) =	0.9762
E. Indicator Score (Subtotal D x 100) =	97.62

(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.23809524.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2024 Submission

SPP/APR Data

1) Valid and Reliable Data - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

Part B 618 Data

1) Timely – A State will receive one point if it submits all ED*Facts* files or the entire E*MAPS* survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	**ED*Facts* Files/ E*MAPS* Survey**	**Due Date**
Part B Child Count and Educational Environments	C002 & C089	8/30/2023
Part B Personnel	C070, C099, C112	2/21/2024
Part B Exiting	C009	2/21/2024
Part B Discipline	C005, C006, C007, C088, C143, C144	2/21/2024
Part B Assessment	C175, C178, C185, C188	1/10/2024
Part B Dispute Resolution	Part B Dispute Resolution Survey in E*MAPS*	11/15/2023
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in E*MAPS*	5/3/2023

2) Complete Data – A State will receive one point if it submits data for all files, permitted values, category sets, subtotals, and totals associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. The data submitted to ED*Facts* aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in E*MAPS*. State-level data include data from all districts or agencies.

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection

Dispute Resolution

IDEA Part B

Pennsylvania

School Year: 2022-23

A zero count should be used when there were no events or occurrences to report in the specific category for the given reporting period. Check “Missing’ if the state did not collect or could not report a count for the specific category. Please provide an explanation for the missing data in the comment box at the top of the page.

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	176
(1.1) Complaints with reports issued.	95
(1.1) (a) Reports with findings of noncompliance	57
(1.1) (b) Reports within timelines	90
(1.1) (c) Reports within extended timelines	3
(1.2) Complaints pending.	10
(1.2) (a) Complaints pending a due process hearing.	5
(1.3) Complaints withdrawn or dismissed.	71

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	458
(2.1) Mediations held.	183
(2.1) (a) Mediations held related to due process complaints.	11
(2.1) (a) (i) Mediation agreements related to due process complaints.	5
(2.1) (b) Mediations held not related to due process complaints.	172
(2.1) (b) (i) Mediation agreements not related to due process complaints.	121
(2.2) Mediations pending.	40
(2.3) Mediations withdrawn or not held.	235

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	941
(3.1) Resolution meetings.	707
(3.1) (a) Written settlement agreements reached through resolution meetings.	101
(3.2) Hearings fully adjudicated.	54
(3.2) (a) Decisions within timeline (include expedited).	13
(3.2) (b) Decisions within extended timeline.	41
(3.3) Due process complaints pending.	137
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	750

Section D: Expedited Due Process Complaints (Related to Disciplinary Decision)

(4) Total number of expedited due process complaints filed.	48
(4.1) Expedited resolution meetings.	27
(4.1) (a) Expedited written settlement agreements.	8
(4.2) Expedited hearings fully adjudicated.	5
(4.2) (a) Change of placement ordered	1
(4.3) Expedited due process complaints pending.	2
(4.4) Expedited due process complaints withdrawn or dismissed.	41

State Comments:

Errors:
Please note that the data entered result in the following relationships which violate edit checks:

State error comments:

This report shows the most recent data that was entered by:
Pennsylvania
These data were extracted on the close date:
11/15/2023

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2024 will be posted in June 2024. Copy and paste the link below into a browser to view.

https://sites.ed.gov/idea/how-the-department-made-determinations/

Final Determination Letter

June 21, 2024

Honorable Khalid Mumin
Secretary of Education
Pennsylvania Department of Education
607 South Drive, 3rd Floor – West Wing
Harrisburg, PA 17120

Dear Secretary Mumin:

I am writing to advise you of the U.S. Department of Education's (Department) 2024 determination under Section 616 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Pennsylvania meets the requirements and purposes of Part B of the IDEA. This determination is based on the totality of Pennsylvania's data and information, including the Federal fiscal year (FFY) 2022 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Pennsylvania's 2024 determination is based on the data reflected in its "2024 Part B Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for each State and Entity and consists of:

(1) a Compliance Matrix that includes scoring on Compliance Indicators and other compliance factors;

(2) a Results Matrix that includes scoring on Results Elements;

(3) a Compliance Score and a Results Score;

(4) an RDA Percentage based on both the Compliance Score and the Results Score; and

(5) the State's or Entity's Determination.

The RDA Matrix is further explained in a document, entitled "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2024: Part B" (HTDMD).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making determinations in 2024, as it did for Part B determinations in 2014-2023. (The specifics of the determination procedures and criteria are set forth in the HTDMD document and reflected in the RDA Matrix for Pennsylvania).

In making Part B determinations in 2024, OSEP continued to use results data related to:

(1) the participation and performance of CWD on the most recently administered (school year 2021-2022) National Assessment of Educational Progress (NAEP), as applicable (For the 2024 determinations, OSEP using results data on the participation and performance of children with disabilities on the NAEP for the 50 States, the District of Columbia, and Puerto Rico. OSEP used the available NAEP data for Puerto Rico in making Puerto Rico's 2024 determination as it did for Puerto Rico's 2023 determination. OSEP did not use NAEP data in making the BIE's 2024 determination because the NAEP data available for the BIE were not comparable to the NAEP data available for the 50 States, the District of Columbia, and Puerto Rico; specifically, the most recently administered NAEP for the BIE is 2019, whereas the most recently administered NAEP for the 50 States, the District of Columbia, and Puerto Rico is 2022.)

(2) the percentage of CWD who graduated with a regular high school diploma; and

(3) the percentage of CWD who dropped out.

For the 2024 IDEA Part B determinations, OSEP also considered participation of CWD on Statewide assessments (which include the regular assessment and the alternate assessment). While the participation rates of CWD on Statewide assessments were a factor in each State or Entity's 2024 Part B Results Matrix, no State or Entity received a Needs Intervention determination in 2024 due solely to this criterion. However, this criterion will be fully incorporated beginning with the 2025 determinations.

You may access the results of OSEP's review of Pennsylvania's SPP/APR and other relevant data by accessing the E*MAPS* SPP/APR reporting tool using your Pennsylvania-specific log-on information at https://emaps.ed.gov/suite/. When you access Pennsylvania's SPP/APR on the site, you will find, in applicable Indicators 1 through 17, the OSEP Response to the indicator and any actions that Pennsylvania is required to take. The actions that Pennsylvania is required to take are in the "Required Actions" section of the indicator.

It is important for you to review the Introduction to the SPP/APR, which may also include language in the "OSEP Response" and/or "Required Actions" sections.

You will also find the following important documents in the Determinations Enclosures section:

(1) Pennsylvania's RDA Matrix;

(2) the HTDMD link;

(3) "2024 Data Rubric Part B," which shows how OSEP calculated Pennsylvania's "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and

(4) "Dispute Resolution 2022-2023," which includes the IDEA Section 618 data that OSEP used to calculate the Pennsylvania's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, Pennsylvania's 2024 determination is Meets Requirements. A State's or Entity's 2024 RDA Determination is Meets Requirements if the RDA Percentage is at least 80%, unless OSEP has imposed programmatic Specific Conditions on the State's or Entity's last three IDEA Part B grant awards (for FFYs 2021, 2022, and 2023), and those Specific Conditions are in effect at the time of the 2024 determination.

IDEA determinations provide an opportunity for all stakeholders to examine State data as that data relate to improving outcomes for infants, toddlers, children, and youth with disabilities. The Department encourages stakeholders to review State SPP/APR data and other available data as part of the focus on improving equitable outcomes for infants, toddlers, children, and youth with disabilities. Key areas the Department encourages State and local personnel to review are access to high-quality intervention and instruction; effective implementation of individualized family service plans (IFSPs) and individualized education programs (IEPs), using data to drive decision-making, supporting strong relationship building with families, and actively addressing educator and other personnel shortages.

For 2025 and beyond, the Department is considering three criteria related to IDEA Part B determinations as part of the Department's continued efforts to incorporate equity and improve results for CWD. First, the Department is considering as a factor OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). This factor would be reflected in the determination for each State and Entity through the "longstanding noncompliance" section of the Compliance Matrix beginning with the 2025 determinations. In implementing this factor, the Department is also considering beginning in 2025 whether a State or Entity that would otherwise receive a score of Meets Requirements would not be able to receive a determination of Meets Requirements if the State or Entity had OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). Second, the Department is considering as potential additional factors the improvement in proficiency rates of CWD on Statewide assessments. Third, the Department is considering whether and how to continue including in its determinations criteria the participation and proficiency of CWD on the NAEP.

For the FFY 2023 SPP/APR submission due on February 1, 2025, OSEP is providing the following information about the IDEA Section 618 data. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix and States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform for Part B SPP/APR Indicators 3, 5, and 6 (as they have in the past). Under EDFacts Modernization, States and Entities are expected to submit high-quality IDEA Section 618 Part B data that can be published and used by the Department as of the due date. States and Entities are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States and Entities to take one of the following actions for all business rules that are triggered in the EDPass or EMAPS system prior to the applicable due date: 1) revise the uploaded data to address the edit; or 2) provide a data note addressing why the data submission triggered the business rule. States and Entities will be unable to submit the IDEA Section 618 Part B data without taking one of these two actions. There will not be a resubmission period for the IDEA Section 618 Part B data.

As a reminder, Pennsylvania must report annually to the public, by posting on the State educational agency's (SEA's) website, the performance of each local educational agency (LEA) located in Pennsylvania on the targets in the SPP/APR as soon as practicable, but no later than 120 days after Pennsylvania's submission of its FFY 2022 SPP/APR. In addition, Pennsylvania must:

(1) review LEA performance against targets in the State's SPP/APR;

(2) determine if each LEA "meets the requirements" of Part B, or "needs assistance," "needs intervention," or "needs substantial intervention" in implementing Part B of the IDEA;

(3) take appropriate enforcement action; and

(4) inform each LEA of its determination.

Further, Pennsylvania must make its SPP/APR available to the public by posting it on the SEA's website. Within the upcoming weeks, OSEP will be finalizing a State Profile that:

(1) includes Pennsylvania's determination letter and SPP/APR, OSEP attachments, and all State or Entity attachments that are accessible in accordance with Section 508 of the Rehabilitation Act of 1973; and

(2) will be accessible to the public via the ed.gov website.

OSEP appreciates Pennsylvania's efforts to improve results for children and youth with disabilities and looks forward to working with Pennsylvania over the next year as we continue our important work of improving the lives of children with disabilities and their families. Please contact your OSEP State Lead if you have any questions, would like to discuss this further, or want to request technical assistance.

Sincerely,

Valerie C. Williams

Valerie C. Williams
Director
Office of Special Education Programs

cc: Pennsylvania Director of Special Education