**State Performance Plan / Annual Performance Report: Part B**

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

**For reporting on   
FFY 2019**

**Pennsylvania**

U.S. Department of Education seal

**PART B DUE   
February 1, 2021**

**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**

**Additional information related to data collection and reporting**

During the 2019-20 school year, Pennsylvania, like all other states and territories, experienced the COVID-19 pandemic. To protect the health and safety of students and communities during the pandemic, on March 13, 2020 Governor Wolf announced that all K-12 schools in the commonwealth would be closed for 10 days, beginning March 16. The Governor directed the Pennsylvania Department of Education (PDE) and all Intermediate Units (IUs) to support local education agencies (LEAs) with continuation of learning plans for students. As the pandemic worsened, on April 9 the Governor announced that all schools would remain closed for the rest of the 2019-20 academic year. Schools were strongly encouraged to provide continuity of education for all students in the most appropriate and accessible ways possible. PDE secured resources to assist schools, including those not currently offering online platforms, those requiring additional technology support, and those that may rely on traditional methods to continue educating students. PDE developed an extensive website of resources to support schools and assist LEAs in mitigating the impact of the pandemic. This information is available at education.pa.gov/COVID19. Daily updates made across the COVID-19 website are also accessible at that site. In addition, the Pennsylvania Training and Technical Assistance Network (PaTTAN) has developed a robust resource website to support continuity of education of students with disabilities which includes asynchronous supports, synchronous supports for educators and families. PaTTAN also offers live coaching supports for educators and families through virtual office hours. Additional topical conferences were added to support COVID mitigation efforts. The availability of online access resulted in high attendance, and significant increases in attendance in all regularly held statewide conferences.  
   
During the school closures, the Bureau of Special Education (BSE) continued to fulfill its general supervision of LEAs through monitoring, complaint management, and dispute resolution. Where necessary, system modifications were implemented for the final quarter of FFY 2019. The BSE has operated at full capacity, virtually managing cyclical monitoring and review of SPP/APR indicators, verification of corrective action, complaint resolution, and special education plan review. The BSE has worked collaboratively with families, educators, students, and other key stakeholder groups, including the Special Education Advisory Panel (SEAP), the Parent Education and Advocacy Leadership (PEAL) Center, Hispanos Unidos para Ninos Excepcionales (HUNE) and the Arc of Pennsylvania. The Bureau Director participated in several webinars and podcasts to provide families and other stakeholders with pertinent information about special education services during the pandemic. BSE and PaTTAN created and/or modified professional development, technical assistance activities, and mechanisms to shift from in-person to virtual delivery methods that would continue to ensure that service providers have the skills to effectively deliver services that improve results for students with disabilities.   
  
The BSE developed a variety of resources to support schools and families during the pandemic, including a partnership with public television to deliver instructional programming to students through Public Broadcasting System member stations across the state. In addition, over $15 million ($5 million in IDEA funds and $10 from the Governor's Emergency Education Relief Funds) was awarded to local educational agencies to provide enhanced synchronous (real-time) instruction to bolster remote services and supports for students with complex needs, and to provide services and supports to students with disabilities who experienced a loss in skills and behavior and/or a lack of progress due to the mandatory school closures. The awards were needs-based to address the needs of students with complex disabilities in a remote environment.  
  
The BSE has published guidance documents, FAQs, and links to federal resources specific to COVID. This information can be found on PDE’s website at https://www.education.pa.gov/K-12/Special%20Education/Pages/default.aspx.   
  
Additional information pertaining to data collection and reporting affected by the COVID-19 pandemic is included within specific indicators in this report.

**Number of Districts in your State/Territory during reporting year**

678

**General Supervision System**

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

School Age Programs (Bureau of Special Education)  
   
In 2019-20, there were approximately 1.72 million students enrolled in Pennsylvania’s public schools, with 17.8% of these students receiving special education. The state has 500 school districts and 178 charter schools. These entities serve as the responsible Local Education Agency (LEA) for the provision of a Free Appropriate Public Education (FAPE) to students with disabilities. The PDE provides general supervision of all public schools, school districts, and other public education agencies within the state.  
  
Pennsylvania fulfills its general supervision requirements for comprehensive, effective monitoring and dispute resolution, including timely identification and correction of noncompliance, as described below.  
  
Monitoring  
  
The BSE monitors all school districts and charter schools on a six-year cycle. County prisons and detention facilities, as well as other facilities where children are placed by a public entity, e.g., residential treatment facilities and private residential rehabilitation institutions, are also monitored on a six-year cycle. State juvenile facilities and state correctional institutions are monitored on a three-year cycle.  
  
In addition to cyclical monitoring, the BSE also conducts focused monitoring based on data and recommendations from the SEAP and other stakeholder groups. Target monitoring of any LEA may also occur when information from sources such as complaint or other dispute resolution data, suggests a systemic concern that warrants review.  
  
The BSE also conducts reviews when analysis of 618 or other SPP/APR data indicates potential noncompliance. A description of how BSE identifies and corrects noncompliance for specific SPP/APR indicators is included within each of those indicator sections of this report.  
  
When findings of noncompliance are issued, the LEA is informed of the regulation violated (linked to federal and state regulations) and must develop a Corrective Action Verification Plan (CAVP) that is approved by the BSE. The BSE monitors implementation of the CAVP through on-site and virtual monitoring that includes review of revised policies and procedures, and correction of practices as evidenced by updated data in a representative sample of student files. All corrective action must be completed within one year of notification of a finding of noncompliance.  
  
In accordance with OSEP Memorandum 09-02, the BSE’s procedures require systemic correction of policies, procedures and practices, as well as verification of correction through file reviews. Updated data must demonstrate 100% compliance with regulatory requirements prior to closure of corrective action. The BSE also requires student-specific corrective action for all citations of noncompliance where corrective action can be implemented.  
  
Should an LEA fail to correct noncompliance, BSE has clearly defined enforcement procedures, as described in the Basic Education Circular titled Special Education Compliance.  
  
The BSE’s monitoring system is aligned with OSEP’s Results Driven Accountability. Although a major focus of the state’s current cyclical monitoring continues to be ensuring compliance with regulatory requirements, BSE’s system also reviews outcome data and an Educational Benefit Review that evaluates if students are deriving benefit from their educational programs.  
  
Dispute Resolution  
  
The IDEA requires states to establish systems for state complaints, mediation, resolution processes, and due process complaints.  
  
State Complaints  
  
The BSE has effective procedures for investigating and resolving complaints filed under the IDEA. If noncompliance is determined through a complaint investigation, the BSE monitors to ensure correction of systemic and student specific noncompliance.  
  
Mediation  
  
The Office for Dispute Resolution (ODR) contracts with highly trained, independent mediators to provide mediation services. In Pennsylvania, the vast majority of mediations result in agreements.  
  
Due Process Complaints  
  
The ODR uses trained, impartial hearing officers to conduct hearings in accordance with federal requirements. In Pennsylvania, the vast majority of due process complaints are resolved prior to full adjudication. Pennsylvania has procedures in place to review, identify and correct child-specific noncompliance identified in a hearing decision, and correct policies, procedures and practices that may affect other students with disabilities within the LEA.  
  
Resolution Process  
  
The resolution meeting is an additional opportunity for parties to resolve disputes. The ODR oversees timely implementation of the process. Any compliance concerns are addressed by the BSE. While not required by federal regulations, the ODR provides additional resources to assist parents and LEAs to resolve disputes. These include IEP and Resolution Meeting Facilitation, Hearing Officer Settlement Conferences, the Special Education Consultline, and the Consultline Call Resolution Process. Information about these supports and systems can be found at odr-pa.org.  
  
   
   
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)   
  
Preschool Early Intervention (EI) programs participate in a verification visit every four years. There are seven areas reviewed during the verification visit that cover the components of the EI program. Verification visits include the following activities: data reviews, review of policies, individual child record reviews and observations of service delivery. Following the verification visits, local programs develop Quality Enhancement Plans (QEPs) that focus on the correction of noncompliance, as well as activities to enhance program quality to improve outcomes for children and families and to improve inclusive practices. Bureau of Early Intervention Services and Family Support (BEISFS) staff continue to validate that all areas of noncompliance identified during the verification visits are corrected within a year. Additional onsite visits from BEISFS staff may occur at the discretion of BEISFS if during the verification cycle there is a significant decrease in program performance, or if individual or systemic concerns arise.  
  
PA's determination process uses data from sources such as the SPP/APR indicators, annual family survey, complaints, and quality of data entered into the statewide PELICAN-EI information system. Based on the determination results, local EI programs update their QEP to reflect improvement activities. The determination is also used to identify and provide differentiated levels of support to local programs.  
  
PA also uses a comprehensive data management system that enables the review of individual child data as well as statewide data. The data management system supports referral information, service coordination activities, planning information, financial management, quality measures and other reporting needs for the BEISFS. This information system generates documents (Evaluation and Plan Documents) and the information contained in these documents is used to create reports to manage the program. Rigorous analysis of the data by staff on a monthly, quarterly and annual basis allows BEISFS to ensure data driven decision making for quality improvement.  
  
PA ensures that a complaint management process is implemented. BEISFS staff reviews data from complaint investigations, mediations and due process hearings to improve the EI system. Trends are analyzed, training needs are identified, and improvement strategies are implemented.  
  
Each Preschool Early Intervention program is assigned a BEISFS advisor. The advisors serve as primary contacts to Preschool EI programs and are responsible for addressing budget issues, compliance issues, complaint issues, policy and procedural requirements and overall program performance.

**Technical Assistance System**

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

School Age Programs (Bureau of Special Education)  
   
PaTTAN is designed to support the efforts and initiatives of the PDE and BSE, and build capacity of Intermediate Units (IUs) and LEAs to serve students receiving special education services. Most of the training and technical assistance (TA) provided is tied directly to federal regulatory requirements. PaTTAN provides a continuum of evidence-based TA designed to help LEAs improve student outcomes. PaTTAN provides support to schools, families, educators, students, and administrators through multiple statewide initiatives.  
   
There are three PaTTAN locations, one each in the eastern (PaTTAN-East), central (PaTTAN-Harrisburg), and western (PaTTAN- Pittsburgh) areas of the state. In addition to the three PaTTAN offices, the BSE also 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 technical assistance functions. Further, because Pennsylvania has established regional PaTTAN offices, training and TA is localized and highly customized through ongoing collaboration between PaTTAN and IU consultants and LEAs.   
   
Under IDEA, there are two major components that the BSE relies on PaTTAN to provide information and resources around TA. The first component is the IDEA grant application. The second component is support for SPP/APR indicators, including the State Systemic Improvement Plan (SSIP). PaTTAN and IU consultants provide documentation of training and TA activities, including on-site and virtual TA with participating SSIP learning sites.   
   
The PaTTAN Educational Consultants, IU TaCs, and the BSE work collaboratively to develop improvement plans needed by LEAs as the result of state monitoring. Noncompliance is address through customized TA and professional development activities.   
   
The BSE’s current TA system has the personnel needed to effectively support the SPP/APR and SSIP. In addition, the system has the advantage of working in collaboration with multiple stakeholders, bureaus and programs within the PDE, and other state and national agencies.   
   
Each year, statewide training and TA plans associated with each broad initiative 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 continues to be one of the most important mechanisms for evaluating the effectiveness and efficiency of technical assistance.  
   
Pennsylvania's Statewide System of Support (PaTTAN and IU TaCs) serves as both Pennsylvania’s Technical Assistance (TA) and professional development systems. This TA, based upon current research and evidence-based practices, is aligned with the principles of OSEP’s RDA.  
   
Pennsylvania’s Statewide System of Support is designed to provide a continuum of timely TA to LEAs, including:  
   
 • Educational Consultants: PaTTAN has professional staff with expertise in every aspect of special education, including the state’s SSIP, autism, blindness/visual impairment, deafness-hard of hearing, deaf-blindness, intellectual disabilities, special education leadership, procedural safeguards, paraprofessionals, behavior, literacy, mathematics, speech, school psychology, secondary transition, regulations, family engagement, inclusive practices, Multi-Tiered System of Support, and assistive technology.   
   
 • Conferences, Institutes, and Forums: Statewide conferences, institutes, and forums are offered each year for stakeholders, including families, educators, students and others.   
   
 • On-site and virtual Guided Practice Technical Assistance: On-site and virtual implementation support that includes intensive coaching and mentoring is routinely included as part of TA.   
   
 • Collaboration with other agencies and Institutions of Higher Education (IHE): Pennsylvania's Statewide System of Support works in collaboration with agencies and multiple IHEs to ensure timely delivery of high quality evidence-based TA and supports to LEAs.   
   
 • Webinars and face-to-face training sessions: PaTTAN offers webinars and on-site training and TA to interested stakeholders. Webinars are closed-captioned and transcribed, and posted on the PaTTAN website for later viewing or reading.  
   
 • Federal and state regulations: PaTTAN offers multiple TA opportunities throughout the year to support the implementation of federal and state regulations, including procedural safeguards.  
   
 • Website resources: PaTTAN maintains a robust website (www.pattan.net) featuring training opportunities, resources, and publications that address relevant topics, and provides access to other educational partners supporting student learning and achievement. The website also features SSIP resources in English and Spanish, publications, and contact information for LEAs, families, students with disabilities, and community agencies.  
   
Pennsylvania has in place the Multi-Tiered System of Support (MTSS) Initiative which incorporates best practices in academics and behavior. The MTSS Academics model aligns Evidence-Based Practices (EBPs) in Mathematics, Literacy, Science, Technology, Engineering and Mathematics (STEM), Universal Design for Learning, and supports for English Learners. The MTSS Behavior model incorporates best practices in culturally responsive positive behavioral practices to address the social emotional learning needs of students. Taken together, MTSS Academics and Behavior serve as a statewide model for comprehensive school improvement through the utilization of a problem-solving model to address system wide data analysis matched to needs of the LEA, school, and classroom levels.  
   
Autism College and High School Integration for Educational and Vocational Excellence (AACHIEVE): This project focuses on supporting college bound students on the autism spectrum as they transition to higher education. As part of PDE/BSE’s commitment to the project Dr. Thierfeld Brown of Yale University, and PaTTAN staff work with high schools and collaborate with several local colleges/universities to create a successful framework for college access and supporting successful degree completion.  
   
PaTTAN provides TA to LEAs and support to students with disabilities through its Accessible Instructional Materials and Assistive Device Short-Term Loan programs. PaTTAN offers ongoing TA opportunities for both programs through workshops, guided practice, seminars, statewide conferences, distance learning, video conferences, and online courses.   
   
For all initiatives and TA, data are collected throughout to determine the impact of services and to ensure improved student outcomes.   
   
   
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. Local Preschool EI programs are the primary recipients of EITA training and technical assistance. EITA is part of PaTTAN, which provides training and technical assistance for programs serving school-age children and their families.   
  
EITA provides both statewide and regional training initiatives that are developed through the analysis of statewide data, including program verification visits and determination results, state and federal requirements, relevant research related to evidence based early intervention practices, and planning with BEISFS staff.   
  
EITA also provides assistance in the development of QEPs developed annually with each Preschool Early Intervention program. The QEP focuses on specific programmatic changes or outcomes and includes information on how change will be measured.

**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 students with disabilities.**

School Age Programs (Bureau of Special Education)  
   
The BSE, through Pennsylvania’s Statewide System of Support, has consistently demonstrated positive impact and outcomes for students with disabilities. The system has expertise in Results Driven Accountability, and has the personnel needed to effectively support the SPP/APR/SSIP.  
   
This system of support serves as the state's technical assistance and professional development (PD) systems. The PD for service providers delivered by PaTTAN and IU TaCs is based upon current research and EBPs. Each initiative develops a multi-year plan that demonstrates how the PD activities will equip service providers with effective skills to deliver services that improve results for students with disabilities.  
   
PD includes, but is not limited to:  
   
 • PA Standards Aligned System (SAS): SAS is a comprehensive school improvement framework that, when implemented with fidelity, assists schools to improve outcomes for all students. More information about SAS is located at http://pdesas.org/.  
   
 • Pennsylvania Deaf-Blind Project: This project provides targeted PD to service providers, families, and educators supporting infants, toddlers, and students with deaf-blindness.  
   
 • Middle School Success: The Path to Graduation (P2G): This current State Personnel Development Grant focuses on all students becoming college and career ready, and is aligned to the state's SSIP via regional teams that identify middle school students who are off-track for graduation. The grant builds capacity of LEAs to address academic and behavioral needs of middle school students with disabilities, particularly those students identified with emotional disturbance.  
   
 • Community of Practice (CoP) on School-based Behavioral Health and the Pennsylvania Positive Behavior Support (PaPBS) network: Through PaTTAN, BSE convenes the CoP on School-based Behavioral Health which is comprised of multiple departments, agencies, and parent and advocacy groups.  
   
 • The Arc of Pennsylvania, Include Me From the Start is designed to promote and expand inclusive practices for students with the most significant disabilities. The Arc of Pennsylvania, in collaboration with PDE, BSE, and PaTTAN, works with student teams and families to provide training and on-site technical assistance. The focus is to implement a customized employment program for transition age students.  
   
 • Principals Understanding how to Lead Special Education (PULSE): This 30-hour course builds upon principals’ knowledge and skills to successfully support and implement services for students with disabilities. PULSE provides support in data practices, multi-tier systems of supports, legal literacy, and EBPs.  
   
 • Comprehensive Planning Tool: Pennsylvania’s regulations require a variety of plans, including plans for PD, technology, and special education. PDE’s online Comprehensive Planning Tool supports the process of identifying needs through root-cause analyses, develops strategies based on EBPs, and monitors implementation.  
   
 • Training Opportunities: PaTTAN provides a full array of PD and TA targeted to 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: PFP is designed to build the knowledge and skills of veteran and novice special education administrators to directly improve programming for students. The overarching goal of the PFP is to support special education directors/supervisors so that they will remain in the field of administration.  
   
 • Federal-State Regulations: PaTTAN works closely with the BSE to provide PD for Pennsylvania to comply with requirements under the IDEA and Chapters 14 and 711. These supports include PD linked to the SPP/APR indicators, development of compliant special education forms, student data collections, and the monitoring system.  
   
 • Assistive Technology and Accessible Instructional Materials: PaTTAN maintains a short-term loan library that offers a broad array of assistive technology devices. In addition, the PaTTAN Accessible Instructional Materials Center provides large print and Braille text materials. PaTTAN represents the PDE as the Ex-Officio Trustee with responsibility for managing and coordinating federal quota funds with the American Printing House for the Blind (APH) for purchase of text and educational supplies for students who are legally blind. PaTTAN also maintains an annual census of children from birth through 21 who are legally blind, and provides an annual report of eligible students to the APH.  
   
 • Secondary Transition: Several innovative resources have been developed to support students and their families prepare and plan for successful transition from school to adult life. Additional information can be found on Pennsylvania’s Secondary Transition website, https://www.secondarytransition.org.  
   
 • Website Resources: PaTTAN’s website (www.pattan.net) features training opportunities, resources, and publications supporting student learning and achievement. The website features SSIP resources, publications and contact information for LEAs, families, and community agencies.  
  
   
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)   
   
Pennsylvania’s professional development system through EITA focuses on supporting BEISFS in ensuring skilled, highly qualified early intervention personnel. The four core functions used to support the BEISFS include: Verification, Policy, Professional Development in Core Competencies, and Professional Development in EBPs.   
  
Verification Support is provided by EITA staff through participation in Preschool EI verification teams, training and technical assistance support to local EI programs based on verification needs and QEP, and targeted, intensive support to select programs based on the results of the verification process or program management data analysis.   
  
Policy Support is provided to BEISFS in development of policies to ensure high-quality EI services and assisting local programs in translating EI policies into practice. This is accomplished through: technical assistance in developing BEISFS policy documents & reports; development of statewide leadership activities; and policy related research and materials development.   
  
Support for professional development in EI core competencies is focused on ensuring 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. Family members are welcomed participants and trainers in professional development activities.  
  
Support for professional development in EI EBPs is focused on providing professional development activities to EI staff based on innovative EBPs, designed to enhance existing high-quality EI services. This is accomplished through: statewide and local training; online learning modules and webinars; and materials development and dissemination.   
  
The four core functions of EITA are supported through the use of the following strategies and business practices: building partnerships with state and local EI leadership; providing support to families by actively working to build family leaders; providing technical assistance that is informed by multiple forms of data; using the most current learning technologies to effectively reach our audiences; building partnerships with other Early Intervention and Early Childhood technical assistance agencies and organizations, such as connections to the school-age training and technical assistance network (PaTTAN); evaluating both the long and short-term impact of our activities; providing effective and efficient project management; and providing solutions that are responsive to identified needs.

**Stakeholder Involvement**

**The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.**

School Age Programs (Bureau of Special Education)  
   
The BSE has a long history of obtaining broad stakeholder input in developing plans and reports required by the IDEA. The state implemented a comprehensive process to gather stakeholder input on targets for the SPP/APR covering FFYs 2013-18. That process was described in Pennsylvania’s FFY 2013 Part B SPP/APR. The BSE regularly reviews the state’s performance with the SEAP to determine if revisions to targets are needed.  
   
BSE obtained stakeholder input from the state’s SEAP to establish targets for results indicators for FFY 2019. The panel normally meets face-to-face, and has also used webinar connections to ensure participation in discussions and decision making for stakeholders who are unable to travel to meetings. This practice was extended to all SEAP members as a result of restrictions put in place because of the COVID-19 pandemic, allowing the panel to continue to fulfill its obligation to advise the BSE.   
   
BSE has aligned targets in the current SPP/APR for Indicator 1 (Graduation Rates) and Indicator 3 (Participation and Performance in Statewide Assessments) with Pennsylvania's approved Consolidated State Plan for ESSA. Stakeholders have been informed concerning these required updates. See these Indicators for additional information on stakeholder involvement specific to the process followed for ESSA.  
   
  
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)   
   
Pennsylvania’s EI system has two primary stakeholder groups, one with a birth-5 year focus, the State Interagency Coordinating Council (SICC), and one with a 3-21 year focus, the Special Education Advisory Panel (SEAP). The Committee for Stakeholder Engagement (CSE), a workgroup of the SICC, focuses on the review of EI data and the impact of new policies on the coordination of the state's birth-5 EI system. The use of these groups allows BEISFS to gather statewide stakeholder input across all ages and across all geographic regions of Pennsylvania.  
  
All stakeholder groups typically meet face-to-face, but use webinar connections to ensure that stakeholders who are unable to travel to meetings can still participate in discussions and decision making. The familiarity with meeting online allowed both groups to continue to advise the EI program throughout the COVID pandemic restrictions.   
  
Membership in the SICC and CSE is composed of parents (as co-chairs), local program administrators, EI service delivery agencies, Department of Health, legislators, Children’s Health Insurance Program (CHIP), American Academy of Pediatrics, higher education, and a representative of Pennsylvania’s Education for Children and Youth Experiencing Homelessness Program.   
  
To gather information from internal stakeholders, BEISFS typically convenes bi-monthly EI leadership meetings with administrators of local EI programs. In order to gather input, communicate policy changes, and problem solve issues related to the impact of the COVID pandemic on EI services, additional meetings were held starting in March 2020. From March through June 2020, five EI leadership stakeholder meetings were held.   
  
In December 2019, BEISFS and EITA staff met with both SEAP and the SICC to review annual APR data and to discuss potential targets for FFY 2019 APR indicators. During the meetings, staff led a discussion on the historical data and targets for each indicator. Current APR indicator data was presented and potential targets for each indicator were reviewed. SEAP and SICC members made recommendations for targets for each indicator. These recommendations were reviewed by BEISFS and this input was used to finalize FFY 2019 targets.

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

NO

**Reporting to the Public**

**How and where the State reported to the public on the FFY18 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 2018 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, including any revision if the State has revised the SPP that it submitted with its FFY 2018 APR in 2020, is available.**

School Age Programs (Bureau of Special Education)  
   
Pennsylvania complies with all federal requirements for reporting to the public. The BSE publishes annual, online Special Education Data Reports that illustrate the performance of each LEA in meeting SPP/APR targets. Reporting on FFY 2018 LEA performance was completed in accordance with 34 CFR §300.602(b)(1)(i)(A). These reports are located at the following website: https://penndata.hbg.psu.edu/Public-Reporting/SEDR-Reports.  
  
The FFY 2018 SPP/APR can be located at the following websites: https://www.education.pa.gov/K-12/Special%20Education/IDEA/Pages/StatePerformancePlan.aspx and https://www.pattan.net/Legal/Federal-Laws-and-Regulations/PA-Laws-and-Regulations/The-State-Performance-Plan-Annual-Performance-Repo .  
   
  
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)   
  
Pennsylvania will continue to comply with all federal requirements for annual reporting to the public. Data from the SPP/APR are available on a statewide level and for each Preschool Early Intervention program.   
  
An announcement will be 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 currently includes FFY 2005 through FFY 2018 data for each Preschool EI program and will be updated to include the FFY 2019 data after, but no later than 120 days from submission of the SPP/APR. Information can be found at the website: https://penndata.hbg.psu.edu/Public-Reporting/Early-Intervention. The dashboard also includes a link to a copy of Pennsylvania's SPP/APR on the page for each Preschool EI program.

## Intro - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP’s coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting the State’s capacity to improve its SiMR data.

**Response to actions required in FFY 2018 SPP/APR**

Pennsylvania will address the Prior Year Required Actions in the April 1, 2021 submission of its FFY 2019 report of the State Systemic Improvement Plan.

## 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) graduating from high school 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 of Education (Department) under Title I of the Elementary and Secondary Education Act (ESEA).

**Measurement**

States may report data for children with disabilities using either the four-year adjusted cohort graduation rate required under the ESEA or an extended-year adjusted cohort graduation rate under the ESEA, if the State has established one.

**Instructions**

Sampling is not allowed.

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019), and compare the results to the target. Provide the actual numbers used in the calculation.

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma and, if different, the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma. If there is a difference, explain.

Targets should be the same as the annual graduation rate targets for children with disabilities under Title I of the ESEA.

States must continue to report the four-year adjusted cohort graduation rate for all students and disaggregated by student subgroups including the children with disabilities subgroup, as required under section 1111(h)(1)(C)(iii)(II) of the ESEA, on State report cards under Title I of the ESEA even if they only report an extended-year adjusted cohort graduation rate for the purpose of SPP/APR reporting.

## 1 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2011 | 71.02% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 75.98% | 72.46% | 72.87% | 75.15% | 72.60% |
| Data | 71.07% | 71.52% | 74.06% | 73.64% | 70.24% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 73.70% |

**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 proposed long-term goals apply to all public schools and to each student subgroup. Interim goals were established through consultation with the state’s Technical Advisory Committee, a 21-member stakeholder workgroup, and other education leaders and advocates.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2018-19 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696) | 07/27/2020 | Number of youth with IEPs graduating with a regular diploma | \*[[1]](#footnote-2) |
| SY 2018-19 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696) | 07/27/2020 | Number of youth with IEPs eligible to graduate | 23,534 |
| SY 2018-19 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec FS150; Data group 695) | 07/27/2020 | Regulatory four-year adjusted-cohort graduation rate table | 70.7%[[2]](#footnote-3) |

**FFY 2019 SPP/APR Data**

| **Number of youth with IEPs in the current year’s adjusted cohort graduating with a regular diploma** | **Number of youth with IEPs in the current year’s adjusted cohort eligible to graduate** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| \*1 | 23,534 | 70.24% | 73.70% | 70.7%2 | Did Not Meet Target | No Slippage |

**Graduation Conditions**

**Choose the length of Adjusted Cohort Graduation Rate your state is using:**

4-year ACGR

**Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma and, if different, the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma. If there is a difference, explain*.***

Historical Background  
   
In 2013, Pennsylvania’s State Board of Education approved new academic standards and revised high school graduation requirements, as set forth in 22 PA Code, Chapter 4. Under these regulations, each school district, charter school, cyber charter school and area vocational technical school (AVTS) (if the AVTS graduates students) must adopt and implement requirements for high school graduation.  
   
Regulations providing for the Keystone Exams as a statewide graduation requirement, and related Project Based Assessments (PBAs) were adopted in 2014. Under these regulations, effective with the graduating class of 2017, high school students would have to pass state-developed end-of-course assessments in Algebra I, Biology and Literature in order to receive a diploma. (The regulations also allowed students to meet the state graduation requirement by passing an Advanced Placement Exam, an International Baccalaureate Exam, or a locally selected, independently validated exam for each standards-based content area). As required by these regulations, the PDE also developed a PBA system for students who are unable to demonstrate proficiency on a Keystone Exam. All students, including students with disabilities, must participate in the Keystone Exams no later than grade 11 unless parentally excused due to religious conflict, or participating in the Pennsylvania Alternate System of Assessment (for students with significant cognitive disabilities). The requirements for the Keystone Exams and PBA are identical for students with disabilities and students without disabilities, with one exception. A student with a disability can participate in the PBA system after attempting the Keystone Exams once, if determined appropriate by their IEP team, while a student without disabilities must attempt the Keystone Exams at least twice before participating in the PBA.  
   
When Governor Tom Wolf took office in 2015, his administration immediately began to look at the need to consider additional state level options for students to demonstrate readiness for postsecondary success. Since postsecondary success looks different for different students, multiple methods/measures of readiness for postsecondary success are valid and appropriate as state level graduation requirements.  
   
On February 3, 2016, Governor Wolf signed Senate Bill 880 into law. The law delayed use of the Keystone Exams as a state graduation requirement or as a benchmark for the need to participate in a PBA; it also charged the PDE with developing alternative methods for students to demonstrate proficiency for graduation. The department issued its recommendations to the General Assembly in August, 2016.  
   
On November 4, 2017, the state’s General Assembly enacted Act 55, which further delayed the use of Keystone Exams as a state graduation requirement or as a benchmark for the need to participate in a PBA until the 2019-2020 school year.  
   
Pennsylvania students take Keystone Exams in Algebra I, Literature, and Biology as end-of-course exams, regardless of grade. Students are required to take the Keystone Exams to meet federal accountability requirements. Beginning with the graduating class of 2017, passage of these exams in Pennsylvania was also intended to serve as a statewide graduation requirement. In order to address implementation and policy challenges, the legislature enacted a series of moratoriums on the use of Keystone Exams as a statewide graduation requirement through Act 1 of 2016, Act 55 of 2017 and Act 39 of 2018. Act 1 of 2016 also required the Department of Education to provide a report of PDE’s recommendations regarding state graduation requirements. PDE concluded that the existing graduation requirement too narrowly defined postsecondary success and recommended a requirement that more accurately recognizes the varied pathways to postsecondary success by offering options for students to demonstrate readiness.  
   
Current Status  
   
Senate Bill 1095, which was signed into law by Governor Tom Wolf on October 24, 2018, shifts Pennsylvania’s reliance on high stakes testing as a graduation requirement to provide alternatives for high school students to demonstrate readiness for postsecondary success. Formerly, Pennsylvania’s graduation requirement was more restrictive, requiring most students to pass the Keystone Exams; end of course exams in Algebra I, Literature, and Biology. Senate Bill 1095 will expand the options for students to demonstrate postsecondary readiness using four additional pathways that more fully illustrate college, career, and community readiness.  
   
The statewide graduation requirement will take effect for the graduating class of 2022. While there is no statewide graduation requirement for the classes of 2019, 2020, and 2021, its important to note that local policies governing graduation are not preempted by the moratorium on the statewide requirement. Beginning in the 2021-22 school year, the statewide graduation requirement will apply, as well any other locally-established policies and requirements.  
   
Therefore, 22 Pa. Code Chapter 4 graduation requirements for course completion, grades, and demonstration of proficiency as determined by the school district, charter school, cyber school, or AVTS, are applicable. (It is important to note that students are still required to take the Keystone Exams for federal accountability.)  
   
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.  
   
In September 2017, the PDE submitted its proposed ESSA Consolidated State Plan to the US Department of Education. This plan includes ambitious goals to improve graduation rates, including consideration of 4- and 5-year cohort rates. The plan was approved on January 15, 2018. In the current submission, graduation targets for the SPP/APR have been aligned with those approved under ESSA.

**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 dropping out of high school. (20 U.S.C. 1416 (a)(3)(A))

**Data Source**

OPTION 1:

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

OPTION 2:

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

**Measurement**

OPTION 1:

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

OPTION 2:

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

**Instructions**

Sampling is not allowed.

OPTION 1:

Use 618 exiting data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019). Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) received a certificate; (c) reached maximum age; (d) dropped out; or (e) died.

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

OPTION 2:

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

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

Options 1 and 2:

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 2019 SPP/APR, use data from 2018-2019), and compare the results to the target.

Provide a narrative that describes what counts as dropping out for all youth and, if different, what counts as dropping out for youth with IEPs. If there is a difference, explain.

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2006 | 14.17% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 10.97% | 10.97% | 10.97% | 10.97% | 10.97% |
| Data | 12.23% | 11.95% | 12.97% | 12.02% | 13.55% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 9.00% |

**Targets: Description of Stakeholder Input**

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

**Please indicate the reporting option used on this indicator**

Option 1

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 18,467 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (b) | 9 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (c) | 27 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (d) | 2,870 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education as a result of death (e) | 67 |

**FFY 2019 SPP/APR Data**

| **Number of youth with IEPs who exited special education due to dropping out** | **Total number of High School Students with IEPs by Cohort** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,870 | 21,440 | 13.55% | 9.00% | 13.39% | Did Not Meet Target | No Slippage |

**Provide reasons for slippage, if applicable**

**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 below.**

**Provide additional information about this indicator (optional)**

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3B: Participation for Students with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Indicator 3A – Reserved

B. Participation rate for children with IEPs

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

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

**Data Source**

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

**Measurement**

B. 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. 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 3B: Provide separate reading/language arts and mathematics participation rates, inclusive of all ESEA grades assessed (3-8 and high school), for children with IEPs. Account for ALL children with IEPs, in all grades assessed, 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.

## 3B - Indicator Data

**Reporting Group Selection**

**Based on previously reported data, these are the grade groups defined for this indicator.**

| **Group** | **Group Name** | **Grade 3** | **Grade 4** | **Grade 5** | **Grade 6** | **Grade 7** | **Grade 8** | **Grade 9** | **Grade 10** | **Grade 11** | **Grade 12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall | X | X | X | X | X | X | X | X | X | X | X |

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Overall | 97.40% | Actual | 97.09% | 94.54% | 93.74% | 93.70% | 93.51% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Overall | 97.40% | Actual | 97.34% | 94.67% | 93.87% | 94.01% | 93.50% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Overall | 95.00% |
| Math | A >= | Overall | 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.

**FFY 2019 Data Disaggregation from EDFacts**

**Include the disaggregated data in your final SPP/APR. (yes/no)**

NO

**Data Source:**

SY 2019-20 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

**Date:**

**Reading Assessment Participation Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards |  |  |  |  |  |  |  |  |  |  |  |

**Data Source:**

SY 2019-20 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

**Math Assessment Participation Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards |  |  |  |  |  |  |  |  |  |  |  |

**FFY 2019 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 93.51% | 95.00% |  | N/A | N/A |

**FFY 2019 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 93.50% | 95.00% |  | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

**Provide additional information about this indicator (optional)**

The statewide student assessment program was suspended for the 2019-20 school year due to mandatory school closures related to the COVID-19 pandemic. On March 27, 2020, the U.S. Department of Education (USDE) approved Pennsylvania's request to waive federal assessment requirements for the 2019-20 school year, along with accountability and certain reporting requirements based on data derived from the 2019-20 school year.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

The State was not required to provide any data for this indicator. Due to the circumstances created by the COVID-19 pandemic, and resulting school closures, the State received a waiver of the assessment requirements in section 1111(b)(2) of the ESEA, and, as a result, does not have any FFY 2019 data for this indicator.

## 3B - Required Actions

# Indicator 3C: Proficiency for Students with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Indicator 3A – Reserved

B. Participation rate for children with IEPs

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

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

**Data Source**

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

**Measurement**

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level and 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)]. Calculate separately for reading and math. 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 reading/language arts and mathematics assessments (combining regular and alternate) for children with IEPs, in all grades assessed (3-8 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

**Reporting Group Selection**

**Based on previously reported data, these are the grade groups defined for this indicator.**

| **Group** | **Group Name** | **Grade 3** | **Grade 4** | **Grade 5** | **Grade 6** | **Grade 7** | **Grade 8** | **Grade 9** | **Grade 10** | **Grade 11** | **Grade 12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall | X | X | X | X | X | X | X | X | X | X | X |

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2014 | Target >= |  | 31.37% | 37.61% | 43.85% | 28.20% |
| **A** | Overall | 25.13% | Actual | 25.13% | 25.47% | 26.66% | 27.84% | 26.99% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2014 | Target >= |  | 24.03% | 30.94% | 37.85% | 20.40% |
| **A** | Overall | 17.12% | Actual | 17.12% | 17.64% | 18.72% | 19.17% | 17.99% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Overall | 31.10% |
| Math | A >= | Overall | 23.60% |

**Targets: Description of Stakeholder Input**

Pennsylvania’s ESSA Consolidated State Plan contains long-term goals that apply to all public schools and to each student subgroup. Interim goals were established by dividing the 2030 numeric goals by 13, representing 13 years from 2017-18 to 2029-30. Goals were constructed through consultation with the state’s Technical Advisory Committee, a 21-member stakeholder work group, and other education leaders and advocates.   
   
The targets reported for FFY 2019 reflect the Measures of Interim Progress established in Pennsylvania's ESSA Consolidated State Plan.

**FFY 2019 Data Disaggregation from EDFacts**

**Include the disaggregated data in your final SPP/APR. (yes/no)**

NO

**Data Source:**

SY 2019-20 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

**Reading Proficiency Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs who received a valid score and a proficiency was assigned |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |

**Data Source:**

SY 2019-20 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

**Math Proficiency Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs who received a valid score and a proficiency was assigned |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |

**FFY 2019 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 26.99% | 31.10% |  | N/A | N/A |

**FFY 2019 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 17.99% | 23.60% |  | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

**Provide additional information about this indicator (optional)**

The statewide student assessment program was suspended for the 2019-20 school year due to mandatory school closures related to the COVID-19 pandemic. On March 27, 2020, the U.S. Department of Education (USDE) approved Pennsylvania's request to waive federal assessment requirements for the 2019-20 school year, along with accountability and certain reporting requirements based on data derived from the 2019-20 school year.

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

The State was not required to provide any data for this indicator. Due to the circumstances created by the COVID-19 pandemic, and resulting school closures, the State received a waiver of the assessment requirements in section 1111(b)(2) of the ESEA, and, as a result, does not have any FFY 2019 data for this indicator.

## 3C - 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 districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs

(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 districts that meet the State-established n size (if applicable) that have a significant discrepancy in the rates of suspensions and expulsions for greater than 10 days in a school year of children with IEPs) divided by the (# of districts in the State that meet the State-established n size (if applicable))] times 100.

Include State’s definition of “significant discrepancy.”

**Instructions**

If the State has established a minimum n size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n size. If the State used a minimum n size requirement, report the number of districts 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 2019 SPP/APR, use data from 2018-2019), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons:

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

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

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

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

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If discrepancies occurred and the district with discrepancies had policies, procedures or practices that contributed to the significant discrepancy 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 the Office of Special Education Programs (OSEP) Memorandum 09-02, dated October 17, 2008.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for 2018-2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 4A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 1.34% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 2.42% | 2.42% | 0.00% | 1.97% | 1.97% |
| Data | 1.63% | 1.63% | 1.34% | 1.79% | 2.22% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 1.00% |

**Targets: Description of Stakeholder Input**

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

**FFY 2019 SPP/APR Data**

**Has the state established a minimum n-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 size. Report the number of districts excluded from the calculation as a result of the requirement.**

2

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of districts that have a significant discrepancy** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 19 | 678 | 2.22% | 1.00% | 2.80% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Data across the state were examined to determine whether the slippage was systemic or occurred in LEAs with common characteristics. The data were disaggregated by geography, type of LEA (school districts or charter schools) and rate of suspensions. Slippage was found to occur in equal concentrations in the west, central and eastern thirds of the state, each with one-third of the LEAs found to have a significant discrepancy. All but one of the 19 LEAs identified were school districts. Nearly two-thirds of these LEAs (12) suspended 15 or fewer students with disabilities. Finally, over 40% of these LEAs (8) have a suspension rate of less than 2.0%, where minor fluctuations downward would remove them from this designation, and allow the target to be met for this Indicator.

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

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

**State’s definition of “significant discrepancy” and methodology**

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

**Provide additional information about this indicator (optional)**

All reviews as described below were conducted virtually as a result of mandatory school closures and a state-imposed employee travel ban due to COVID-19.

**Review of Policies, Procedures, and Practices (completed in FFY 2019 using 2018-2019 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.**

Prior to June 30, 2020, the BSE initiated reviews of all 19 LEAs that were identified as having a significant discrepancy. 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 provision of FAPE to students whose removal constitutes 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 self-assessment. Each LEA provided a list to the BSE of all students with disabilities who were suspended during the entire year. The Monitoring Chairperson reviewed a sample of the files of students who were suspended or expelled and considered all data to determine whether the LEA was in compliance with IDEA requirements.

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

**If YES, select one of the following:**

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

**Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008*.***

The BSE conducted reviews as described above, and determined that three LEAs had policies, procedures, or practices that did not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. Therefore, the state issued written findings of noncompliance. The LEAs were required to develop a Corrective Action Verification Plan, approved by BSE. The BSE monitored implementation of corrective action through interviews with administrative personnel, analysis of updated suspension data, and student file reviews. The state verified that all LEAs have corrected policies, procedures, and practices as well as each individual case of noncompliance, in conformance with OSEP Memorandum 09-02.

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The BSE has verified through virtual reviews of policies, procedures, and practices, as well as reviews of updated data from student files, that the LEAs are correctly implementing the specific regulatory requirements and have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02. BSE verified that all corrective action of noncompliance in these LEAs was completed within timelines.

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

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

## 4A - Required Actions

The State must report, in the FFY 2020 SPP/APR, on the correction of noncompliance that the State identified in FFY 2019 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Compliance Indicator:** Rates of suspension and expulsion:

B. Percent of districts that have: (a) a significant discrepancy, 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 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 districts that meet the State-established n size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of districts in the State that meet the State-established n 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 size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n size. If the State used a minimum n size requirement, report the number of districts 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 2019 SPP/APR, use data from 2018-2019), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons

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

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

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

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

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If discrepancies occurred and the district with discrepancies had policies, procedures or practices that contributed to the significant discrepancy 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 the Office of Special Education Programs (OSEP) Memorandum 09-02, dated October 17, 2008.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for 2018-2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 4.55% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.15% | 0.59% | 4.55% | 9.09% | 9.09% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 0% |

**FFY 2019 SPP/APR Data**

**Has the state established a minimum n-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 size. Report the number of districts excluded from the calculation as a result of the requirement.**

652

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts that have a significant discrepancy, by race or ethnicity** | **Number of those districts that have policies procedure, or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 15 | 2 | 28 | 9.09% | 0% | 7.14% | Did Not Meet Target | No Slippage |

**Were all races and ethnicities included in the review?**

YES

**State’s definition of “significant discrepancy” and methodology**

Pennsylvania uses a comparison to the state average as the methodology for identifying LEAs with a significant discrepancy. Using data collected under section 618 of the IDEA (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) for the school year 2018-19, 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)**

All reviews as described below were conducted virtually as a result of mandatory school closures and a state-imposed employee travel ban due to COVID-19.

**Review of Policies, Procedures, and Practices (completed in FFY 2019 using 2018-2019 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.**

Based on the criteria and methodology described, BSE identified 15 LEAs as having a significant discrepancy in rates of suspension and expulsion by race or ethnicity. The BSE initiated reviews in all 15 LEAs prior to June 30, 2020. In preparation for the review, each LEA completed a Facilitated Self Assessment (FSA), which required the LEA to examine and describe its written policies, procedures, and practices for suspension of students with disabilities. The LEAs provided written responses to a series of probes designed to gather information and gain insights from the LEA team.  
   
During the review, the BSE examined the following:  
   
 • written policies and procedures for suspension of students with disabilities;  
   
 • suspension data for racial/ethnicity categories where discrepancies exist;  
   
 • FSA responses regarding building and LEA-wide suspension patterns;  
   
 • 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;  
   
 • use of data to plan and implement effective behavior support; and   
   
 • information from interviews of LEA personnel.  
   
The BSE Monitoring Chairperson also conducted a student file compliance review of a sample of files of suspended students.

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

**If YES, select one of the following:**

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

**Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008*.***

The BSE conducted 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. The state issued written findings of noncompliance. The LEAs were required to develop a Corrective Action Verification Plan, approved by BSE. The BSE monitored implementation of corrective action through interviews with administrative personnel, analysis of updated suspension data, and student file reviews. The state verified that the LEAs have corrected policies, procedures, and practices as well as each individual case of noncompliance, in conformance with OSEP Memorandum 09-02.

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The BSE has verified through virtual reviews of policies, procedures, and practices, as well as reviews of updated data from student files, that the LEAs are correctly implementing the specific regulatory requirements and have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02. BSE verified that all corrective action of noncompliance in these LEAs was completed within timelines.

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

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Findings of Noncompliance Verified as Corrected**

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

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

## 4B - Prior FFY Required Actions

None

## 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 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. The State must demonstrate, in the FFY 2020 SPP/APR, that the districts identified with noncompliance in FFY 2019 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 5: Education Environments (children 6-21)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Education environments (children 6-21): Percent of children with IEPs aged 6 through 21 served:

A. Inside the regular class 80% or more of the day;

B. Inside the regular class less than 40% of the day; and

C. In separate schools, residential facilities, or homebound/hospital placements.

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

**Data Source**

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

**Measurement**

Percent = [(# of children with IEPs aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.

Percent = [(# of children with IEPs aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.

Percent = [(# of children with IEPs aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 6 through 21 with IEPs)]times 100.

**Instructions**

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

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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2019 | Target >= | 62.60% | 63.10% | 63.60% | 64.10% | 64.10% |
| A | 61.48% | Data | 61.96% | 61.84% | 62.37% | 61.97% | 61.52% |
| B | 2019 | Target <= | 8.70% | 8.50% | 8.30% | 8.10% | 8.10% |
| B | 9.62% | Data | 9.49% | 9.53% | 9.01% | 9.27% | 9.39% |
| C | 2019 | Target <= | 4.60% | 4.60% | 4.60% | 4.60% | 4.60% |
| C | 4.81% | Data | 4.84% | 4.93% | 4.90% | 4.86% | 4.77% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= |  |
| Target B <= |  |
| Target C <= |  |

**Targets: Description of Stakeholder Input**

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

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | Total number of children with IEPs aged 6 through 21 | 308,750 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day | 189,809 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 29,690 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c1. Number of children with IEPs aged 6 through 21 in separate schools | 13,377 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c2. Number of children with IEPs aged 6 through 21 in residential facilities | 975 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements | 510 |

**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 2019 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 6 through 21 served** | **Total number of children with IEPs aged 6 through 21** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day | 189,809 | 308,750 | 61.52% |  | 61.48% | N/A | N/A |
| B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 29,690 | 308,750 | 9.39% |  | 9.62% | N/A | N/A |
| C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 14,862 | 308,750 | 4.77% |  | 4.81% | N/A | N/A |

**Use a different calculation methodology (yes/no)**

NO

**Provide additional information about this indicator (optional)**

In FFY 2019, for the first time, students with disabilities who are 5 years of age and attending kindergarten in LEAs are included in the school age child count rather than the preschool child count. As a result, FFY 2019 has become the revised baseline year, no targets are set for this year, and therefore no progress or slippage can be calculated for this Indicator.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.  
  
Reporting requirements for the IDEA section 618 data collection (specifically, IDEA Part B Child Counts and Educational Environments) were updated to allow States to include five-year-olds in Kindergarten in file specification FS002 - Children with Disabilities (IDEA) School Age and exclude these children from file specification FS089 - Children with Disabilities (IDEA) Early Childhood for School Year (SY) 2019-20. SY 2019-20 (i.e., FFY 2019) was the transition year for this change; States had the option to Reporting requirements for the IDEA section 618 data collection (specifically, IDEA Part B Child Counts and Educational Environments) were updated to allow States to include five-year-olds in Kindergarten in file specification FS002 - Children with Disabilities (IDEA) School Age and exclude these children from file specification FS089 - Children with Disabilities (IDEA) Early Childhood for School Year (SY) 2019-20. report five-year-olds in Kindergarten in FS002 in their SY 2019-20 submission or wait to do so with their SY 2020-21 submission, when the change becomes permanent. The State transitioned to reporting five-year-olds in Kindergarten in FS002 for its SY 2019-20 submission under IDEA section 618. This change impacts the State’s data for SPP/APR Indicators 5 and 6, because the required data source for SPP/APR Indicators 5 and 6 is the same data as used for reporting to the Department under IDEA section 618. Therefore, the State’s slippage status indicates “NA” for this indicator.

## 5 - Required Actions

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Preschool environments: Percent of children aged 3 through 5 with IEPs 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.

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

**Data Source**

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

**Measurement**

Percent = [(# of children aged 3 through 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 aged 3 through 5 with IEPs)] times 100.

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

**Instructions**

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

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.

## 6 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2019 | Target >= | 62.50% | 63.00% | 63.50% | 64.50% | 64.80% |
| A | 58.69% | Data | 62.08% | 62.45% | 63.90% | 66.05% | 66.66% |
| B | 2019 | Target <= | 15.00% | 15.00% | 15.00% | 15.00% | 14.70% |
| B | 17.53% | Data | 16.07% | 15.99% | 15.30% | 14.56% | 14.47% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= |  |
| Target B <= |  |

**Targets: Description of Stakeholder Input**

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

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | Total number of children with IEPs aged 3 through 5 | 30,533 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | 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 | 17,920 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b1. Number of children attending separate special education class | 5,002 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b2. Number of children attending separate school | 341 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b3. Number of children attending residential facility | 8 |

**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 2019 SPP/APR Data**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 17,920 | 30,533 | 66.66% |  | 58.69% | N/A | N/A |
| B. Separate special education class, separate school or residential facility | 5,351 | 30,533 | 14.47% |  | 17.53% | N/A | N/A |

**Use a different calculation methodology (yes/no)**

NO

**Provide additional information about this indicator (optional)**

In FFY 2019, for the first time, students with disabilities who are 5 years of age and attending kindergarten in LEAs are included in the school age child count rather than the preschool child count. As a result of this change in measurement, FFY 2019 has become the revised baseline year for this Indicator, no targets are set for this year, and therefore no progress or slippage can be calculated for this Indicator.  
   
The reliability, validity, and completeness of FFY 2019 data for Indicator B6 has been impacted by COVID-19. Pennsylvania anticipates additional impact on data in FFY 2020-21 to be reported in its February 2022 SPP/APR.   
  
The primary impact on data reliability and completeness is due to lags in updating IEP educational environment in the PELICAN data system. Frequent changes in the availability of ECE settings due to changes in risk for COVID-19 transmission, closure of state and federal funded preschool programs, and closures of private pay ECE programs have increased the frequency of need to update the IEP educational environment data. There has also been an increase in the number of children who were anticipated to transition to school district Kindergarten programs but who have chosen to remain in EI. This change has again caused a need for updating of educational environment data.   
  
The increased number of changes in educational environment has created an increased paperwork burden for EI staff and programs that has resulted in delays in updating educational environment data. This delay has been exacerbated by delays in documenting parental agreement with changes in educational environment location.   
  
Pennsylvania is also noting an increase in the number of parents who are requesting to remain active in the EI program but who are not currently receiving EI services due to COVID-19 concerns. For example, local EI programs report that parents whose child typically received EI supports in an ECE setting are requesting to remain in the EI program but are not requesting services until their child returns to the ECE setting. The IEP educational environment data for these children reflects the location of services at the beginning of the COVID-19 pandemic.   
  
To mitigate the impact of COVID-19 on the B6 data reliability, validity and completeness, BEISFS has provided guidance on: 1) documentation of educational environment data when an ECE is providing virtual services or has reduced class size for health and safety; 2) documentation of educational environment data when services are being provided through tele-intervention; and 3) accepting digital signatures for parent consent.   
  
In addition, local EI programs have implemented strategies to mitigate the impact of COVID-19 on the B6 data reliability, validity and completeness by purchasing electronic signature systems; implementing low-risk strategies for in-person collection of parental consent from families who cannot use technology solutions; and implementing strategies to decrease data collection burdens for EI staff.

## 6 - Prior FFY Required Actions

The State revised its targets for FFY 2019 for this indicator, but OSEP cannot accept those targets because the State's end targets for FFY 2019 do not reflect improvement over the baseline data. The State must revise its FFY 2019 targets to reflect improvement.

**Response to actions required in FFY 2018 SPP/APR**

In FFY 2019, for the first time, students with disabilities who are 5 years of age and attending kindergarten in LEAs are included in the school age child count rather than the preschool child count. As a result of this change in measurement, FFY 2019 has become the revised baseline year for this Indicator, and no targets are set for this year.

## 6 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.  
  
Reporting requirements for the IDEA section 618 data collection (specifically, IDEA Part B Child Counts and Educational Environments) were updated to allow States to include five-year-olds in Kindergarten in file specification FS002 - Children with Disabilities (IDEA) School Age and exclude these children from file specification FS089 - Children with Disabilities (IDEA) Early Childhood for School Year (SY) 2019-20. SY 2019-20 (i.e., FFY 2019) was the transition year for this change; States had the option to Reporting requirements for the IDEA section 618 data collection (specifically, IDEA Part B Child Counts and Educational Environments) were updated to allow States to include five-year-olds in Kindergarten in file specification FS002 - Children with Disabilities (IDEA) School Age and exclude these children from file specification FS089 - Children with Disabilities (IDEA) Early Childhood for School Year (SY) 2019-20. report five-year-olds in Kindergarten in FS002 in their SY 2019-20 submission or wait to do so with their SY 2020-21 submission, when the change becomes permanent. The State transitioned to reporting five-year-olds in Kindergarten in FS002 for its SY 2019-20 submission under IDEA section 618. This change impacts the State’s data for SPP/APR Indicators 5 and 6, because the required data source for SPP/APR Indicators 5 and 6 is the same data as used for reporting to the Department under IDEA section 618. Therefore, the State’s slippage status indicates “NA” for this indicator.

## 6 - Required Actions

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

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

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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.

b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.

d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

**Summary Statements for Each of the Three Outcomes:**

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

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

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

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

**Instructions**

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

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

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

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

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

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

## 7 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A1 | 2008 | Target >= | 89.84% | 89.84% | 89.84% | 89.84% | 90.84% |
| A1 | 70.80% | Data | 87.80% | 86.09% | 83.67% | 83.72% | 84.06% |
| A2 | 2008 | Target >= | 68.02% | 68.02% | 68.02% | 68.02% | 69.02% |
| A2 | 55.00% | Data | 68.46% | 68.33% | 66.56% | 66.09% | 66.99% |
| B1 | 2008 | Target >= | 91.69% | 91.69% | 91.69% | 91.69% | 92.69% |
| B1 | 72.90% | Data | 89.09% | 88.92% | 86.35% | 86.78% | 87.31% |
| B2 | 2008 | Target >= | 66.54% | 66.54% | 66.54% | 66.54% | 67.54% |
| B2 | 47.20% | Data | 65.65% | 65.44% | 62.93% | 62.62% | 64.47% |
| C1 | 2008 | Target >= | 89.48% | 89.48% | 89.48% | 89.48% | 90.48% |
| C1 | 70.80% | Data | 87.82% | 86.78% | 84.05% | 84.46% | 84.23% |
| C2 | 2008 | Target >= | 70.37% | 70.37% | 70.37% | 70.37% | 71.37% |
| C2 | 56.80% | Data | 70.18% | 69.33% | 67.75% | 67.40% | 68.34% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1 >= | 90.84% |
| Target A2 >= | 69.02% |
| Target B1 >= | 92.69% |
| Target B2 >= | 67.54% |
| Target C1 >= | 90.48% |
| Target C2 >= | 71.37% |

**Targets: Description of Stakeholder Input**

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

**FFY 2019 SPP/APR Data**

**Number of preschool children aged 3 through 5 with IEPs assessed**

13,407

**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 | 39 | 0.29% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,223 | 9.16% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 3,021 | 22.62% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 4,787 | 35.84% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 4,285 | 32.09% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 7,808 | 9,070 | 84.06% | 90.84% | 86.09% | Did Not Meet Target | No Slippage |
| 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)* | 9,072 | 13,355 | 66.99% | 69.02% | 67.93% | Did Not Meet Target | No Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 33 | 0.25% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,293 | 9.68% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 3,459 | 25.88% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 5,916 | 44.27% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 2,663 | 19.93% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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)* | 9,375 | 10,701 | 87.31% | 92.69% | 87.61% | Did Not Meet Target | No Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 8,579 | 13,364 | 64.47% | 67.54% | 64.19% | 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 | 50 | 0.37% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,233 | 9.24% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 2,812 | 21.06% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 4,836 | 36.22% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 4,419 | 33.10% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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)* | 7,648 | 8,931 | 84.23% | 90.48% | 85.63% | Did Not Meet Target | No Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.  *Calculation: (d+e)/(a+b+c+d+e)* | 9,255 | 13,350 | 68.34% | 71.37% | 69.33% | Did Not Meet Target | No Slippage |

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

YES

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used? | NO |

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

YES

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

Pennsylvania’s Part B/619 and Part C Early Intervention program use the same instruments, policies and procedures for gathering child outcome data used for this indicator (B7) and for the Part C C3 indicator.   
   
For both entry and exit data collection, one member of the IEP team is designated to collect and enter the child outcome data. This designated member is also charged with involving the family in the child outcome data collection process and in reviewing all data collection and ratings with the family. All local Early Intervention programs must select an authentic assessment tool from an approved list to gather child development information. The list of approved tools can be found at: http://www.pakeys.org/getting-started/ocdel-programs/early-learning-outcomes-reporting/ .   
  
All child outcome COS ratings are entered into the PELICAN-EI data system. PELICAN-EI converts the 1 – 7 ratings into progress categories and summary statements. It has built in data checks to ensure quality data entry. PELICAN-EI allows for reporting at both the state and local EI program levels.   
  
For entry data collection, the designated member of the IEP team has 60 days from the child’s IEP date to complete the child outcome process and enter the COS rating into PELICAN-EI. The child outcome process includes: 1) completing the approved authentic assessment tool, 2) using the data from the authentic assessment tool and the publisher’s Instrument Crosswalk to understand the child’s skills in each of the three indicators, and 3) obtaining a 1 – 7 rating of the child’s skills in each of the three indicators using the Decision Tree for Summary Rating Discussions.   
   
For exit data collection, the process described above is used to make the COS rating. The designated member of the IEP team has 60 days from the child’s anticipated exit from the Early Intervention program to gather and enter the data into the PELICAN-EI system. Exit data is only gathered on children who have received 6 consecutive months of Early Intervention service prior to their exit, with the starting point of service being the IEP date. For children who stay in Pennsylvania’s Early Intervention program past the typical age of transition to Kindergarten, exit data is collected in the 60 day time period prior to the child’s sixth birthday.   
  
Additional policies and procedures can be found at: http://www.eita-pa.org/early-childhood-outcomes/ .

**Provide additional information about this indicator (optional)**

The reliability and completeness of FFY 2019 data for Indicator B7, child outcome data, has been impacted by COVID-19. Pennsylvania anticipates additional impact on data in FFY 2020-21 to be reported in its February 2022 SPP/APR.   
  
Pennsylvania is seeing an overall decrease in the percent of pairs of child outcome data from the previous fiscal year. In FFY 2018, 79.49% of the exiting preschoolers had complete entry and exit pairs of child outcome data. In FFY 2019, only 74.22 % entry and exit pairs of child outcome data were gathered. Data analysis continues to determine the root cause of this decrease and the extent of the impact of COVID-19 on this change.   
  
Pennsylvania has noted a change in the number of children exiting the EI program due to COVID-19. There has been an increase in children maintaining enrollment in EI rather than transitioning to Kindergarten programs. Other children are maintaining EI enrollment but are not currently receiving EI services due to risk factors associated with COVID-19. These changes are affecting the ability of EI staff to collect complete data, in particular, child outcome exit data.   
  
Pennsylvania’s process for collecting child outcome data is dependent on authentic assessment tools that use child observations as the primary methodology for assessment. Due to the use of tele-intervention service delivery methodologies and the decrease in services being provided in ECE settings, EI staff are having difficulty collecting valid and reliable child outcome data. This issue is being reported during the collection of both entry and exit child outcome data.   
  
Since COVID-19 is influencing the collection of valid and reliable entry data, Pennsylvania anticipates that there will be future data impacts when child outcome exit data is finally collected on children who had entry child outcome data collected during the COVID-19 pandemic. The different conditions used to collect entry authentic assessment data vs. exit authentic assessment data may make the comparisons of the two data points invalid.   
  
To mitigate the impact of COVID-19 on the B7 data reliability, validity and completeness, BEISFS has provided guidance on the collection of child outcome data during COVID-19.

## 7 - Prior FFY Required Actions

None

## 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 2 for additional instructions on sampling.)

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

Provide the actual numbers used in the calculation.

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

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

Report the number of parents to whom the surveys were distributed.

Include the State’s analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services. States should consider categories such as race and ethnicity, age of the student, disability category, and geographic location in the State.

If the analysis shows that the demographics of the 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 Involvement section of the Introduction where this description resides.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Preschool | 2008 | Target >= | 86.50% | 87.00% | 87.00% | 87.50% | 88.00% |
| Preschool | 84.10% | Data | 85.22% | 86.59% | 86.87% | 86.88% | 85.29% |
| School age | 2008 | Target >= | 40.34% | 40.84% | 40.84% | 41.34% | 41.34% |
| School age | 34.50% | Data | 38.76% | 42.68% | 39.70% | 41.30% | 40.97% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 85.27% |
| Target B >= | 41.34% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Preschool | 6,091 | 6,606 | 85.29% | 85.27% | 92.20% | Met Target | No Slippage |
| School age | 558 | 1,224 | 40.97% | 41.34% | 45.59% | Met Target | No Slippage |

**The number of parents to whom the surveys were distributed.**

50,523

**Percentage of respondent parents**

15.50%

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

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

School Age Programs (Bureau of Special Education)  
   
Pennsylvania's School Age sampling plan was approved by OSEP with the original submission of the State's State Performance Plan in December, 2005. This plan has not been changed since its approval.  
   
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)  
  
Sampling did not occur in the Early Intervention program.

| **Survey Question** | **Yes / No** |
| --- | --- |
| Was a survey used? | YES |
| If yes, is it a new or revised survey? | NO |
| The demographics of the parents responding are representative of the demographics of children receiving special education services. | 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 will continue its collaboration with the Pennsylvania State Data Center to refine oversampling strategies to maintain and improve the representativeness for the FFY 2020 survey. Additionally, the opportunity to complete the survey using a smart phone will be highlighted and emphasized when publicizing the survey in an effort to both increase the response rate and correct the over-representativeness in the two groups described below. Finally, the data collection window will be expanded to allow parents of students with disabilities additional time and opportunities to provide feedback to the BSE regarding school-facilitated parent involvement.  
  
  
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)  
   
The FFY 2020 family survey will be available online in two versions, one in English and one in Spanish. In addition, the materials developed for local Early Intervention programs to use when supporting families to complete the survey will be available in both English and Spanish. A toll free hotline will be available for families to use for any additional translation services.   
  
A webinar will be held in early 2021 to provide strategies for local programs to ensure that they are reaching underrepresented families. On a bi-weekly basis, local EI programs will receive a report on respondent demographics. This will allow local programs to target ongoing outreach to underrepresented families.  
  
Additionally, updates have been made to the collection of demographic data in order to increase the accuracy of the identification of disability categories.

**Include the State’s analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.**

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 16,685 parents of students with disabilities from 120 LEAs. Included in this distribution was an over-sampling of parents of Black or African American (not Hispanic) and Hispanic students to compensate for historically lower response rates within these groups.  
   
The state has determined that if the percentage of the respondent group in a category was within the range between 5% above and below the percentage of the state population, the category would be considered representative of the state population. As shown in Tables 8.1 and 8.2 below, for parents of school age students, 17 of the 19 comparisons are within the state-established range. Only parents of students with autism and parents of white (not Hispanic) students are over-represented in this group.   
   
 Table 8.1  
 Race/Ethnicity of School Age Students Represented by Parent Respondents  
  
 Total Respondent Group State Race/Ethnicity Population  
   
 Race/Ethnicity Percent Percent   
  
 American Indian/Alaska Native <1.0% <1.0%  
 Asian 1.6% 1.7%  
 Black or African American 13.7% 17.3%  
 Hispanic 12.6% 13.6%  
 Multiracial 3.1% 5.0%  
 Native Hawaiian/Other Pacific Islander <1.0% <1.0%  
 White 68.7% 62.1%  
  
   
   
   
 Table 8.2  
 Disability Category of School Age Students Represented by Parent Respondents  
   
 Total Respondent Group State Race/Disability Population  
   
 Disability Category Percent Percent   
   
 Autism 16.7% 11.6%   
 Deaf-Blindness <1.0% <1.0%  
 Emotional Disturbance 8.2% 8.5%  
 Hearing Impairment Including Deafness <1.0% <1.0%   
 Intellectual Disability (Mental Retardation) 7.1% 6.3%  
 Multiple Disabilities <1.0% 1.0%   
 Orthopedic Impairment <1.0% <1.0%  
 Other Health Impairment 17.6% 17.0%   
 Specific Learning Disability 34.8% 39.8%  
 Speech or Language Impairment 13.5% 14.1%  
 Traumatic Brain Injury <1.0% <1.0%   
 Visual Impairment including Blindness <1.0% <1.0%  
   
   
   
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)  
  
The representativeness in the preschool respondent group by race/ethnicity and disability categories is displayed in Tables 8.3 and 8.4 below. The state has determined that if the percentage of the respondent group in a category was in the range of 5% above or below the percentage of the state population, that category would be considered representative of the state population. All but one of the 20 comparisons of the respondent group to the state population in these tables are within the state-established range. One area, the race category of White, was above the 5% range, at 6%. Through the demographic data that was gathered in the Family Survey, Pennsylvania was unable to match 8.9% of the respondents to specific children in the PELICAN data system and therefore race/ethnicity for those respondents is unknown.   
   
The online survey dissemination methodology used in FFY 2019 had a positive impact on the representativeness of the return rate. In the FFY 2018 family survey, the respondent group was underrepresented in the categories of Black or African American and Developmental Delay in addition to over-representation of White respondents. For the FFY 2019 family survey, materials were developed for local Early Intervention programs to use when supporting families to complete the survey. A webinar will be held in early 2021 to provide dissemination strategies that local Early Intervention programs could use to ensure that surveys reached typically underrepresented families.   
   
  
 Table 8.3   
 Race/Ethnicity of Preschool Children Represented by Parent Respondents  
  
 Total Respondent Group State Race/Ethnicity Population  
   
 Race/Ethnicity Percent Percent   
  
 American Indian/Alaska Native <1.0% <1.0%  
 Asian 3.4% 4.5%  
 Black or African American 15.1% 12.5%  
 Hispanic 14.3% 11.4%  
 Multiracial 6.6% 4.5%  
 Native Hawaiian/Other Pacific Islander <1.0% <1.0%  
 White 60.4% 66.4%  
   
   
 Table 8.4  
 Disability Category of Preschool Children Represented by Parent Respondents  
   
 Total Respondent Group State Race/Disability Population  
   
 Disability Category Percent Percent   
   
 Autism 12.8% 14.7%   
 Deaf-Blindness <1.0% <1.0%  
 Developmental Delay 48.5% 43.9%  
 Emotional Disturbance <1.0% <1.0%  
 Hearing Impairment Including Deafness 1.2% <1.0%   
 Intellectual Disability (Mental Retardation) <1.0% <1.0%  
 Multiple Disabilities 1.3% <1.0%   
 Orthopedic Impairment <1.0% <1.0%  
 Other Health Impairment 2.1% 2.2%   
 Specific Learning Disability <1.0% <1.0%  
 Speech or Language Impairment 32.8% 27.8%  
 Traumatic Brain Injury <1.0% <1.0%   
 Visual Impairment including Blindness <1.0% <1.0%  
 Unknown <1.0% 8.9%

**Provide additional information about this indicator (optional)**

## 8 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 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 2018 SPP/APR**

School Age Programs (Bureau of Special Education)  
   
The BSE will continue its collaboration with the Pennsylvania State Data Center to refine oversampling strategies to maintain and improve the representativeness for the FFY 2020 survey. Additionally, the opportunity to complete the survey using a smart phone will be highlighted and emphasized when publicizing the survey in an effort to both increase the response rate and correct the over-representativeness in the two groups described above. Finally, the data collection window will be expanded to allow parents of students with disabilities additional time and opportunities to provide feedback to the BSE regarding school-facilitated parent involvement.  
   
   
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)  
   
The FFY 2020 family survey will be available online in two versions, one in English and one in Spanish. In addition, the materials developed for local Early Intervention programs to use when supporting families to complete the survey will be available in both English and Spanish. A toll free hotline will be available for families to use for any additional translation services.   
   
A webinar will be held in early 2021 to provide strategies for local programs to ensure that they are reaching underrepresented families. On a bi-weekly basis, local EI programs will receive a report on respondent demographics. This will allow local program to target ongoing outreach to underrepresented families.  
  
Additionally, updates have been made to the collection of demographic data in order to increase the accuracy of the identification of disability categories.

## 8 - OSEP Response

## 8 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

# 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 FFY 2018, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2019 reporting period (i.e., after June 30, 2020).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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** |
| --- | --- |
| 2005 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 0% |

**FFY 2019 SPP/APR Data**

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

YES

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

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial and ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial and 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-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 0 | 0 | 621 | 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 6 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 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

## 9 - Required Actions

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

Based on its review of the 618 data for FFY 2019, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in 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 2019 reporting period (i.e., after June 30, 2020).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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** |
| --- | --- |
| 2005 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 0% |

**FFY 2019 SPP/APR Data**

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

YES

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

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 1 | 0 | 621 | 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 6 through 21 served under IDEA and the most current general enrollment data available from PIMS.  
   
The following methodology and criteria were applied to identify the number of districts 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 monitored this LEA. In preparation for the virtual review, the LEA reviewed its written policies, procedures, and practices for referral, evaluation and identification of students with disabilities.  
  
During the review, the BSE examined the following:  
  
 • LEA’s written policies and procedures for referral, evaluation and identification; LEA’s data collection procedures and practices, and any LEA-unique circumstances potentially influencing identification rates; LEA’s information regarding assessment tools, academic and behavioral support models, and use of effective practices for culturally and/or linguistically diverse learners;  
  
 • LEA’s professional development programs and family involvement strategies; LEA’s use of data to drive program improvement; and additional information from interviews conducted in the LEA.  
  
 • Records of students identified by the LEA in the racial and disability category flagged in the years subject to review were 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 the requirements of 34 CFR §§300.111, 300.201, and 300.301 through 300.311. 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 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

## 10 - Required Actions

# Indicator 11: Child Find

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Child Find

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

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

**Data Source**

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

**Measurement**

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

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

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.05% | 98.40% | 97.75% | 96.67% | 95.05% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 31,104 | 29,339 | 95.05% | 100% | 94.33% | Did Not Meet Target | No Slippage |

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

1,765

**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 2019 database for Indicator 11 confirms that all 563 school age students who did not receive a timely initial evaluation did receive an evaluation, although late. The database was modified to allow LEAs to indicate when an evaluation was late as a result of the COVID-19 pandemic. Of the total, 70% were completed within 61-90 days, and 86% were completed within 120 days. Reasons for delays were primarily attributed to errors in timeline calculations, staffing issues and administrative delays, COVID-19, as well as weather emergencies and scheduling problems with outside agency resources over which the LEA had limited control. The COVID-19 pandemic was cited by LEAs as the reason for nearly 19% of the initial evaluations completed beyond 90 days.  
   
   
Preschool Early Intervention Programs (Bureau of Early Intervention and Family Supports)  
   
The FFY 2019 data showed that 1,202 evaluations were not completed within 60 days. Of the late evaluations, 347 (28.87%) were due to COVID-19 restrictions that impacted the ability of the local Early Intervention programs to provide timely evaluations.  
   
Further analysis of the data showed that of those evaluations (n=855) that were late due to non-COVID-19 reasons, 71% were completed within 61-90 days. Reasons for delays were primarily attributed to staffing issues and administrative delays, as well as weather emergencies and scheduling problems over which preschool Early Intervention programs have limited control. In all instances, although late, preschool children received their evaluations. For evaluations that were late due to COVID-19 reasons, 73% were completed within 61-90 days.  
   
For the non-COVID-19 delays, two Preschool Early Intervention programs accounted for 84% of the late evaluations. BEISFS Advisors have implemented targeted technical assistance activities with these low performing programs which include: notification in writing to the program administrator of poor performance concerns; analysis of data to identify specific areas of concern; development of an action plan with data-based targets for correction of poor performance; revision to procedures for monitoring; and verification of the implementation of new procedures.

**Indicate the evaluation timeline used:**

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

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

State database that includes data for the entire reporting year

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

School Age Programs (Bureau of Special Education)  
  
LEAs submit required data for indicator 11 on a cyclical basis aligned with BSE's monitoring cycle (approximately one-sixth of the LEAs in the commonwealth are monitored each year). Student specific and aggregated data sufficient to address all technical reporting requirements for this indicator are collected. Data were reported as the actual number of days, not an average number of days, for the period of July 1, 2019 through June 30, 2020.  
   
   
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, 2019 through June 30, 2020.

**Provide additional information about this indicator (optional)**

Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)   
   
The reliability and validity of FFY 2019 data for Indicator B11, evaluation timelines, has been impacted by COVID-19. Pennsylvania anticipates additional impact on data in its FFY 2020 SPP/APR to be reported in February, 2022 SPP/APR.   
  
Beginning in March 2020, changes in the PELICAN data system allowed EI Preschool staff to distinguish those late evaluations that were due to COVID-19 from evaluations that were late due to other reasons. In FFY 2019, 347 evaluations were identified as late due to COVID-19, accounting for 28.87% of the late evaluations. If the data for Indicator 11 was recalculated, assuming that the evaluations late due to COVID-19 reasons were performed on time, then Pennsylvania’s performance on this indicator for Preschool EI programs would be considerably improved.   
  
Evaluations have been delayed due to changes in the location of evaluations and strategies used to complete the evaluations. For example, some components of the multi-disciplinary evaluations were able to be completed virtually, while others could only be done through in-person procedures. Some evaluations were delayed due to the lack of internet access and technology in the child’s home or parent refusal of a virtual evaluation. Obtaining electronic signatures to document parental agreement for evaluations has also been a cause of delays. The purchase of evaluation tools that support virtual implementation and training evaluation staff on those tools has also caused evaluation delays.   
  
To mitigate the impact of COVID-19 on the B11 data reliability and validity, BEISFS has 1) made updates to the PELICAN data system to capture details on the impact of COVID-19 on data collections; 2) provided guidance on conducting evaluations through virtual practices; 3) provided professional development on strategies for virtual evaluations and tools that are appropriate for virtual evaluations; and 4) supported the purchase of evaluation tools appropriate for virtual use.   
  
In addition, local EI programs have implemented strategies to mitigate the impact of COVID-19 on the B11 data reliability and validity by purchasing electronic signature systems; purchasing and training staff on evaluation tools that can be used virtually, and increased communication and support to EI staff to complete evaluations.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 44 | 39 | 4 | 1 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

School Age Programs (Bureau of Special Education)  
   
The process for collecting data is explained above. Annually, in July-August, BSE reviews a database in which LEAs report data from the entire year for all students who have had initial evaluations for special education. The database includes mandatory reporting fields to document that for any student where the LEA did not meet required timelines, an initial evaluation was conducted, although late, and an IEP was developed if the student was determined to be eligible for special education. Following BSE review of the database, all LEAs are provided with written notification of their compliance status. LEAs determined to be in noncompliance are informed that they must correct the noncompliance as soon as possible, but not later than one year from the notification. These LEAs are required to perform quarterly reporting, through which the LEA provides updated data on all new initial evaluations. When the LEA demonstrates 100% compliance with evaluation timelines for two consecutive reporting periods, BSE closes corrective action. If an LEA is not demonstrating progress, BSE conducts on-site and/or virtual reviews to assist in identifying root causes, including required technical assistance. BSE also informs the LEA of pending enforcement actions should the LEA not correct the noncompliance within the one-year timeline (from the date of the original notification). BSE conducted follow-up of all LEAs identified with ongoing noncompliance through quarterly reporting and conducted on-site and/or virtual reviews of student files as well as policies, procedures, and practices.   
   
BSE conducted follow-up of all LEAs identified with ongoing noncompliance through quarterly reporting and conducted on-site and virtual reviews of student files as well as policies, procedures, and practices. 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 advisers continued to examine policies and procedures and student files in each of the LEAs to verify correct implementation of 34 CFR §300.301(c)(1).  
  
All five LEAs cited shortages in school psychologists who were responsible for ensuring timely initial evaluations. One LEA’s school psychologists’ capacity was less than 75% and further complicated by a ten-, rather than a twelve-month contract. For each of the LEAs that did not achieve compliance within the one year timeline, the staff shortage was exasperated by the state’s COVID-19 mandatory school closure which was announced on March 13, 2020 and continued through the end of the 2019-20 school year. Although two LEAs were utilizing a virtual instructional model, they set up in person testing sites which facilitated their ability to achieve compliance. These two LEAs achieved closure within 23 and 30 additional days, respectively. A third and fourth LEA achieved closure within 51 and 60 additional days by setting up in person testing by appointments once Personal Protective Equipment arrived.  
   
One LEA did not achieve compliance within one year of notification of noncompliance. A shortage of qualified school psychologists has been identified as the root cause. The LEA has implemented several measures to address this shortage, including but not limited to advertising in several local and national professional and general recruitment websites, contracting with school psychologists from other LEAs to work on weekends, increasing pay incentives and reaching out to their local intermediate unit for access to resources and support.   
   
With the exception of the aforementioned LEA that has not completed corrective action, the BSE has verified that all LEAs identified with noncompliance in FFY 2018 are correctly implementing the regulatory requirements related to the provision of timely evaluations, consistent with OSEP Memorandum 09-02, dated October 17, 2008.  
   
  
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)   
  
To verify that local Preschool Early Intervention programs with identified instances of noncompliance are correctly implementing the regulatory requirements for the provision of timely evaluations, BEISFS Advisors review a sample of child records from that EI program. The records may be reviewed either through the PELICAN-EI data system or onsite child record review. BEIS/FS Advisors review the date of parent consent for the evaluation, the date of the evaluation, and any reason for a delay in meeting this timeline to determine that the local EI program is now correctly implementing the regulatory requirement for timely evaluations.   
  
In addition to a review of child records, local Preschool Early Intervention programs are required to submit a Quality Enhancement Plan (QEP), which is approved by BEISFS, to address correction of all areas of noncompliance. Implementation of the QEP must be validated within one year of issuance of the findings report. BEISFS Advisors review documentation of completion of any QEP activities as part of the validation of correction of systemic noncompliance. Documentation may include reviewing updated local policies and procedures, documentation of staff training on new procedures, or observations of service delivery, as appropriate.   
  
BEISFS has verified that all local Early Intervention programs who had identified noncompliance in FFY 2018 are correctly implementing regulatory requirements related to the provision of timely evaluations, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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

School Age Programs (Bureau of Special Education)  
   
BSE has verified that each LEA with noncompliance reported in its FFY 2018 APR has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02. This was verified through review of the database and/or onsite review of student files.  
  
   
Preschool Early Intervention Programs (Bureau of Early Intervention Services and Family Supports)   
  
For each individual case of noncompliance, BEISFS Advisors reviewed the record of the identified child, either through the PELICAN-EI data system or onsite record review, to verify that the child received an evaluation, although late. BEIS/FS has verified that all local Early Intervention programs with individual cases of noncompliance identified in FFY 2018 provided evaluations for the identified child, unless the child was no longer within the jurisdiction of the Early Intervention program.

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The BSE reviewed this LEA’s policies, procedures, and practices to ensure they comply with timely initial evaluations. As part of the BSE’s additional oversight, the BSE identified an additional qualified school psychologist who has agreed to contract with this LEA and begin work immediately. The BSE is requiring bi-weekly data from the LEA to assess progress, and is meeting monthly with the LEA to enforce timeline requirements and achieve closure of corrective action.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2018 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and the LEA with remaining noncompliance identified in FFY 2018: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

**Monitoring Priorit**y: 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.

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.

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.70% | 99.71% | 99.04% | 97.65% | 90.15% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination. | 9,890 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 565 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 7,961 |
| 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. | 786 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 20 |
| 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. | 7,961 | 8,519 | 90.15% | 100% | 93.45% | Did Not Meet Target | No Slippage |

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

558

**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 558 children whose IEPs were not developed by their 3rd birthday, 44% had their IEP developed within 30 days and 38% had their IEPs developed between 31-90 days . Reasons for delays were primarily attributed to staffing issues and administrative delays, as well as weather emergencies and scheduling problems over which preschool Early Intervention programs have limited control. All 558 did have an IEP developed and implemented, although beyond their third birthday as confirmed through data reports.   
  
One EI program accounted for 87.45% of the IEPs completed past the child’s third birthday. BEISFS Advisors have implemented targeted technical assistance activities with this program. The activities include: notification in writing to the program administrator of the poor performance concerns; analysis of data to identify specific areas of concern, development of an action plan with data-based targets for correction of poor performance; revision to procedures for monitoring; and verification of the implementation of new procedures.

**Attach PDF table (optional)**

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

State database that includes data for the entire reporting year

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

State database that includes data for the entire reporting year from all Preschool Early Intervention programs. Pennsylvania collected data for this indicator through a statewide data collection based on actual number of days, not an average number of days, for the period of July 1, 2019 through June 30, 2020.

**Provide additional information about this indicator (optional)**

The reliability and validity of FFY 2019 data for Indicator B12 on the number of children in the Part C program who transitioned to the EI Preschool program, were found eligible and had an IEP development by their third birthday has been impacted by COVID-19. Pennsylvania anticipates additional impact on data in FFY 2020-21 to be reported in its February 2022 SPP/APR.   
  
Data analysis, including stakeholder group input from EI Preschool program leaders, has identified the following impacts due to COVID-19: difficulty in obtaining parental signatures, delays in evaluations due to the change from in-person to virtual, and delays in evaluations due to the need to purchase and train staff on evaluation tools that can be used in virtual settings. EI Preschool program leaders did report that transition planning with the Part C program, a process that was typically done using virtual technologies, was not negatively impacted by COVID-19.   
  
To mitigate the impact of COVID-19 on the B12 data reliability and validity, BEISFS has: 1) provided guidance on accepting digital signatures for parent consent; 2) provided guidance on conducting evaluations through virtual practices; 3) provided professional development on strategies for virtual evaluations and tools that are appropriate for virtual evaluations; and 4) supported the purchase of evaluation tools appropriate for virtual use.   
  
In addition, local EI programs have implemented strategies to mitigate the impact of COVID-19 on the B12 data reliability and validity by purchasing electronic signature systems, purchasing and training staff on evaluation tools that can be used virtually, and increased communication and support to EI staff to complete evaluations.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 24 | 24 | 0 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

To verify that local Preschool Early Intervention programs with identified instances of noncompliance are correctly implementing the regulatory requirements for the provision of IEPs by the third birthday of children transitioning from the Part C program and eligible for the Part B program, BEISFS Advisors review a sample of child records from that EI program. The records may be reviewed either through the PELICAN-EI data system or onsite child record review. BEIS/FS Advisors review the date of the IEP, the child’s birthdate, and any reason for a delay in meeting this timeline in order to determine that the local EI program is now correctly implementing the regulatory requirement for IEPs by the child’s third birthday.   
   
In addition to a review of child records, local Preschool Early Intervention programs are required to submit a Quality Enhancement Plan (QEP), which is approved by BEISFS, to address correction of all areas of noncompliance. Implementation of the QEP must be validated within one year of issuance of the findings report. BEISFS Advisors review documentation of completion of any QEP activities as part of the validation of correction of systemic noncompliance. Documentation may include reviewing updated local policies and procedures, documentation of staff training on new procedures, or observations of service delivery as appropriate.   
   
BEISFS has verified that all local Early Intervention programs that had identified noncompliance in FFY 2018 are correctly implementing regulatory requirements related to the provision of IEPs by the third birthday of children transitioning from the Part C program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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

For each individual case of noncompliance, BEISFS Advisors reviewed the record of the identified child, either through the PELICAN-EI data system or onsite record review, to verify that the child received an IEP, although late. BEISFS has verified that all local Early Intervention programs with individual cases of noncompliance identified in FFY 2018 developed an IEP for the identified child, unless the child was no longer within the jurisdiction of the Early Intervention program, consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 12 - Prior FFY Required Actions

None

## 12 - OSEP Response

## 12 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 13: Secondary Transition

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Effective Transition

**Compliance indicator**: Secondary transition: 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 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 was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

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

**Instructions**

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 81.19% | 83.07% | 84.32% | 82.18% | 80.18% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,275 | 1,572 | 80.18% | 100% | 81.11% | Did Not Meet Target | No Slippage |

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

State monitoring

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

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

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

**If no, please explain**

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

**Provide additional information about this indicator (optional)**

Due to COVID-19 mandatory school closures, the BSE extended timelines for corrective action of noncompliance. BSE has verified that all corrective action was closed within the extension granted.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 174 | 164 | 10 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

When findings of noncompliance are issued, the LEA is informed of the regulation that is being violated (linked to federal and state regulations) and must develop a CAVP that is approved by the BSE. The CAVP is also linked to technical assistance resources through the PaTTAN and IU systems. The CAVP addresses correction of policies, procedures, and practices to ensure systemic correction. CAVPs include required corrective action/evidence of change, timelines and resources required, and tracking of timelines to closure. The BSE monitors implementation of the CAVP through reviews of revised policies and procedures and verification of correction as evidenced by data in a sample of student files. The CAVP is monitored until all corrective action has been completed. All corrective action must be completed within one year of the notification of a finding. Because the system is web-based, BSE is able to track progress in closing the CAVP and can capture real-time data concerning status in completing corrective action.  
  
BSE has follow-up procedures in place to verify correction of noncompliance. In addition to systemic correction of noncompliance, the BSE reviewed the files of all students whose IEPs were not in compliance with indicator 13 transition requirements in FFY 2018 monitoring, and reviewed the students’ updated IEPs until all noncompliance was corrected. The BSE ensured correction of noncompliance systemically and specifically for every individual student whose IEP had noncompliance, unless the student was no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02.

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

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 13 - Prior FFY Required Actions

None

## 13 - OSEP Response

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Effective Transition

**Results indicator:** Post-school outcomes: Percent 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.

Enrolled in higher education or competitively employed within one year of leaving high school.

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

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

**Data Source**

State selected data source.

**Measurement**

A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

B. Percent enrolled in higher education or competitively employed within one year of leaving high school = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

**Instructions**

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

Collect data by September 2020 on students who left school during 2018-2019, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2018-2019 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” in the FFY 2019 SPP/APR, due February 2021:

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, as amended by Workforce Innovation and Opportunity Act (WIOA), and 34 CFR §361.5(c)(9). For the purpose of defining the rate of compensation for students working on a “part-time basis” under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

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

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

**II. *Data Reporting***

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.

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2009 | Target >= | 25.70% | 26.40% | 27.10% | 27.80% | 27.80% |
| A | 27.99% | Data | 25.76% | 28.84% | 33.08% | 29.53% | 27.55% |
| B | 2009 | Target >= | 60.40% | 60.80% | 61.00% | 62.00% | 62.00% |
| B | 48.90% | Data | 60.60% | 67.32% | 70.78% | 69.14% | 71.66% |
| C | 2009 | Target >= | 67.80% | 68.80% | 69.90% | 70.90% | 70.90% |
| C | 65.84% | Data | 69.23% | 73.34% | 76.90% | 75.33% | 77.58% |

**FFY 2019 Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 28.50% |
| Target B >= | 65.00% |
| Target C >= | 72.00% |

**Targets: Description of Stakeholder Input**

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

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 2,089 |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 646 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 844 |
| 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) | 86 |
| 4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed). | 7 |

| **Measure** | **Number of respondent youth** | **Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 646 | 2,089 | 27.55% | 28.50% | 30.92% | Met Target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 1,490 | 2,089 | 71.66% | 65.00% | 71.33% | Met Target | No Slippage |
| C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4) | 1,583 | 2,089 | 77.58% | 72.00% | 75.78% | Met Target | No Slippage |

**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.

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

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

The sampling plan for this indicator was approved by OSEP in Pennsylvania’s FFY 2005 SPP and is continued for this submission. The present cohort consists of the same set of LEAs on the same schedule as was devised in the original submission. The sampling plan also includes all LEAs that have been established since the original approval. This group of LEAs provides a representative sample of leavers based on LEA size, whether the LEAs are urban, suburban or rural, disability category, race/ethnicity and gender.  
  
The FFY 2019 response rate of 59.3% 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 NPSO’s Strategies for Hard to Reach Students.  
  
In addition, during the span of its Indicator 14 Post School Outcomes Survey, Pennsylvania has implemented a wide range of sound strategies to address sporadic underrepresentation in the annual response rates of various subgroups. These strategies have included:  
  
• enhanced presentations about the importance of obtaining representative response rates during mandatory annual training for LEAs administering Exit Surveys and Post School Outcome Surveys;  
  
• PaTTAN consultants reviewing state summary information and addressing any specific concerns about representativeness in previous surveys;  
  
• reviewing NPSO’s Strategies for Hard to Reach Students with participating LEAs;  
  
• providing a mid-point status report alerting LEAs to any potential discrepancies in response rates for specific subgroups, leading to an increase in the intensity of efforts to contact former students, especially those in affected subgroups;  
  
• conducting focus group meetings to discuss the successful strategies LEAs employed to contact youth, especially hard to reach youth, to develop additional guidance documents for future cohorts of LEAs administering the PaPOS surveys; and  
  
• providing continued collaboration with the former NPSO (now a part of the National Technical Assistance Center on Transition) to research other states’ survey procedures, with specific focus on effective strategies for improving representativeness in response rates.

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

**Include the State’s analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.**

To determine the representativeness of the respondent group, comparisons were made to the target population for all disability, racial/ethnic and leaver categories, as well as gender and geography. Of the 29 comparisons made, 25 fell well within a state-established ± 5.0% tolerance level. In fact, 21 comparisons were less than ± 1.0%, and only five comparisons were above ± 2.0%.

| **Question** | **Yes / No** |
| --- | --- |
| Are the response data representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school? | NO |

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

To improve representativeness, BSE will continue to implement the strategies described above. Further, the PaTTAN office responsible for data collection for this Indicator will more closely monitor LEA efforts in contacting former students and focus those LEA efforts in obtaining responses from former students representing the few demographic categories that were not representative in FFY 2019.

**Provide additional information about this indicator (optional)**

Due to the COVID-19 pandemic and the closing of schools on March 13, 2020, data collection timelines were extended to facilitate the collection of these data.

## 14 - Prior FFY Required Actions

None

## 14 - OSEP Response

## 14 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether the FFY 2020 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

# Indicator 15: Resolution Sessions

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / General Supervision

**Results Indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements.

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

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (E*MAPS*)).

**Measurement**

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

**Instructions**

Sampling is not allowed.

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

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline, targets and improvement activities, 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 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1 Number of resolution sessions | 758 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1(a) Number resolution sessions resolved through settlement agreements | 253 |

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

NO

**Targets: Description of Stakeholder Input**

Please refer to the Stakeholder Involvement section of the Introduction where this description resides.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2012 | 27.38% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 24.00% - 35.00% | 24.00% - 35.00% | 24.00% - 35.00% | 24.00% - 35.00% | 24.00% - 35.00% |
| Data | 33.20% | 43.75% | 32.21% | 36.31% | 35.06% |

**Targets**

| **FFY** | **2019 (low)** | **2019 (high)** |
| --- | --- | --- |
| Target | 28.00% | 38.00% |

**FFY 2019 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2018 Data** | **FFY 2019 Target (low)** | **FFY 2019 Target (high)** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 253 | 758 | 35.06% | 28.00% | 38.00% | 33.38% | Met Target | No Slippage |

**Provide additional information about this indicator (optional)**

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

## 15 - Required Actions

# Indicator 16: Mediation

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / General Supervision

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

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

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = (2.1(a)(i) + 2.1(b)(i)) divided by 2.1) times 100.

**Instructions**

Sampling is not allowed.

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

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline, targets and improvement activities, 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 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1 Mediations held | 161 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.a.i Mediations agreements related to due process complaints | 3 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.b.i Mediations agreements not related to due process complaints | 117 |

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

NO

**Targets: Description of Stakeholder Input**

Please refer to the Stakeholder Involvement section of the Introduction where this description resides.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 79.30% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 75.00% - 85.00% | 75.00% - 85.00% | 75.00% - 85.00% | 75.00% - 85.00% | 75.00% - 85.00% |
| Data | 77.96% | 79.40% | 80.83% | 80.11% | 76.58% |

**Targets**

| **FFY** | **2019 (low)** | **2019 (high)** |
| --- | --- | --- |
| Target | 79.50% | 89.50% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target (low)** | | **FFY 2019 Target (high)** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 3 | 117 | 161 | 76.58% | 79.50% | 89.50% | | 74.53% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

A review was conducted by the Office for Dispute Resolution (ODR) of the mediations that were held but did not reach a written agreement during the mediation session. The following trends were identified:  
   
 • 42% of these mediations had issues related to a proposed placement change, alternative placement, and/or private school. Mediators have reported that when mediating these issues, parties are less likely to move from their position on placement.   
   
 • 13% of these mediations resulted in either a verbal agreement or a written agreement that parties wanted to review with a non-participant prior to signing, and then failed to return the signed agreement to ODR. While the lack of a signed mediation agreement means that these mediations cannot be counted as an agreement, and are not reflected in the mediation agreement rate, the mediators report that parties did move forward with resolution of the issues.

**Provide additional information about this indicator (optional)**

Mediators report that mediating in a virtual format can be more challenging in high conflict cases. They have reported that it is more difficult to create connections among the parties and read body language when not in-person. ODR is pursuing additional training on strategies for mediating in a virtual environment.

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan – Part B SSIP Indicator

The State’s State Systemic Improvement Plan (SSIP) attachment was not embedded due to privacy protections.

# Certification

**Instructions**

**Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.**

**Certify**

**I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.**

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

**Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.**

**Name:**

Carole A. Clancy

**Title:**

Director, Bureau of Special Education, Pennsylvania Department of Education

**Email:**

caclancy@pa.gov

**Phone:**

717.783.6880

**Submitted on:**

04/26/21 10:29:02 AM

# ED Attachments

  

1. Data suppressed due to privacy protection [↑](#footnote-ref-2)
2. Percentage blurred due to privacy protection [↑](#footnote-ref-3)