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

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

**For reporting on   
FFY 2021**

**Tennessee**

U.S. Department of Education seal

**PART B DUE February 1, 2023**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

The State Performance Plan (SPP)/Annual Performance Report (APR) documents and evaluates state implementation of special education on an annual basis. Every state is required to develop a plan describing how improvements will be made to special education programs, how special education programs will be assessed, and the targets for the 17 indicators of performance. These indicators focus on information specific to students with disabilities (SWDs) and can be either compliance-based or results-based.

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

For additional information about how data collection and reporting for Indicators 1 through 17 were impacted by COVID-19, please see the narratives and “Provide additional information about this indicator (optional)” field within each Indicator section.

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

147

**General Supervision System:**

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

The Tennessee Department of Education (“the department”) utilizes a general supervision structure with multiple systems working in concert that includes monitoring, local determinations for LEAs based on indicators in the SPP/APR, and dispute resolution.  
  
Monitoring System  
  
Results-Based Monitoring: Tennessee's multi-tiered monitoring framework includes three distinct levels: Level 3 (on-site review of LEA and school-level documentation with discussions), Level 2 (virtual LEA-level review and discussion), and Level 1 (review of LEA-level submissions). A mutli-factor risk analysis identifies the likelihood (i.e., risk) that an LEA may not comply with certain requirements. Results from the analysis designate each LEA's risk and monitoring level: significant (Level 3 monitoring), elevated (Level 2 monitoring), or low (Level 1 monitoring). Each LEA in the state must participate in one level of Results-Based Monitoring each year through the state’s grants management platform, ePlan. A random selection of one or more LEAs to participate in a Level 3 monitoring occurs prior to determining the Level 2 and 1 selections.  
  
Individualized Education Program (IEP) Monitoring: The IEP monitoring system utilizes a four-step process that includes all LEAs in the state. All LEAs receive training and support on the process through available printed resources, office hours, webinars, or in-person training offered by the department annually.  
  
In the first step of this monitoring process, the department provides each LEA with 6 to 28 randomly selected student records to review and evaluate for compliance, with the exact number based on a risk assessment from the previous year. An algorithm ensures that at least one file representing each of the following areas is selected: transition, pre-K, and gifted. The remaining files are representative of the SWD population in the LEA. The case manager or teacher must assess these records using the protocol in the monitoring platform. Then, the LEA-level administrator (most often the IDEA Director) reviews responses and may make revisions before submitting the final review to the department. A copy of the Federal Fiscal Year (FFY) 2021 IEP Monitoring Protocol is available at https://eplan.tn.gov/DocumentLibrary/ViewDocument.aspx?DocumentKey=1783950&inline=true  
  
Upon completion of the first two levels of review by the LEA, the department conducts a two-level review of the LEA’s IEP Monitoring via the same platform. State-level monitoring specialists in the Division of Federal Programs and Oversight (FPO) conduct the third review through an audit of submitted documentation. They may agree or disagree with the LEA’s responses based on the same protocol LEAs used to upload and assess the files. Their feedback and internal notes are housed in the monitoring system. Lastly, the state-wide IDEA compliance manager reviews and finalizes all decisions in the system. The system generates a final IEP Monitoring Results Report, and the compliance manager notifies all LEAs when results are available to review. The department continues to hold weekly office hours to discuss any questions that LEAs may have regarding the review process, the IEP Monitoring Results Report, or needed action steps.  
  
Fiscal Monitoring: The fiscal monitoring of IDEA, Part B funds and grants is completed by the Office of Local Finance in collaboration with FPO as part of Results-Based Monitoring. This monitoring ensures that LEAs are appropriately budgeting and spending IDEA, Part B funds at both the LEA- and school-level. In addition, fiscal monitoring is completed for LEAs awarded grants and discretionary funds from IDEA, Part B to certify that those grants and funds are being used as intended and in accordance with IDEA, Part B requirements.  
  
Local Determinations   
  
Since the FFY 2011 APR, the department has employed a local determinations process focused not only on compliance indicators but also on results. This process supports not only the overall goals of the department to continue redirecting focus on student performance and outcomes, but also aligns to the national shift toward results-driven accountability. Local determinations are made using LEA-specific data for almost all indicators, with each indicator weighted based on department priorities. The focus on student performance is evident in the heavy weighting of results-based indicators. Other indicators that are solely compliance focused and/or predicated on data such as survey results have a lesser weight.  
  
The local determination assigned to each LEA is based on overall points allocated once the weights of each indicator are calculated. In addition, the department uses a metric to assess year-to-year change in LEA performance for each results-based indicator, when possible. Each LEA is provided a detailed matrix (see https://www.tn.gov/content/dam/tn/education/special-education/lea\_apr\_indicator\_summary\_2020-21.pdf) listing their data for each indicator included in the local determinations process, how their data compare to the state, and whether they met the state-established target.  
  
All LEAs, regardless of their determination, must address flagged indicators in their comprehensive LEA plan. These plans are submitted through the LEA planning platform, InformTN. This reduces the paperwork burden for LEAs, creates a continuum of communication throughout the entire department, and ensures that improvement strategies and efforts for SWDs are included in the overall LEA improvement plan rather than being disparate and disconnected.  
  
In addition to addressing flagged indicators, LEAs determined to be “Needs Assistance” must attend a virtual meeting to review the APR process, learn how to conduct a root cause analysis, and brainstorm strategies to improve district performance. LEAs determined to be “Needs Intervention” must complete all the tasks associated with the “Needs Assistance” designation and also participate in virtual or in-person site visits. During those visits, staff from the Centers of Regional Excellence (CORE) work with LEAs to address flagged indicators. Using a root cause analysis, relevant LEA staff are asked about practices and procedures that might impact each of the flagged indicators. Data from the specific APR reporting year and other current data are used to guide the development of strategies that will be included in the LEA’s comprehensive plan for improvement. Follow-up conversations to discuss progress within the plan are scheduled on a quarterly basis. LEAs that are determined to be “Needs Substantial Intervention” must complete all the tasks associated with the “Needs Intervention” designation and are also required to develop a detailed action plan to accompany the LEA improvement plan. LEAs must adhere to this action plan and meet with CORE and/or the Special Education Programming Team bi-monthly to discuss progress and any challenges that may be preventing them from meeting the goals outlined in their plans.  
  
Dispute Resolution  
  
The department's Office of General Counsel (OGC) is responsible for overseeing dispute resolution throughout the course of each year. This includes investigating and resolving administrative complaints as well as processing and monitoring mediation and due process hearings requests. Signed written complaints should have reports issued and be resolved within the allotted 60-day timeline or the agreed upon extended timeline. Extended timelines could be due to exceptional circumstances relative to the particular complaint or because the parent/individual/organization and department agree to allow additional time to engage in mediation or alternative forms of dispute resolution. Mediation and due process requests are to be documented by the OGC. If due process requests are fully adjudicated, this must be done within the 45-day timeline or the agreed upon extended timeline (an extension can be approved by hearing officer at the request of either party).

**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.**

Identifying Initiatives   
  
The department is continuing to champion the activities outlined in the State Systemic Improvement Plan (SSIP) regarding access to high-quality instruction for all SWDs and ensuring educators are providing appropriate access points, scaffolds, accommodations, and/or modifications to students that address their areas of deficit/need. In order to focus on access to high-quality instruction, aligning to state priorities and other initiatives, the department shifted from a teacher-focused training (Access for All) to a network (Access for All Learning Network [AALN]). AALN provides training and support at the district and school leadership level to build capacity throughout the state for the collaboration of general and special education teachers using high-quality instructional materials (HQIM) to identify access points and scaffolds in their preparation of instruction.   
   
Metrics are collected throughout the initiative to assess implementation success and adjust as necessary. Although Tennessee has made great strides in inclusive opportunities for K-12 in terms of setting, we have not yet closed the gap related to proficiency and student growth. The K-12 AALN activities are designed to increase access to instruction, not simply access to the educational environment.   
   
Given the extensive data on successes resulting from SSIP activities, as well as feedback from stakeholders and the need for continued support in the area of high-quality instruction, AALN provides training and support using the state’s unit and lesson preparation protocol for the collaboration of general and special education teachers and the Instructional Practice Guide (IPG), viewing them through the lens of students with disabilities. In year one (2022-23) and year two (2023-24), the focus is on literacy instruction using HQIM and high-quality instructional strategies. The network will ultimately develop mentor districts for the state. In May of 2022, the shift in initiative was announced and previous Access for All districts we given the opportunity to join the new network. Fifteen districts elected to be a part of the new initiative. Of the 15 districts, 13 were already partnering with the state around literacy. In June 2022, the department hosted a weeklong training to dive into the protocols and IPG resources. During the 2022-23 school year, the network has hosted monthly Learning Network meetings, quarterly Communities of Practice (CoPs), and provided coaching for leadership by the regional access coaches (RACs).  
   
Training on Initiatives  
   
The department has gone to great lengths to increase the amount of high-quality technical assistance and professional development offered to LEAs throughout the state. Many of the divisions within the department provide individual trainings and professional development to their specific populations relative to current policies and initiatives. However, to avoid siloing of efforts, the department has used its strategic plan (including the Special Education Coordination Framework) to create linkages in work being done across divisions and ensure that a diverse group of department staff and stakeholders are at the table to have conversations about the broad array of work being done. This work has ensured that SWDs and educators of SWDs remain a focus of the work being done by the department as a whole and that department staff remain cognizant of these subgroups.  
   
The instructional programming team within the Division of Special Education and Intervention Programs conducts the majority of instructional technical assistance and professional development for special education staff within Tennessee, particularly regarding the aforementioned initiatives. This assistance has included the development of a special education framework to assist teachers in the writing of Instructionally Appropriate IEPs and collaboration with others in the department relative to Response to Instruction and Intervention (RTI²). Each member of the programming team has a particular area of expertise, ranging from speech/language therapy to high school transition, so that the team can offer a wide gamut of professional development and technical assistance to LEAs in all areas of special education.  
   
CORE interventionists, in collaboration with select programming team members, serve as regional support for LEAs across the state. They not only take the lead in working with "Needs Intervention" LEAs, but also connect districts to resources and training on the aforementioned initiatives and support implementation and application at the district level. The CORE interventionists serve as the conduit to LEAs so that there is one main point of contact at the state for LEAs rather than a multitude of different people needed to answer different questions. The interventionists are able to connect LEAs to resources, training opportunities, and guidance regarding department initiatives. In addition, four AALN regional access coaches (RACs) provide school leadership- or district leadership-directed Cognitive Coaching cycles to work toward even greater behavioral change as educators implement the training in their district/schools/classrooms.  
   
The IDEA Data Team provides professional development and routine technical assistance to LEAs on the use of data to inform instructional decision-making and the effective use of the statewide IEP data management system (EasyIEP). This team develops documentation and manuals for LEAs regarding inputting special education information into the statewide system and goes to great lengths to link the technology platform to the department initiatives to ensure streamlined communication to LEAs. Embedded in this IEP data management system are many resources addressing crucial initiatives produced by the department to ensure such information can be readily accessed by users when writing IEPs and completing other special education documentation. In addition, the external evaluation team for AALN will provide data dashboards for districts with demographic filters for both survey and observation data, as well as providing coaching data statewide.  
   
Identifying LEAs for Technical Assistance/Professional Development  
   
While some of the technical assistance and professional development the department provides is predicated on LEA requests for support, the department also uses data to determine whether LEAs require technical assistance or professional development. In particular, the APR local determinations are used as a barometer of whether LEAs are successfully improving the outcomes of SWDs and are compliant with federal and state regulations. While those LEAs in the determination category of “Meets Requirements” may receive technical assistance or professional development if requested, the department focuses much of its resources and efforts on providing support to those LEAs in “Needs Assistance,” “Needs Intervention,” and “Needs Substantial Intervention” determination categories.   
  
In addition, the department utilizes a cross-divisional approach to identify additional technical assistance needs. This group, the IDEA collaborative, includes leadership from the Division of Special Education and Intervention Programs, the Office of General Counsel, FPO, and CORE. The collaborative meets weekly to review the findings from results-based monitoring, dispute resolution, and other communication with LEAs. This group subsequently makes recommendations for technical assistance, focused monitoring, or additional supports that may be needed.

**Professional Development System:**

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

In addition to the systems listed under the “Technical Assistance System” section above, the department currently operates an online professional development resource, “Best for All Central.” This tool is designed to be a “one stop shop” for educators to access online training modules and additional resources to improve instructional practices. The Division of Special Education and Intervention Programs continues to add specific materials related to special education to this resource, including access to a network of supports called the Tennessee Technical Assistance Network (TN-TAN). Stakeholders request assistance from the network through a single request form that is directed by the coordination grantee to the appropriate technical assistance personnel, including preschool, behavior, autism, and RTI2-A and RTI2-B supports.   
   
The Special Education Programming Team also provides several opportunities for in-person or virtual professional development for special educators throughout the year. The department hosts institutes for special education supervisors annually that include professional development related to the requirements of IDEA as well as state initiatives to improve outcomes for SWDs. The Assistant Commissioner of Special Education and Intervention Programs, within the Office of Academics, also hosts a monthly two-hour virtual meeting with special education supervisors that provides guidance around IDEA-related issues, addresses concerns from the field, and gives educators an opportunity to engage with department staff in an open forum.

**Broad Stakeholder Input:**

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

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

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

YES

**Number of Parent Members:**

21

**Parent Members Engagement:**

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

The department understands the value and importance of parent involvement in SPP/APR planning and provided parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents with opportunities to analyze data and provide feedback that informed the SPP/APR target setting process and the development of improvement strategies. In FFY 2021, the Senior Director of Data Analysis for Special Populations led discussions with the AC about the target setting process for the FFY 2020-2025 SPP/APR package, emphasizing the new stakeholder requirements and the focus on parent engagement. He requested that AC members complete the survey themselves (both during the discussions and via email communications) and connect with parents, if possible, to reinforce the critical nature of reviewing the target setting presentations and providing feedback on the proposed targets. The Senior Director of Data Analysis for Special Populations also met with one of the department’s family engagement partners, The ARC Tennessee, to provide the target setting feedback process information and convey a similar message around the importance of involving parents in this work. He met directly with The ARC Tennessee’s director to discuss ways to effectively disseminate the feedback survey and reach parents. Finally, the department made all SPP/APR target setting materials available to the public on its website (https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html under the “SPP/APR Target Setting Feedback” tab), encouraging responses from the broader community including individual parents of SWDs. Beyond the SPP/APR target setting process, the department engages frequently with parent stakeholders through the activities described in the “Broad Stakeholder Input” section above (e.g., AC meetings) and the “Activities to Improve Outcomes for Children with Disabilities” section below (e.g., DOE “listening sessions”).

**Activities to Improve Outcomes for Children with Disabilities:**

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

The department engages in numerous activities to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for SWDs, most notably working with a variety of organizations and partners to engage in continuous feedback loops to identify potential areas of needed support, develop guidance, seek feedback and implement the guidance, and monitor results for continuous improvement. The department utilizes this model to ensure all stakeholders have opportunities to participate in all components of the improvement cycle and inform the prioritized work to support students with disabilities.   
  
The department contracts with The ARC Tennessee (ARC), a statewide, nonprofit advocacy agency that works to build the capacity of families, schools, and communities to ensure a successful education experience and postsecondary success for students with disabilities. It is the primary resource the department uses to build family partnerships. The ARC utilizes eight regional family engagement specialists to connect with local families and LEAs. The use of regional specialists ensures diversity among families in terms of race/ethnicity, geography, socioeconomic status, and children’s needs. In addition to hosting numerous family engagement sessions, the specialists serve as a resource to collect data around family support needs that TDOE utilizes to develop universal and targeted supports. The ARC also facilitates monthly listening sessions with the department and statewide advocacy representatives. The sessions provide a mechanism for identifying data trends for prioritizing the development of additional resources for families and LEAs. Using the continuous feedback model, the department evaluates the impact of the guidance on student outcomes.   
  
The Governor’s Advisory Council for the Education of Students with Disabilities' (AC) mission is to ensure the provision of appropriate services for children with disabilities in Tennessee. The members are representative of the diversity across the state and include representation from multiple stakeholders, including parents of students with disabilities as well as individuals with disabilities who work closely with the department to engage in the continuous improvement feedback model. The AC provides public input for proposed policy or regulation changes, advises of unmet needs in the education of students with disabilities, and supports the development of corrective action plans in response to federal monitoring reports.   
  
Additionally, there are many organizations with which the department collaborates throughout the year, either having parent representatives or parent feedback mechanisms for collecting and sharing input with the department. Examples include the Tennessee Dyslexia Advisory Council; Tennessee Council for the Deaf, Deaf-Blind, and Hard of Hearing; Tennessee Deaf-Blind Project Advisory Council; Tennessee Council on Developmental Disabilities; Tennessee Council on Autism Spectrum Disorder; Tennessee Works Partnership; Tennessee State Rehabilitation Council; Tennessee Employment Roundtable; Tennessee Employment First Task Force; and the TransitionTN State Leadership Team. Another feedback mechanism includes the APR Indicator 8 Parent Survey, which solicits feedback from parents on an annual basis. The survey, developed in collaboration with The ARC, includes 10 items covering parent perceptions of the special education services their child receives. Parents are invited to participate using a sampling methodology that ensures that LEAs and schools selected for the survey each year are representative of the state. In FFY 2021, 30,868 parents were invited to participate and the responses were generally representative across various demographic groups in the state.   
  
Finally, the department has specific initiatives and partnerships it has launched to provide parents with resources to improve outcomes for SWDs, including but not limited to S.I.M.P.L.E. Moments (a social media campaign and district partnerships with families around literacy development and engagement); Public Broadcasting Service (foundational literacy and math lessons for families and Tennessee teachers); Family Literacy Nights Turnkey Package (LEA resources for hosting family literacy nights w/ specific guidance for SWDs); and the Ready4K text-based program (text messaging program that provides practical ways for families to engage in literacy and math activities at home).

**Soliciting Public Input:**

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

During FFY 2021, the department’s primary mechanism for soliciting public input included the dissemination of short presentations (https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html under the “SPP/APR Target Setting Feedback” tab) with information and data about the SPP/APR target setting process and the administration of feedback surveys tied to these presentations. Discussions with internal and external stakeholders (such as the AC) regarding the APR target setting process began in October 2021. The presentations and surveys were made publicly available on the department website in late November/early December 2021 and remained open until late January 2021. Each presentation followed the same format and included a quick overview of the SPP/APR, a definition of the APR indicator on which the presentation was focused, the overall five-year data trend, the proposed targets for the APR indicator, and a link to the stakeholder feedback survey.   
  
The stakeholder feedback surveys for each APR indicator were also similar in format. They collected respondent demographic information (role, race/ethnicity, geographic location) and asked stakeholders to respond to the following questions:   
  
1. How did you hear about this APR target feedback opportunity?   
 a. Through an advisory/advocacy group   
 b. Through my local school/district   
 c. Through social media/word-of-mouth   
 d. I found it myself by searching the internet   
 e. Other:   
2. After reviewing the proposed targets for Indicator [#], which of the following statements best represents your opinion of the targets?   
 a. The targets are too challenging   
 b. The targets are not challenging enough   
 c. The targets are just right   
3. After reviewing the proposed targets, which of the following statements best represents your opinion of the data & analyses provided?   
 a. The data & analyses are too complex   
 b. The data & analyses are not complex enough   
 c. The data & analyses are appropriate   
4. Please provide any specific feedback you have regarding the proposed targets:   
5. Please provide any specific feedback you have regarding the improvement strategies or activities needed to reach the proposed targets:   
  
The department received 153 responses across 14 different feedback surveys. Respondents reported being in a variety of stakeholder roles and were located in 28 different Tennessee counties across the state.  
  
Beyond the SPP/APR target setting process, the department solicits public input frequently through the activities described in the “Broad Stakeholder Input,” “Parent Members Engagement,” and “Activities to Improve Outcomes for Children with Disabilities” sections above.

**Making Results Available to the Public:**

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

An overview of the SPP/APR target setting process for each Indicator is available to the public on the state website (https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html) under the “SPP/APR Target Setting Feedback” tab. The “APR Local Determinations Process Guide (https://www.tn.gov/content/dam/tn/education/special-education/APR\_Local\_Determinations\_Process\_Guide.pdf), posted publicly on the same state website under the ”APR Resources” tab, contains the results of the target setting process for each Indicator starting on page 8.

**Reporting to the Public**

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

The department reports annually to the public on the performance of the state and each LEA through the state website: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Reports provided on this site include the full SPPs/APRs for the past eight years, a file detailing LEA performance on each SPP/APR indicator as compared to state SPP/APR targets (a copy of this file from the FFY 2020 APR can be found here: https://www.tn.gov/content/dam/tn/education/special-education/lea\_apr\_indicator\_summary\_2020-21.pdf, and OSEP's letter of determination for the state for each APR since FFY 2012. Specific data from individual indicators (such as Indicator 3) can be found on the website provided above, the Tennessee state report card (https://tdepublicschools.ondemand.sas.com/), and the department’s Data Downloads & Requests page (https://www.tn.gov/education/districts/federal-programs-and-oversight/data/data-downloads.html).

## Intro - Prior FFY Required Actions

None

## Intro - OSEP Response

## Intro - Required Actions

The State's IDEA Part B determination for both 2022 and 2023 is Needs Assistance. In the State's 2023 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

## 1 - Indicator Data

**Historical Data[[1]](#footnote-2)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 78.72% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 71.87% | 73.55% | 74.43% | 74.73% | 78.72% |
| Data | 71.79% | 72.72% | 73.04% | 73.9%[[2]](#footnote-3) | 78.72% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 79.25% | 79.78% | 80.83% | 81.88% | 82.93% |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 5,358 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 31 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 903 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 101 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 625 |

**FFY 2021 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma** | **Number of all youth with IEPs who exited special education (ages 14-21)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 5,358 | 7,018 | 78.72% | 79.25% | 76.35% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with staff shortages, staff and/or children isolated or quarantined, and an overall decreased capacity to meet the needs of students. With this disruption, students who were working toward a 2021 graduation date were impacted in their ability to access coursework and instructors and meet diploma requirements. In addition, the department was able to determine that, although the total number of students exiting with a regular high school diploma increased by 117 students, the increase was offset by 121 additional students receiving a special education certificate, 103 additional students dropping out, and 31 additional students receiving an alternate diploma. Furthermore, although 44 LEAs increased the percentage of students graduating with a regular high school diploma, the percentage decreased in 70 LEAs.

**Graduation Conditions**

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

The Tennessee Department of Education has raised standards and aligned graduation requirements to best prepare students for college and the workforce. All students must meet these criteria and conditions to graduate with a regular high school diploma, regardless of their disability status.   
   
Following the implementation of the Tennessee Diploma Project in 2009, high school students must complete 22 credits to graduate. They also will be tested in core subject areas with End of Course exams, part of the Tennessee Comprehensive Assessment Program, or TCAP. Their performance on these exams will factor into their semester grade for the course.   
   
To receive a regular high school diploma, all students enrolled in a Tennessee public school during their eleventh (11th) grade year must take either the ACT or SAT. View the FAQ on the policy here: https://www.tn.gov/content/dam/tn/education/documents/sbe\_HS\_Policy\_2\_103\_faq.pdf  
   
Total Required Credits: 22   
   
•Math: 4 credits, including Algebra I, II, Geometry and a fourth higher level math course (Students must be enrolled in a mathematics course each school year)   
•English: 4 credits   
•Science: 3 credits, including Biology, Chemistry or Physics, and a third lab course   
•Social Studies: 3 credits, including U.S. History and Geography, World History and Geography, U.S. Government and Civics, and Economics   
•Physical Education and Wellness: 1.5 credits   
•Personal Finance: 0.5 credits (Three years of JROTC may be substituted for one-half unit of Personal Finance if the JROTC instructor attends the Personal Finance training.)   
•Foreign Language: 2 credits (May be waived by the LEA for students, under certain circumstances, to expand and enhance the elective focus)   
•Fine Arts: 1 credit (may be waived by the local school district for students, under certain circumstances, to expand and enhance the elective focus)   
•Elective Focus: 3 credits consisting of Math and Science, Career and Technical Education, Fine Arts, Humanities, Advanced Placement (AP) or International Baccalaureate (IB)

**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)**

As stated in the “slippage” explanation, COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with staff shortages, staff and/or children isolated or quarantined, and an overall decreased capacity to meet the needs of students. With this disruption, students who were working toward a 2021 graduation date were impacted in their ability to access coursework and instructors and meet diploma requirements.

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

## 1 - Required Actions

# Indicator 2: Drop Out

**Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

Data Source

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

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

Measurement

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

Instructions

*Sampling is not allowed.*

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

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

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

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

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

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

## 2 - Indicator Data

**Historical Data[[3]](#footnote-4)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 7.84% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 3.27% | 3.22% | 3.20% | 3.18% | 7.84% |
| Data | 2.46% | 2.81% | 2.78% | 2.40% | 7.84% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 7.45% | 7.06% | 6.28% | 5.50% | 4.72% |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 5,358 |
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| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 101 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 625 |

**FFY 2021 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to dropping out** | **Number of all youth with IEPs who exited special education (ages 14-21)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 625 | 7,018 | 7.84% | 7.45% | 8.91% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with staff shortages, staff and/or children isolated or quarantined, and an overall decreased capacity to meet the needs of students. With this disruption, students were impacted in their ability to access coursework and instructors, which may have affected their persistence to graduation. In addition, although the percentage of students dropping out decreased in 33 LEAs, the decreases were offset by 65 LEAs in which the percentage increased. Among the LEAs in which the drop out percentage increased, the increase was less than 5 students in 58 of the 65 LEAs, with the number actually decreasing in four of those. Across all LEAs, the average increase was less than one student (0.7) dropping out per LEA.

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

Students in Tennessee are considered dropouts if they meet any of the following criteria:   
   
•A student has unexcused absences for 10 or more consecutive days and all requirements for truancy intervention on behalf of the LEA have been followed;   
•A student transfers to an adult high school, GED program, or job corps and does not earn an on-time regular diploma;   
•A student transfers to another LEA in Tennessee but has no subsequent enrollment records after transferring;   
•A student transfers to another school in the same LEA in Tennessee but has no subsequent enrollment records after transferring;   
•A student does not graduate with their cohort by obtaining a regular high school diploma, a special education diploma, or an occupational diploma, and does not enroll in the SEA the subsequent school year.

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

NO

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

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

As stated in the “slippage” explanation, COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with staff shortages, staff and/or children isolated or quarantined, and an overall decreased capacity to meet the needs of students. With this disruption, students were impacted in their ability to access coursework and instructors, which may have affected their persistence to graduation.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3A: Participation for Children with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3A - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 97.78% |
| Reading | B | Grade 8 | 2020 | 95.95% |
| Reading | C | Grade HS | 2021 | 95.13% |
| Math | A | Grade 4 | 2020 | 98.46% |
| Math | B | Grade 8 | 2020 | 96.87% |
| Math | C | Grade HS | 2021 | 93.33% |

**Targets**

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

**Targets: Description of Stakeholder Input**In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
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Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
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**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 9,985 | 8,526 | 15,196 |
| b. Children with IEPs in regular assessment with no accommodations | 2,556 | 1,392 | 2,477 |
| c. Children with IEPs in regular assessment with accommodations | 6,328 | 5,691 | 10,981 |
| d. Children with IEPs in alternate assessment against alternate standards | 866 | 1,111 | 996 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 9,974 | 8,523 | 18,777 |
| b. Children with IEPs in regular assessment with no accommodations | 2,516 | 1,318 | 3,326 |
| c. Children with IEPs in regular assessment with accommodations | 6,341 | 5,776 | 13,195 |
| d. Children with IEPs in alternate assessment against alternate standards | 861 | 1,111 | 999 |

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

**FFY 2021 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 9,750 | 9,985 | 97.78% | 95.00% | 97.65% | Met target | No Slippage |
| **B** | Grade 8 | 8,194 | 8,526 | 95.95% | 95.00% | 96.11% | Met target | No Slippage |
| **C** | Grade HS | 14,454 | 15,196 | 94.56% | 95.00% | 95.12% | N/A | N/A |

**FFY 2021 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 9,718 | 9,974 | 98.46% | 95.00% | 97.43% | Met target | No Slippage |
| **B** | Grade 8 | 8,205 | 8,523 | 96.87% | 95.00% | 96.27% | Met target | No Slippage |
| **C** | Grade HS | 17,520 | 18,777 | 97.07% | 95.00% | 93.31% | 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.**

Assessment data for all students, including students with disabilities, can be found under the “Assessment Files” tab on the department’s “Data Downloads and Requests” website: https://www.tn.gov/education/districts/federal-programs-and-oversight/data/data-downloads.html. Additional assessment data, including participation and achievement data for SWDs on assessments, can be found under the “Students with Disabilities Participation/Performance on Assessments” tab on the department’s “Special Education Data Services & Reports” website: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html.

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

The United States Department of Education (USED) requested that Tennessee align its EDFacts assessment reporting with its accountability assessment reporting. To comply with this request, Tennessee’s 2021-22 EDFacts FS185 included students participating in the English I and English II End-of-Course (EOC) assessments rather than just the English II EOC assessment (as was the case in previous reporting years). Likewise, Tennessee’s 2021-2022 EDFacts FS188 included students participating the Algebra I, Algebra II, Integrated Math I, Integrated Math II, Integrated Math III, and Geometry EOC assessments rather than just the Algebra I and Integrated Math I assessments (as was the case in previous reporting years). Tennessee has reset the Grade HS baselines in FFY 2021 to account for the change to the composition of these student groups, which differ from previous years’ submissions.

## 3A - Prior FFY Required Actions

None

## 3A - OSEP Response

The State has revised the baseline for HS Reading and HS Math for this indicator, using data from FFY 2021, and OSEP accepts that revision.

## 3A - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3B - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 8.89% |
| Reading | B | Grade 8 | 2020 | 2.00% |
| Reading | C | Grade HS | 2021 | 6.85% |
| Math | A | Grade 4 | 2020 | 11.56% |
| Math | B | Grade 8 | 2020 | 4.69% |
| Math | C | Grade HS | 2021 | 3.26% |

**Targets**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 9.89% | 10.89% | 11.89% | 12.89% | 13.89% |
| Reading | B >= | Grade 8 | 3.00% | 4.00% | 5.00% | 6.00% | 7.00% |
| Reading | C >= | Grade HS | 6.85% | 7.85% | 8.85% | 9.85% | 10.85% |
| Math | A >= | Grade 4 | 12.56% | 13.56% | 14.56% | 15.56% | 16.56% |
| Math | B >= | Grade 8 | 5.69% | 6.69% | 7.79% | 8.89% | 9.89% |
| Math | C >= | Grade HS | 3.26% | 4.26% | 5.26% | 6.26% | 7.26% |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 8,884 | 7,083 | 13,458 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 681 | 98 | 296 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 361 | 125 | 626 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 8,857 | 7,094 | 16,521 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 763 | 189 | 176 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 450 | 331 | 363 |

**FFY 2021 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 1,042 | 8,884 | 8.89% | 9.89% | 11.73% | Met target | No Slippage |
| **B** | Grade 8 | 223 | 7,083 | 2.00% | 3.00% | 3.15% | Met target | No Slippage |
| **C** | Grade HS | 922 | 13,458 | 4.99% | 6.85% | 6.85% | N/A | N/A |

**FFY 2021 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 1,213 | 8,857 | 11.56% | 12.56% | 13.70% | Met target | No Slippage |
| **B** | Grade 8 | 520 | 7,094 | 4.69% | 5.69% | 7.33% | Met target | No Slippage |
| **C** | Grade HS | 539 | 16,521 | 1.31% | 3.26% | 3.26% | 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.**

Assessment data for all students, including students with disabilities, can be found under the “Assessment Files” tab on the department’s “Data Downloads and Requests” website: https://www.tn.gov/education/districts/federal-programs-and-oversight/data/data-downloads.html. Additional assessment data, including participation and achievement data for SWDs on assessments, can be found under the “Students with Disabilities Participation/Performance on Assessments” tab on the department’s “Special Education Data Services & Reports” website: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html.

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

USED requested that Tennessee align its EDFacts assessment reporting with its accountability assessment reporting. To comply with this request, Tennessee’s 2021-22 EDFacts FS175 included students participating in the English I and English II End-of-Course (EOC) assessments rather than just the English II EOC assessment (as was the case in previous reporting years). Likewise, Tennessee’s 2021-2022 EDFacts FS178 included students participating the Algebra I, Algebra II, Integrated Math I, Integrated Math II, Integrated Math III, and Geometry EOC assessments rather than just the Algebra I and Integrated Math I assessments (as was the case in previous reporting years). Tennessee has reset the Grade HS baselines in FFY 2021 to account for the change to the composition of these student groups, which differ from previous years’ submissions.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

The State has revised the baseline for HS Reading and HS Math for this indicator, using data from FFY 2021, and OSEP accepts that revision.  
  
The State revised its targets for HS Reading and HS Math for this indicator, and OSEP accepts those targets.

## 3B - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

of testing.

## 3C - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 38.52% |
| Reading | B | Grade 8 | 2020 | 46.07% |
| Reading | C | Grade HS | 2020 | 56.31% |
| Math | A | Grade 4 | 2020 | 49.82% |
| Math | B | Grade 8 | 2020 | 52.08% |
| Math | C | Grade HS | 2020 | 57.34% |

**Targets**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 42.52% | 46.52% | 50.52% | 54.52% | 58.52% |
| Reading | B >= | Grade 8 | 50.07% | 54.07% | 58.07% | 62.07% | 66.07% |
| Reading | C >= | Grade HS | 60.31% | 64.31% | 68.31% | 72.31% | 76.31% |
| Math | A >= | Grade 4 | 53.82% | 57.82% | 61.82% | 65.82% | 69.82% |
| Math | B >= | Grade 8 | 56.08% | 60.08% | 64.08% | 68.08% | 72.08% |
| Math | C >= | Grade HS | 61.34% | 65.34% | 69.34% | 73.34% | 77.34% |

**Targets: Description of Stakeholder Input**In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 866 | 1,111 | 996 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 353 | 527 | 646 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 861 | 1,111 | 999 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 515 | 618 | 574 |

**FFY 2021 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 353 | 866 | 38.52% | 42.52% | 40.76% | Did not meet target | No Slippage |
| **B** | Grade 8 | 527 | 1,111 | 46.07% | 50.07% | 47.43% | Did not meet target | No Slippage |
| **C** | Grade HS | 646 | 996 | 56.31% | 60.31% | 64.86% | Met target | No Slippage |

**FFY 2021 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 515 | 861 | 49.82% | 53.82% | 59.81% | Met target | No Slippage |
| **B** | Grade 8 | 618 | 1,111 | 52.08% | 56.08% | 55.63% | Did not meet target | No Slippage |
| **C** | Grade HS | 574 | 999 | 57.34% | 61.34% | 57.46% | Did not meet target | No Slippage |

**Regulatory Information**

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

**Public Reporting Information**

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

Assessment data for all students, including students with disabilities, can be found under the “Assessment Files” tab on the department’s “Data Downloads and Requests” website: https://www.tn.gov/education/districts/federal-programs-and-oversight/data/data-downloads.html. Additional assessment data, including participation and achievement data for SWDs on assessments, can be found under the “Students with Disabilities Participation/Performance on Assessments” tab on the department’s “Special Education Data Services & Reports” website: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html.

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

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

## 3C - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3D - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 24.08 |
| Reading | B | Grade 8 | 2020 | 20.78 |
| Reading | C | Grade HS | 2021 | 33.81 |
| Math | A | Grade 4 | 2020 | 22.02 |
| Math | B | Grade 8 | 2020 | 23.71 |
| Math | C | Grade HS | 2021 | 18.04 |

**Targets**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 23.58 | 23.08 | 22.58 | 22.08 | 21.58 |
| Reading | B <= | Grade 8 | 20.28 | 19.78 | 19.28 | 18.78 | 18.28 |
| Reading | C <= | Grade HS | 33.81 | 33.31 | 32.81 | 32.31 | 31.81 |
| Math | A <= | Grade 4 | 21.52 | 21.02 | 20.52 | 20.02 | 19.52 |
| Math | B <= | Grade 8 | 23.21 | 22.71 | 22.21 | 21.71 | 21.21 |
| Math | C <= | Grade HS | 18.04 | 17.54 | 17.04 | 16.54 | 16.04 |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 71,083 | 73,077 | 143,830 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 8,884 | 7,083 | 13,458 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 26,882 | 18,663 | 56,614 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 1,239 | 442 | 1,866 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 681 | 98 | 296 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 361 | 125 | 626 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 71,017 | 72,996 | 195,315 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 8,857 | 7,094 | 16,521 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 25,952 | 24,799 | 40,373 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 1,329 | 858 | 1,243 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 763 | 189 | 176 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 450 | 331 | 363 |

**FFY 2021 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards** | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 11.73% | 39.56% | 24.08 | 23.58 | 27.83 | Did not meet target | Slippage |
| **B** | Grade 8 | 3.15% | 26.14% | 20.78 | 20.28 | 23.00 | Did not meet target | Slippage |
| **C** | Grade HS | 6.85% | 40.66% | 32.07 | 33.81 | 33.81 | N/A | N/A |

**Provide reasons for slippage for Group A, if applicable**

In 2022 the gap in proficiency rate for children with IEPs and all students on the statewide ELA assessment in grade 4 decreased in 46 LEAs when compared to the previous year. Among the LEAs that decreased their achievement gap, the gap decreased by an average of 7.6%. However, at the same time 94 LEAs increased their achievement gap in grade 4 ELA by an average of 8.2%. The LEAs in which achievement gaps increased also tended to be larger, testing an average of 576 grade 4 students as opposed to an average of 354 grade 4 students among the LEAs that decreased their achievement gaps. Additionally, in half of the LEAs in which achievement gaps increased, the overall grade 4 ELA proficiency rate for students with IEPs also increased; it simply did not increase as much as the rate of all students in the LEA.

**Provide reasons for slippage for Group B, if applicable**

In 2022 the gap in proficiency rate for children with IEPs and all students on the statewide ELA assessment in grade 8 decreased in 60 LEAs when compared to the previous year. Among the LEAs that decreased their achievement gap, the gap decreased by an average of 4.7%. However, at the same time 78 LEAs increased their achievement gap in grade 8 ELA by an average of 5.6%. The LEAs in which achievement gaps increased also tended to be larger, testing an average of 690 grade 8 students as opposed to an average of 318 grade 8 students among the LEAs that decreased their achievement gaps. Additionally, in almost half of the LEAs in which achievement gaps increased, the overall grade 8 ELA proficiency rate for students with IEPs also increased; it simply did not increase as much as the rate of all students in the LEA.

**FFY 2021 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards** | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 13.70% | 38.41% | 22.02 | 21.52 | 24.72 | Did not meet target | Slippage |
| **B** | Grade 8 | 7.33% | 35.15% | 23.71 | 23.21 | 27.82 | Did not meet target | No Slippage |
| **C** | Grade HS | 3.26% | 21.31% | 9.47 | 18.04 | 18.04 | N/A | N/A |

**Provide reasons for slippage for Group A, if applicable**

In 2022 the gap in proficiency rate for children with IEPs and all students on the statewide math assessment in grade 4 decreased in 57 LEAs when compared to the previous year. Among the LEAs that decreased their achievement gap, the gap decreased by an average of 8.7%. However, at the same time 83 LEAs increased their achievement gap in grade 4 math by an average of 9%. The LEAs in which achievement gaps increased also tended to be larger, testing an average of 586 grade 4 students as opposed to an average of 381 grade 4 students among the LEAs that decreased their achievement gaps. Additionally, in almost half of the LEAs in which achievement gaps increased, the overall grade 4 math proficiency rate for students with IEPs also increased; it simply did not increase as much as the rate of all students in the LEA.

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

USED requested that Tennessee align its EDFacts assessment reporting with its accountability assessment reporting. To comply with this request, Tennessee’s 2021-22 EDFacts FS175 included students participating in the English I and English II End-of-Course (EOC) assessments rather than just the English II EOC assessment (as was the case in previous reporting years). Likewise, Tennessee’s 2021-2022 EDFacts FS178 included students participating the Algebra I, Algebra II, Integrated Math I, Integrated Math II, Integrated Math III, and Geometry EOC assessments rather than just the Algebra I and Integrated Math I assessments (as was the case in previous reporting years). Tennessee has reset the Grade HS baselines in FFY 2021 to account for the change to the composition of these student groups, which differ from previous years.  
  
Assessment data for all students, including students with disabilities, can be found under the “Assessment Files” tab on the department’s “Data Downloads and Requests” website: https://www.tn.gov/education/districts/federal-programs-and-oversight/data/data-downloads.html. Additional assessment data, including participation and achievement data for SWDs on assessments, can be found under the “Students with Disabilities Participation/Performance on Assessments” tab on the department’s “Special Education Data Services & Reports” website: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html.

## 3D - Prior FFY Required Actions

None

## 3D - OSEP Response

The State has revised the baseline for High School Reading and High School Math for this indicator, using data from FFY 2021, and OSEP accepts that revision.  
  
The State revised its targets for High School Reading and High School Math for this indicator, and OSEP accepts those targets.

## 3D - Required Actions

# Indicator 4A: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

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

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

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

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

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

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

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

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

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

## 4A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2017 | 20.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 2.00% | 1.80% | 8.00% | 8.00% | 17.19% |
| Data | 8.00% | 20.00% | 26.32% | 20.83% | 71.43% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 14.38% | 11.57% | 8.76% | 5.95% | 3.14% |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
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**FFY 2021 SPP/APR Data**

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

YES

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

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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 5 | 5 | 71.43% | 14.38% | 100.00% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with short-term school closures, shifts to virtual instruction, and student and staff absences due to mandatory isolation and quarantine periods. With this disruption, the statewide count of students with more than 10 days of suspensions and expulsions dropped by just over 75%, from 359 to 84. This large decrease led to only five LEAs meeting the minimum n/cell size for “Number of LEAs in the State” and caused the percentage to increase from the previous year.

**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**

The department utilizes a rate ratio calculation methodology for each LEA in the state that meets "n" size requirements. In this calculation, the number of SWDs suspended/expelled for greater than 10 days is divided by the total number of SWDs within that LEA. This suspension/expulsion rate is then divided by the statewide average (number of SWDs, ages 3-21, suspended/expelled for greater than 10 days divided by the total number of SWDs, ages 3-21, in the LEA). The quotient of this calculation is the rate ratio. To be identified with a significant discrepancy for Indicator 4A, the rate ratio for an LEA must be 2.0 or greater and the LEA must meet the "n" size requirement for students suspended/expelled for greater than 10 days, which is a minimum of 5 students.

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

As stated in the “slippage” explanation, COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with short-term school closures, shifts to virtual instruction, and student and staff absences due to mandatory isolation and quarantine periods. With this disruption, the statewide count of students with more than 10 days of suspensions and expulsions dropped by just over 75%, from 359 to 84. This large decrease lead to only five LEAs meeting the minimum n/cell size for “Number of LEAs in the State” and caused the percentage to increase from the previous year.

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

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

Once the department compares the discrepancy rates of all LEAs, those identified with a significant discrepancy (have a rate ratio of 2.0 or greater AND have an "n" size of 5 or more SWDs suspended/expelled for greater than 10 days) are required to review their policies, procedures, and practices via a self-assessment. The purpose of the review is to determine if any policy, procedure, or practice is contributing to the identified significant discrepancy. The review includes LEA policies, education information system data entry verification, general procedures for disciplinary removals, analysis of suspension data by special education status or race/ ethnicity, IEP reviews, positive behavior supports and interventions implemented district and school wide, student specific behavior intervention considerations and implementation, and manifestation determination reviews. The LEA was required to provide a description of its LEA practices and attach supporting documents as evidence. Examples of items required included a description of the LEA plan for creating positive school climate, staff training, its process for preventing and/or reducing inappropriate behavior in schools, its process for determining when and how to develop individual behavior intervention plans, and LEA in-school and out-of-school suspension policies. Individual student file reviews also were conducted to track removal from classrooms, whether LEA policies were appropriately followed, whether manifestation determination reviews occurred if appropriate, and if required whether functional behavior assessments were completed.   
  
The information provided by each LEA identified with a significant discrepancy was reviewed by the SEA. LEAs that did not have adequate policies, procedures, or practices in place were found to be non-compliant and were required to revise these policies, procedures, or practices to ensure the appropriate development and implementation of IEPs, the use of positive behavioral interventions and supports, and adherence to procedural safeguards.

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*.***

LEAs were notified of noncompliance in writing with their local determinations. The SEA conducted phone conferences and site visits to assist with the development of LEA plans and ensure that necessary revisions to LEA policies, procedures, and practices were completed within one calendar year of notification. Based on information collected during this process, the SEA has verified that areas of noncompliance have been corrected.  
  
Revisions to LEA policies, procedures, and practices were not completed within one calendar year of notification for the five LEAs identified in FFY2020 (based on discipline data from FFY 2019/2019-20 school year). However, the SEA conducted phone conference and site visits to assist with the development of LEA plans and ensure that necessary revisions to LEA policies, procedures, and practices were subsequently completed in FFY2021 alongside the other LEAs who were identified in FFY2021 (based on discipline data from FFY 2020/2020-21 school year).

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 5 | 0 | 4 | 1 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

LEAs submitted revised policies, practices, and procedures, as well as evidence of training and communication of changes for SEA review and verification of implementation/revisions. Furthermore, the SEA reviewed updated discipline data in the fall of 2022 for the five LEAs with findings of noncompliance identified in FFY 2020 (based on discipline data from FFY 2019/2019-20 school year). Using FFY 2022 discipline data (i.e., data from the 2021-22 school year), approximately 10 discipline records of SWDs suspended/expelled for greater than 10 days were randomly pulled for each LEA. After reviewing these records and all relevant data available within the statewide IEP data management system (EasyIEP), SEA reviewers found that four of the five LEAs with noncompliance identified in FFY 2020 were correctly implementing the regulatory requirements. For the one remaining LEA still demonstrating continued noncompliance, LEA staff will be required to participate in additional training delivered by the department.

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

The SEA reviewed all individual cases of noncompliance identified in FFY 2020 (based on discipline data from FFY 2019/2019-20 school year) and verified that all children who are still active and within the jurisdiction of the LEA are in compliance. In addition, the SEA examined records within the statewide IEP data management system (EasyIEP) with consideration given to whether compensatory services were needed as a result of noncompliance with Indicator 4A. Records were examined related to any subsequent manifestation determinations, discipline incidents, restraints, or isolations, as well as current IEP supports, functional behavior assessments (FBAs) completed, behavior intervention plan (BIPs) in place, and attendance at home school or alternate placement. The SEA determined that none of these SWDs were denied free and appropriate public education (FAPE), which did not result in a need for compensatory services. However, the SEA found that one LEA required subsequent correction of individual cases.

**FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

One LEA did not provide sufficient evidence that the identified individual files of noncompliance were corrected. The SEA will require a more intensive review of the individual files as well as a creation of an action plan to address the noncompliance. The action plan will be monitored by the SEA to ensure the individual cases of noncompliance are corrected and LEA staff are trained on appropriate practices and procedures.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2019 | 1 | 1 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

The one LEA with findings of noncompliance identified prior to FFY2020 that was not yet verified as corrected in FFY2020 submitted revised policies, practices, and procedures, as well as evidence of training and communication of changes for SEA review and verification of implementation/revisions. The LEA also participated in additional required trainings as a result of the SEA not being able to verify correction of findings of noncompliance prior to FFY2020. Furthermore, the SEA reviewed updated discipline data in the fall of 2022 for the one LEA with findings of noncompliance identified in FFY 2019 (based on discipline data from FFY 2018/2018-19 school year). Using FFY 2022 discipline data (i.e., data from the 2021-22 school year), up to 10 discipline records of SWDs suspended/expelled for greater than 10 days were randomly pulled for this LEA. After reviewing these records and all relevant data available within the statewide IEP data management system (EasyIEP), SEA reviewers found all to be in compliance and the LEA correctly implementing the regulatory requirements.

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

The SEA reviewed all individual cases of noncompliance identified in FFY 2019 (based on discipline data from FFY 2018/2018-19 school year) and verified that all children who are still active and within the jurisdiction of the LEA are in compliance. In addition, the SEA examined records within the statewide IEP data management system (EasyIEP) with consideration given to whether compensatory services were needed as a result of noncompliance with Indicator 4A. Records were examined related to any subsequent manifestation determinations, discipline incidents, restraints, or isolations, as well as current IEP supports, FBAs completed, behavior BIPs in place, and attendance at home school or alternate placement. The SEA determined that none of these SWDs were denied FAPE, which did not result in a need for compensatory services.

## 4A - Prior FFY Required Actions

The State reported that it conducted the review required in 34 C.F.R. § 300.170(b), but did not specify that it reviewed 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 these policies, procedures, and practices comply with the IDEA for the districts identified with significant discrepancies in FFY 2020 based upon FFY 2019 discipline data.   
  
In the FFY 2021 SPP/APR, the State must report on the correction of this noncompliance by describing the review, and if appropriate, revision of 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 these policies, procedures, and practices comply with the IDEA for the districts identified with significant discrepancies in FFY 2020 based upon FFY 2019 discipline data.  
  
The State must report, in the FFY 2021 SPP/APR, on the correction of noncompliance that the State identified in FFY 2020 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
The State reported that noncompliance identified in FFY 2019 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was partially corrected. When reporting on the correction of this noncompliance, the State must demonstrate, in the FFY 2021 SPP/APR, that it has verified that each district with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

**Response to actions required in FFY 2020 SPP/APR**

Please refer to the "Correction of Findings of Noncompliance Identified in FFY 2020" and the “Correction of Findings of Noncompliance Identified Prior to FFY 2020” sections in the Indicator Data description.

## 4A - OSEP Response

In the FFY 2021 SPP/APR the State included very low percentage of the State’s LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with short-term school closures, shifts to virtual instruction, and student and staff absences due to mandatory isolation and quarantine periods. With this disruption, the statewide count of students with more than 10 days of suspensions and expulsions dropped by just over 75%, from 359 to 84. This large decrease lead to only five LEAs meeting the minimum n/cell size for “Number of LEAs in the State” and caused the percentage to increase from the previous year." OSEP reminds the State that if the examination for significant discrepancies in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State’s chosen methodology is not reasonably designed to determine if significant discrepancies are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

## 4A - Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State’s LEAs are being examined for significant discrepancy under the State’s chosen methodology.   
  
The State did not report that noncompliance identified in FFY 2020 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was corrected. When reporting on the correction of this noncompliance, the State must demonstrate, in the FFY 2022 SPP/APR, that it has verified that the district with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | NVR | 23.53% | 21.05% | 71.43% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 0% | 0% | 0% | 0% | 0% |

**FFY 2021 SPP/APR Data**

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

YES

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

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy, by race or ethnicity** | **Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 1 | 1 | 1 | 71.43% | 0% | 100.00% | Did not meet target | Slippage |

**Provide reasons for slippage, if not applicable**

COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with short-term school closures, shifts to virtual instruction, and student and staff absences due to mandatory isolation and quarantine periods. With this disruption, the statewide count of students with more than 10 days of suspensions and expulsions dropped by just over 75%, from 359 to 84. This large decrease lead to only one LEA meeting the minimum n/cell size for “Number of LEAs in the State” and caused the percentage to increase from the previous year.

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

YES

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

The department utilizes a rate ratio calculation methodology for each LEA in the state that meets "n" size requirements. In this calculation, the number of SWDs suspended/expelled for greater than 10 days in a specific racial/ethnic group is divided by the total number of SWDs within that LEA in the same specific racial/ethnic group. This suspension/expulsion rate is then divided by the statewide average (number of SWDs, ages 3-21, suspended/expelled for greater than 10 days divided by the total number of SWDs, ages 3-21, in the LEA). The quotient of this calculation is the rate ratio. To be identified with a significant discrepancy for Indicator 4B, the rate ratio for an LEA must be 2.0 or greater and the LEA must meet the "n" size requirement for students suspended/expelled for greater than 10 days in a specific racial/ethnic group, which is a minimum of 5 students.

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

As stated in the “slippage” explanation, COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with short-term school closures, shifts to virtual instruction, and student and staff absences due to mandatory isolation and quarantine periods. With this disruption, the statewide count of students with more than 10 days of suspensions and expulsions dropped by just over 75%, from 359 to 84. This large decrease lead to only one LEA meeting the minimum n/cell size for “Number of LEAs in the State” and caused the percentage to increase from the previous year.

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

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

Once the department compares the discrepancy rates of all LEAs, those identified with a significant discrepancy (have a rate ratio of 2.0 or greater AND have an "n" size of 5 or more SWDs suspended/expelled for greater than 10 days in a specific racial/ethnic group) are required to review their policies, procedures, and practices via a self-assessment. The purpose of the review is to determine if any policy, procedure, or practice is contributing to the identified significant discrepancy. The review includes LEA policies, education information system data entry verification, general procedures for disciplinary removals, analysis of suspension data by special education status or race/ ethnicity, IEP reviews, positive behavior supports and interventions implemented district and school wide, student specific behavior intervention considerations and implementation, and manifestation determination reviews. The LEA was required to provide a description of its LEA practices and attach supporting documents as evidence. Examples of items required included a description of the LEA plan for creating positive school climate, staff training, its process for preventing and/or reducing inappropriate behavior in schools, its process for determining when and how to develop individual behavior intervention plans, and LEA in-school and out-of-school suspension policies. Individual student file reviews also were conducted to track removal from classrooms, whether LEA policies were appropriately followed, whether manifestation determination reviews occurred if appropriate, and if required whether functional behavior assessments were completed.   
  
The information provided by each LEA identified with a significant discrepancy was reviewed by the SEA. LEAs that did not have adequate policies, procedures, or practices in place were found to be non-compliant and were required to revise these policies, procedures, or practices to ensure the appropriate development and implementation of IEPs, the use of positive behavioral interventions and supports, and adherence to procedural safeguards.

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*.***

LEAs were notified of noncompliance in writing with their local determinations. The SEA conducted phone conferences and site visits to assist with the development of LEA plans and ensure that necessary revisions to LEA policies, procedures, and practices were completed within one calendar year of notification. Based on information collected during this process, the SEA has verified that areas of noncompliance have been corrected.  
  
Revisions to LEA policies, procedures, and practices were not completed within one calendar year of notification for the five LEAs identified in FFY2020 (based on discipline data from FFY 2019/2019-20 school year). However, the SEA conducted phone conference and site visits to assist with the development of LEA plans and ensure that necessary revisions to LEA policies, procedures, and practices were subsequently completed in FFY2021 alongside the other LEAs who were identified in FFY2021 (based on discipline data from FFY 2020/2020-21 school year).

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 5 | 0 | 5 | 0 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

LEAs submitted revised policies, practices, and procedures, as well as evidence of training and communication of changes for SEA review and verification of implementation/revisions. Furthermore, the SEA reviewed updated discipline data in the fall of 2022 for the four LEAs with findings of noncompliance identified in FFY 2020 (based on discipline data from FFY 2019/2019-20 school year). Using FFY 2022 discipline data (i.e., data from the 2021-22 school year), approximately 10 discipline records of SWDs suspended/expelled for greater than 10 days were randomly pulled for each LEA. After reviewing these records and all relevant data available within the statewide IEP data management system (EasyIEP), SEA reviewers found all to be in compliance and LEAs correctly implementing the regulatory requirements.

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

The SEA reviewed all individual cases of noncompliance identified in FFY 2020 (based on discipline data from FFY 2019/2019-20 school year) and verified that all children who are still active and within the jurisdiction of the LEA are in compliance. In addition, the SEA examined records within the statewide IEP data management system (EasyIEP) with consideration given to whether compensatory services were needed as a result of noncompliance with Indicator 4B. Records were examined related to any subsequent manifestation determinations, discipline incidents, restraints, or isolations, as well as current IEP supports, FBAs completed, behavior BIPs in place, and attendance at home school or alternate placement. The SEA determined that none of these SWDs were denied FAPE, which did not result in a need for compensatory services.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2019 | 0 | 0 | 0 |
|  |  |  |  |
|  |  |  |  |

## 4B - Prior FFY Required Actions

The State reported that it conducted the review required in 34 C.F.R. § 300.170(b), but did not specify that it reviewed 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 these policies, procedures, and practices comply with the IDEA for districts identified with significant discrepancies in FFY 2020, based upon FFY 2019 discipline data. In the FFY 2021 SPP/APR, the State must report on the correction of this noncompliance by describing the review and, if appropriate, revision of 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 these policies, procedures, and practices comply with the IDEA for the districts identified with significant discrepancies in FFY 2020, based upon FFY 2019 discipline data, as required in 34 C.F.R. § 300.170(b). Further, in the FFY 2021 SPP/APR, the State must provide FFY 2021 data (using 2020-2021 discipline data) for this indicator.  
  
Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the districts identified with noncompliance in FFY 2020 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

**Response to actions required in FFY 2020 SPP/APR**

Please refer to the "Correction of Findings of Noncompliance Identified in FFY 2020" section in the Indicator Data description.

## 4B - OSEP Response

In the FFY 2021 SPP/APR the State included a very low percentage of the State’s LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "...COVID-19 continued to have an impact throughout the 2020-21 school year, as LEAs dealt with short-term school closures, shifts to virtual instruction, and student and staff absences due to mandatory isolation and quarantine periods. With this disruption, the statewide count of students with more than 10 days of suspensions and expulsions dropped by just over 75%, from 359 to 84. This large decrease led to only one LEA meeting the minimum n/cell size for “Number of LEAs in the State” and caused the percentage to increase from the previous year." OSEP reminds the State that if the examination for significant discrepancies, by race and ethnicity, in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State’s chosen methodology is not reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

## 4B- Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State’s LEAs are being examined for significant discrepancy under the State’s chosen methodology.   
  
Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the district identified with noncompliance in FFY 2021 has corrected the noncompliance, including that the State verified that the 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 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance (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 2021.

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)]times 100.

**Instructions**

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

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

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

## 5 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2020 | Target >= | 71.50% | 73.50% | 70.00% | 70.00% | 72.64% |
| A | 72.64% | Data | 70.16% | 69.69% | 70.88% | 71.91% | 72.64% |
| B | 2020 | Target <= | 11.20% | 11.10% | 10.85% | 10.85% | 11.25% |
| B | 11.25% | Data | 11.48% | 11.49% | 11.38% | 11.27% | 11.25% |
| C | 2020 | Target <= | 1.40% | 1.30% | 1.77% | 1.77% | 1.37% |
| C | 1.37% | Data | 1.79% | 1.81% | 1.61% | 1.49% | 1.37% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 73.78% | 74.92% | 76.06% | 77.20% | 78.34% |
| Target B <= | 11.07% | 10.89% | 10.71% | 10.53% | 10.35% |
| Target C <= | 1.19% | 1.01% | 0.83% | 0.55% | 0.37% |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | Total number of children with IEPs aged 5 (kindergarten) through 21 | 118,219 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 86,185 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 13,341 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools | 677 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities | 198 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements | 881 |

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

NO

**FFY 2021 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 5 (kindergarten) through 21 served** | **Total number of children with IEPs aged 5 (kindergarten) through 21** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 86,185 | 118,219 | 72.64% | 73.78% | 72.90% | Did not meet target | No Slippage |
| B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 13,341 | 118,219 | 11.25% | 11.07% | 11.28% | Did not meet target | No Slippage |
| C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 1,756 | 118,219 | 1.37% | 1.19% | 1.49% | Did not meet target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **C** | The observed increase of 0.12% for children with IEPs aged 5 (in kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements is not attributable to any major shift in the disability categories of students placed in those environments. The majority of disability categories in those environments continues to be Autism, Emotional Disturbance, Intellectual Disability, Multiple Disabilities, and Other Health Impairments, as in previous years. The slippage is also not attributable to a major shift in any of the specific environments, with homebound/hospital being the most common followed closely by separate schools and relatively few in the residential facility environment. Therefore, the department can only attribute the slippage to the small n-size of indicator 5C, in which a very small number of students can shift the percentage. |

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

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 5 - Required Actions

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

**Historical Data – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Part** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| **A** | Target >= | 32.00% | 34.00% | 38.00% | 42.00% | 32.39% |
| **A** | Data | 24.17% | 24.27% | 26.58% | 34.04% | 32.39% |
| **B** | Target <= | 29.00% | 24.00% | 29.00% | 28.00% | 39.53% |
| **B** | Data | 34.14% | 33.73% | 32.42% | 31.80% | 39.53% |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**Targets**

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

Inclusive Targets

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

Target Range is used

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

| **Part** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- |
| **A** | 2020 | 32.39% |
| **B** | 2020 | 39.53% |
| **C** | 2020 | 0.48% |

**Inclusive Targets – 6A, 6B**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 36.20% | 40.01% | 42.55% | 43.82% | 45.09% |
| Target B <= | 36.08% | 32.63% | 30.33% | 29.18% | 28.03% |

**Inclusive Targets (with Target Ranges) – 6C**

| **FFY** | **2021 (low)** | **2021 (high)** | **2022 (low)** | **2022 (high)** | **2023 (low)** | **2023 (high)** | **2024 (low)** | **2024 (high)** | **2025 (low)** | **2025 (high)** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target C <= | 0.00% | 0.48% | 0.00% | 0.48% | 0.00% | 0.48% | 0.00% | 0.48% | 0.00% | 0.47% |

**Prepopulated Data**

**Data Source:**

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

**Date:**

07/06/2022

| **Description** | **3** | **4** | **5** | **3 through 5 - Total** |
| --- | --- | --- | --- | --- |
| Total number of children with IEPs | 2,980 | 4,184 | 1,796 | 8,960 |
| 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 | 915 | 1,720 | 845 | 3,480 |
| b1. Number of children attending separate special education class | 1,168 | 1,259 | 455 | 2,882 |
| b2. Number of children attending separate school | 11 | 15 | 6 | 32 |
| b3. Number of children attending residential facility | 0 | 0 | 0 | 0 |
| c1**.** Numberof children receiving special education and related services in the home | 28 | 18 | 11 | 57 |

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

NO

**FFY 2021 SPP/APR Data - Aged 3 through 5**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 3,480 | 8,960 | 32.39% | 36.20% | 38.84% | Met target | No Slippage |
| B. Separate special education class, separate school or residential facility | 2,914 | 8,960 | 39.53% | 36.08% | 32.52% | Met target | No Slippage |

**FFY 2021 SPP/APR Data - Aged 3 through 5**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2020Data** | **FFY 2021 Target(low)** | **FFY 2021 Target(high)** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| C. Home | 57 | 8,960 | 0.48% | 0.00% | 0.48% | 0.64% | Did not meet target | Slippage |

**Provide reasons for slippage for Group C aged 3 through 5, if applicable**

The observed increase of 0.16% for children with IEPs aged 3 through 5 receiving special education and related services in the home is not attributable to any major shift in the disability categories of students placed in those environments. The majority of disability categories in those environments continues to be Autism, Developmental Delay, Multiple Disabilities, and Speech or Language Impairments, as in previous years. The slippage is also not attributable to a major shift in the demographics (race, gender, & ELL status) of students receiving services at home. In addition, a large portion of the increase is attributable to a single LEA. The IDEA APR Support Team is working closely with this LEA to ensure it has appropriate processes and procedures in place around preschool placement.

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

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

## 6 - Required Actions

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

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

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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

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

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

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

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

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

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

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

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

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

**Instructions**

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

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

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

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

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

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

## 7 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A1 | 2009 | Target >= | 92.88% | 92.94% | 93.00% | 93.06% | 91.70% |
| A1 | 91.70% | Data | 89.09% | 90.10% | 89.23% | 90.05% | 89.76% |
| A2 | 2009 | Target >= | 59.80% | 60.40% | 60.00% | 60.30% | 57.81% |
| A2 | 57.40% | Data | 58.07% | 58.55% | 57.50% | 57.82% | 55.45% |
| B1 | 2009 | Target >= | 90.68% | 90.74% | 89.50% | 89.80% | 89.74% |
| B1 | 89.50% | Data | 88.75% | 88.32% | 89.47% | 89.39% | 88.43% |
| B2 | 2009 | Target >= | 58.80% | 59.40% | 57.00% | 57.30% | 56.19% |
| B2 | 55.70% | Data | 56.24% | 55.49% | 54.75% | 56.35% | 53.68% |
| C1 | 2009 | Target >= | 93.70% | 93.80% | 93.90% | 94.00% | 92.60% |
| C1 | 92.60% | Data | 91.14% | 90.27% | 90.14% | 90.49% | 89.62% |
| C2 | 2009 | Target >= | 70.20% | 70.60% | 69.00% | 69.30% | 68.00% |
| C2 | 68.00% | Data | 69.40% | 68.80% | 66.23% | 67.06% | 64.44% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 91.70% | 91.70% | 91.98% | 92.25% | 92.53% |
| Target A2 >= | 58.22% | 58.63% | 59.04% | 59.45% | 59.86% |
| Target B1 >= | 89.98% | 90.22% | 90.46% | 90.70% | 90.94% |
| Target B2 >= | 56.68% | 57.17% | 57.66% | 58.15% | 58.64% |
| Target C1 >= | 92.60% | 92.60% | 92.60% | 92.60% | 92.81% |
| Target C2 >= | 68.67% | 69.34% | 70.01% | 70.68% | 71.35% |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**FFY 2021 SPP/APR Data**

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

6,412

**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 | 91 | 1.42% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 433 | 6.75% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 2,378 | 37.09% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,609 | 40.70% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 900 | 14.04% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 4,987 | 5,511 | 89.76% | 91.70% | 90.49% | 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)* | 3,509 | 6,411 | 55.45% | 58.22% | 54.73% | 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 | 78 | 1.22% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 485 | 7.57% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 2,395 | 37.38% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,623 | 40.94% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 826 | 12.89% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)* | 5,018 | 5,581 | 88.43% | 89.98% | 89.91% | 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)* | 3,449 | 6,407 | 53.68% | 56.68% | 53.83% | 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 | 68 | 1.06% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 399 | 6.23% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,838 | 28.71% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,879 | 44.96% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,219 | 19.04% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.  *Calculation:(c+d)/(a+b+c+d)* | 4,717 | 5,184 | 89.62% | 92.60% | 90.99% | 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)* | 4,098 | 6,403 | 64.44% | 68.67% | 64.00% | 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.**

To gather the initial data informing the results of this indicator, LEAs use the Child Outcomes Summary Form (COSF) to address performance in each of the three outcomes areas (social-emotional skills, acquisition of knowledge and skills, and use of appropriate behaviors). This form is augmented and supplemented with the use of qualitative data, including information from families and IFSP/IEP team input and/or observations. Quantitative data is also collected to inform the data in this indicator, including data from one or more assessment tool(s) that are norm-referenced, curriculum-based, and criterion-referenced. The department provides support to LEAs regarding the use of these tools and appropriate data collection processes.   
   
Once this information is complete and a rating is selected for one of the three areas assessed in this indicator, LEAs are responsible for inputting the ratings into the statewide IEP data management system (EasyIEP) so that the information can be pulled in various reports for analysis. It is from this data source that the ratings for students are gathered and processed for this indicator. The aggregate level data for all LEAs are input into an Early Childhood Technical Assistance Center (ECTA)-developed tool that employs various logic checks to clean the data. Logic checks include ensuring that outcome data are listed for all three areas, that entrance and exit data are tracked, etc. The tool employs the ratings outlined in the COSF to determine growth. If data (i.e., ratings) are missing for any of the three outcome areas, a progress category is not assigned and the child is excluded from the numerator and denominator of the outcome summary statement calculations. This can result in a discrepancy among the total number of preschool children aged 3 through 5 with IEPs assessed and the denominator counts preschool children aged 3 through 5 who were functioning within age expectations in each outcome area. In FFY 2021, missing data/ratings accounted for the discrepancy between 6412 total preschool children assessed, 6411 as the denominator in outcome A, 6407 as the denominator in outcome B, and 6403 as the denominator in outcome C.

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

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

In reporting the percent of preschoolers aged 3 through 5 who were functioning within age expectations in each outcome area by the time they turned 6 years of age or exited the program, the State reported 6411 as the denominator in outcome A, 6407 as the denominator in outcome B, and 6403 as the denominator in outcome C. Additionally, the State reported 6412 preschool children aged 3 through 5 with IEPs were assessed. The State explained this discrepancy.

## 7 - Required Actions

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

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

**Data Source**

State selected data source.

**Measurement**

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

**Instructions**

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

## 8 - Indicator Data

| **Question** | **Yes / No** |
| --- | --- |
| Do you use a separate data collection methodology for preschool children? | NO |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
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Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
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**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 77.40% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 93.50% | 93.75% | 94.00% | 94.25% | 83.35% |
| Data | 90.60% | 89.48% | 91.33% | 77.40% | 88.30% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 89.30% | 90.04% | 90.78% | 91.52% | 92.26% |

**FFY 2021 SPP/APR Data**

| **Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities** | **Total number of respondent parents of children with disabilities** | | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 5,225 | | 6,202 | 88.30% | 89.30% | 84.25% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

As noted in Tennessee’s FFY 2019 APR, the Indicator 8 parent survey changed drastically in FFY 2019. At that time, the department collaborated with the ARC of Tennessee, a family engagement stakeholder group, to develop a more parent-friendly, less time demanding experience. The survey was reduced from 21 questions to 10 questions. Wording to questions (including question one) were changed. Finally, the survey was modified to include a six point Likert scale with “not sure” and “N/A” choices (strongly agree/agree/not sure/disagree/strongly disagree) rather than a six point scale with only agreement choices (very strongly agree/strongly agree/agree/disagree/strongly disagree/very strongly disagree). Since Tennessee operates on a four-year sampling cycle, many parents were responding to the new version of the survey for the first time in FFY 2021. Similar to past reporting years, the reduction/change to the number of categories from which the Indicator 8 score is calculated may have had a significant impact on the results, as approximately 9% of respondents selected “not sure” on question 1 of the survey. Despite this slippage, the department feels confident in the validity of the new survey and that the responses collected moving forward will more accurately reflect parents’ perceptions of their children’s schools.

**Since the State did not report preschool children separately, discuss the procedures used to combine data from school age and preschool surveys in a manner that is valid and reliable.**

The surveys disseminated for pre-K students are identical to those disseminated to school age students. As well, the surveys collected for pre-K students are analyzed and collated under the same methodology employed for school age students. Thus, the validity and reliability for those in pre-K is identical to those who are school age and allows for continuity across all grade bands to ensure all the information collected is valid, reliable, and cohesive. For this reporting period, survey data was disaggregated by grade level and it was found that surveys were disseminated to 757 P3 (three year old students in pre-K) students with 169 responses from the family and 1,258 P4 (four year old students in pre-K) students with 333 responses from the family.

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

30,868

**Percentage of respondent parents**

20.09%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Response Rate | 18.95% | 20.09% |

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

First, there will be continued efforts to more consistently notify and subsequently remind LEAs selected to disseminate the survey to continue eliciting responses from parents. This will come in the form of emails from the department's survey administration partner, East Tennessee State University (ETSU), to LEA staff directly. Second, participating LEAs have also been given suggestions to improve response rate, such as providing the survey at IEP meetings for students to ensure the parents are able to get the survey and respond while in the LEA. Third, the department has expanded number of languages in which the survey is available. Prior to FFY 2020, only English and Spanish languages were offered. Beginning in FFY 2020, Arabic, Amharic, and Burmese translations were available. The department will continue to work with districts to better understand their language needs and provide additional translations. Finally, the department is currently working with its family engagement partner, The ARC Tennessee, to consider other ways/methods to communicate with families regarding this survey and identify opportunities that may increase responses and participation.   
   
In addition, the department has been collaborating with IDC to complete the Data Processes Toolkit for all APR Indicators. Part of this work includes the development of methods to increase representativeness among Indicator 8 survey respondents. The department will continue working with IDC to research best practices and implement targeted strategies aimed at increasing underrepresented populations and decreasing overrepresented populations.

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

Chi-square tests confirmed that there was no statistically significant difference between the proportion of respondents and the proportion in the total population of students with emotional disturbance as well as students who are Native American, Asian, Pacific Islander, or Hispanic. For all other student groups, the difference in representativeness was statistically significant. Please see the “analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services” section below for additional analyses related to representativeness.   
  
Steps to reduce identified bias, increase representativeness, and promote responses from a broad cross section of families that received Part B services are outlined in both the “strategies that will be implemented which are expected to increase the response rate year over year” section above and the “strategies that the State will use to ensure that in the future the response data are representative” section below.

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

During FFY 2021 school year, the Parent Survey was administered to all parents of SWDs ages 3 through 21 in 35 LEAs selected through the OSEP-approved sampling process. Tennessee’s three largest LEAs participate in this survey each year with different schools, representative of the LEA as a whole, sampled every year. A total of 30,868 surveys were distributed to parents. There were 6,333 survey responses with usable data for a response rate of 20.52%. Note that this response rate is different from the one in the above data table (response rate calculated was 20.09%). This disparity is due to differences in responses to each question in the survey. Tennessee employs a 10-question survey, and while item one on the survey addresses parental involvement pertinent to this indicator, responses to this question are sometimes omitted by respondents. The data table above only captures the number of responses to this first question, divided by all the surveys disseminated to get the response rate of 20.09%; however, the response rate of 20.52% reflects the overall percentage of surveys received, including those with missing responses.   
   
In terms of Indicator 8 results, item one on the survey asked parents about the LEA's facilitation of parent involvement. Of the 6,202 parents responding to item one, 84.25% (5,225 / 6,202) agreed that the LEAs facilitated their involvement as a means of improving services and results for children with disabilities. The department's target of 89.30% was not met.   
   
The table below provides a summary of representativeness data on all FFY 2021 Parent Survey respondents. The calculation, from the National Post-School Outcomes Center (NPSO), compares the respondent pool of parents against the demographics of children receiving special education services across the state (i.e., the target group). The difference row compares the two proportions (target proportion against respondent proportion) by selected attributes including: child disability, child gender, and child race/ethnicity. Cells in the difference row that are greater than +/- 3%, indicate that the respondent group over or underrepresents the entire group of targeted respondents. For this Parent Survey, parents of students with specific learning disabilities and parents of Black students were underrepresented in the respondent group (-3.10% and -6.76% respectively) and parents of White students were overrepresented by the respondents (9.46%).   
  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SLD /\_\_\_\_\_ED\_\_\_ / \_\_ID\_\_ / \_\_AO\_\_ / Female / \_\_\_B\_\_\_\_/ \_\_NA\_\_/\_\_A\_\_\_ /\_\_\_PI\_\_/\_\_\_W\_\_\_/ \_\_M\_\_\_\_/\_\_H\_\_   
   
Target Representation:\_\_\_\_\_\_\_\_\_26.69% / 2.13% / 7.27% / 63.90% / 33.68% / 20.34% / 1.65% / 8.46% / 0.04% / 65.40% / 3.80% / 9.40%  
Respondent Representation:\_\_\_23.59% / 1.94% / 8.12% / 66.35% / 35.07% / 13.58% / 1.26% / 9.63% / 0.09% / 74.86% / 3.11% / 7.26%  
Difference:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-3.10% / -0.19% / 0.85% / 2.45% / -1.39% / -6.76% / -0.39% / 1.17% / 0.05% / 9.46% / -0.69% / -2.14%

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

NO

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

The department will continue working in the 2022-23 school year to ensure that the population of parents surveyed is representative of the population of children receiving special education services in Tennessee. Efforts from the 2021-22 school year to remedy some of the noteworthy over/underrepresentation manifested in a decrease in underrepresentation of responses from families of students with a specific learning disability (improvement in representativeness from 4.33% to only 3.10% underrepresented) and a reduction in overrepresentation of responses from families of students with all other disabilities (from 4.45% to 2.45% in overrepresentation).   
  
The department will focus its efforts to improve representativeness on increasing the overall participation rate and developing targeted strategies aimed at increasing underrepresented populations and decreasing overrepresented populations, as outlined in the “Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented“ section above.

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

As mentioned above, the metric used to determine representativeness, from the NPSO, compares the respondent pool of youth against the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school (i.e., the target group). The difference row compares the two proportions (target proportion against respondent proportion) by selected attributes including: child disability, child gender, and child minority race/ethnicity. Cells in the difference row that are greater than +/- 3%, indicate that the respondent group over or underrepresents the entire group of targeted respondents.   
  
Chi-square tests confirmed that there was no statistically significant difference between the proportion of respondents and the proportion in the total population of students with emotional disturbance as well as students who are Native American, Asian, Pacific Islander, and Hispanic. For all other student groups, the difference in representativeness was statistically significant.

| **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.**

LEAs are sampled based on their locations in the state so that all regions are represented and it is guaranteed that every four years an LEA will complete the survey. This sampling is done via the NPSO Sampling Calculator on a four-year sampling cycle. For the three LEAs with 50,000 or more students enrolled, a sampling method is utilized so that the LEA is surveyed each year, but that different schools within the LEA are selected every four years (similar to the process used for sampling smaller LEAs). To sample these three large LEAs, percentages of high schools, middle schools, and elementary schools are determined for each LEA. Then the number of schools in each school level are divided by four (for the four year cycle). Each school is given a unique code to randomize them for selection to remove bias. Once randomized, the number of high schools, middle schools, and elementary schools to be surveyed each year are predicated on the previously determined percentages (or weights) of the aforementioned school types in the LEA.   
   
This sampling methodology ensures that LEAs and schools selected for the survey each year are representative of the state. To ensure there is no potential bias or misrepresentation that can sometimes arise from student sampling, all students with disabilities within each selected LEA are surveyed. In addition, the application of the same survey collection process and same question regarding parent involvement for each administration certifies that the results of the survey are comparable and will yield valid and reliable estimates across school years.  
  
The department will continue to use its previously approved Indicator 8 sampling plan for the FFY 2020 through FFY 2025 SPP/APRs. An overview of the sampling methodology outlining how the design will yield valid and reliable estimates is provided above. The only change to the sampling plan will be the years for which it is used.

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

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

## 8 - Prior FFY Required Actions

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

**Response to actions required in FFY 2020 SPP/APR**

Please refer to 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" and "describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics" sections in the Indicator Data description.  
  
In addition, Tennessee has attached a copy of its current sampling plan for FFY 2020 through FFY 2025.

## 8 - OSEP Response

In the discussion of the metric used to determine representativeness, the State provided the following narrative, "As mentioned above, the metric used to determine representativeness, from the NPSO, compares the respondent pool of youth against the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school (i.e., the target group)." This is not the target group for Indicator 8 and therefore OSEP cannot determine whether the State described the metric used to determine representativeness, as required by the Measurement Table.

## 8 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.   
  
In the FFY 2022 SPP/APR, the State must report the metric used to determine representativeness of the demographics of children receiving special education services, as required by the Measurement Table.  
  
The State submitted a sampling plan for this indicator with its FFY 2021 SPP/APR. OSEP identified concerns in its evaluation of the sampling plan that indicated it may not yield valid and reliable data for this indicator. The State has not yet responded to OSEP’s concerns. The State must submit, by September 1, 2023, its revised sampling plan that the State plans to use for its FFY 2022 – FFY 2025 data collections and indicate how the revised plan addresses the concerns identified in OSEP’s evaluation.

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 0% | 0% | 0% | 0% | 0% |

**FFY 2021 SPP/APR Data**

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

YES

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

4

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 1 | 0 | 143 | 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).**

Disproportionate representation is defined as the “extent to which membership in a given group affects the probability of being placed in a specific education category” (Oswald, et al. 1999). It is predicated on the comparison of a subgroup, such as racial/ethnic subgroups, within an LEA to the entire LEA population as a whole. Should an LEA be identifying students for special education services at a greater percentage than the rest of the students in the school population as a whole, and this is supported in their LEA policies, practices, and procedures, then there is disproportionate representation in the form of overrepresentation.   
  
To determine disproportionate representation, the department uses the Westat spreadsheet for calculating both Relative Risk Ratio (RRR) and Weighted Risk Ratio (WRR) based on LEA racial/ethnic data. For FFY 2021, the methodology listed below was used to calculate and examine data to measure disproportionate representation (particularly overrepresentation) in special education.   
  
Calculation Criteria   
  
Each of the seven racial/ethnic student subgroups in every LEA were examined to determine if the LEA’s identification of students receiving special education and related services met all of the following criteria for disproportionate representation:   
  
a. Both a RRR and a WRR of 3.00 or greater. Note: both RRRs and WRRs were generated for all LEAs based on the number of students receiving special education and related services in each LEA within each of the seven racial/ethnic categories;   
b. Racial/ethnic subgroup enrollment (target group denominator) meets a minimum “n” size of 50 students;   
c. Count of students with disabilities meets a minimum of 45 students; and   
d. Count of students with disabilities in a specific racial/ethnic group (target group numerator) meets a minimum cell size of 5 students.   
  
Data Sources   
  
The October 1, 2021 Membership data (from EDFacts file FS052) and December 1, 2021 IDEA Child Count data (from the statewide IEP data management system, which populates EDFacts file FS002) were used in the disproportionate representation calculations for each of Tennessee’s 147 LEAs.

**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.**

One LEA met the criteria outlined above, which are used to calculate disproportionate representation, and was required to complete a self-assessment of their policies, practices, and procedures related to referral, evaluation, and identification. The SEA conducted a review of the self-assessment submitted by the LEA meeting the criteria for disproportionate representation and determined that the LEA’s policies, procedures, and practices did not contribute to the disproportionate representation.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

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

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

## 9 - Required Actions

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

## 10 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 5.76% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 2.82% | 5.07% | 2.90% | 4.26% | 5.76% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 0% | 0% | 0% | 0% | 0% |

**FFY 2021 SPP/APR Data**

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

YES

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

10

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 31 | 7 | 137 | 5.76% | 0% | 5.11% | Did not meet 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).**

Disproportionate representation is defined as the “extent to which membership in a given group affects the probability of being placed in a specific education category” (Oswald, et al. 1999). It is predicated on the comparison of a subgroup, such as racial/ethnic subgroups, within an LEA to the entire LEA population as a whole. Should an LEA be identifying students for special education services at a greater percentage than the rest of the students in the school population as a whole, and this is supported in their LEA policies, practices, and procedures, then there is disproportionate representation in the form of overrepresentation.   
  
To determine disproportionate representation, the department uses the Westat spreadsheet for calculating both Relative Risk Ratio (RRR) and Weighted Risk Ratio (WRR) based on LEA racial/ethnic data. For FFY 2021, the methodology listed below was used to calculate and examine data to measure disproportionate representation (particularly overrepresentation) in special education.   
  
Calculation Criteria   
  
Each of the seven racial/ethnic student subgroups in every LEA were examined to determine if the LEA’s identification of students receiving special education and related services met all of the following criteria for disproportionate representation:   
  
a. Both a RRR and a WRR of 3.00 or greater. Note: both RRRs and WRRs were generated for all LEAs based on the number of students receiving special education and related services in each LEA within each of the seven racial/ethnic categories;   
b. Racial/ethnic subgroup enrollment (target group denominator) meets a minimum “n” size of 50 students;   
c. Count of students with disabilities in the specific disability category meets the minimum “n” size of 20 students; and,   
d. Count of students with disabilities in a specific racial/ethnic group meets the minimum “n” size of 5 students   
  
Data Sources   
  
The October 1, 2021 Membership data (from EDFacts file FS052) and December 1, 2021 IDEA Child Count data (from the statewide IEP data management system, which populates EDFacts file FS002) were used in the disproportionate representation calculations for each of Tennessee’s 147 LEAs.

**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.**

All LEAs meeting the criteria outlined above, which are used to calculate disproportionate representation, are required to complete a self-assessment of their policies, practices, and procedures related to referral, evaluation, and identification. The SEA conducted a review of all self-assessments submitted by LEAs meeting the criteria for disproportionate representation and determined that 7 LEAs’ policies, procedures, and practices contributed to the disproportionate representation.   
  
LEAs that are identified as having inappropriate identification practices are required to undergo a site visit in which student records are pulled for review and interviews with key LEA staff take place. Follow-up strategies to address problematic identification practices are developed as a result of this site visit, and SEA staff maintain contact with identified LEAs throughout the school year to monitor progress and improvement.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 8 | 8 | 0 | 0 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

Prong 2:   
  
The eight LEAs identified with disproportionate representation, based on self-assessments submitted to the department in FFY 2020, were required to undergo site visits the subsequent school year. The director of school psychology services led these visits and conducted interviews with LEA administrative staff regarding the LEA's policies and procedures. Questions were asked about how LEA practices might relate to the identified disproportionate representation and based on the information gleaned from these discussions, the director of school psychology services identified areas in which practices should be improved to ensure the disproportionate representation identified was not a manifestation of inappropriate policies, procedures, and practices.   
  
In addition to meetings with LEA administrative staff, schools were visited within the LEA and staff and documents were observed to see the policies, procedures, and practices in action. The director of school psychology services also pulled a sampling of student eligibility documents and IEPs to assess how they were written and determine if the documents reflected inappropriate policies, procedures, and practices employed in the LEA. This review process was used to get an overall perspective of persistent themes and concerns in the eligibility documentation.   
  
All information gleaned from these site visits was provided to LEA staff via written communication after the site visits. The eight LEAs were required to develop action plans based on these site visits and had to periodically submit evidence of activities completed throughout the 2021-22 SY to address findings of potential contributing factors to disproportionate representation. Department staff continuously provided technical assistance as necessary to the eight LEAs, giving them priority at relevant trainings and offering professional development opportunities tailored to the LEAs. All LEAs also completed any required trainings with their district staff to ensure knowledge and understanding of compliant policies, practices, and procedures.   
  
Of all the file reviews conducted and information collected through site visits for the eight LEAs identified with disproportionate representation in FFY 2020, individual student file noncompliance with practices possibly leading to disproportionate identification was found in all eight (additional information about individual instances of noncompliance outlined below). For the eight LEAs, the director of school psychology services and the corresponding regional support staff reviewed additional eligibility documents, after corrections of instances of noncompliance, for other students in the same identified areas, to confirm that the correct regulatory practices were being followed regarding appropriate identification of students with disabilities. The randomly sampled files reviewed after notifications and corrections of noncompliance in these eight LEAs revealed that the identified areas of noncompliance in previous student files had been addressed and were in compliance. Additionally, the results of the 2020-2021 SY LEA self-monitoring process were reviewed by state monitors to assess outcomes for LEAs identified as noncompliant in FFY 2020. Findings indicated initial evaluation reports that were submitted for each of the eight districts met required standards for all evaluations reviewed; therefore, all districts demonstrated compliance in this area and no concerns were noted.

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

Prong 1:   
  
As outlined in the section above, the director of school psychology services conducted site visits and student file reviews in the eight LEAs identified with disproportionate representation. As a result of these file reviews, all eight LEAs were identified as having noncompliant records that may have led to disproportionate representation. Two of the districts did not follow out of state transfer practices, three districts failed to complete appropriate reevaluations to consider additional eligibility categories, and three districts had incomplete evaluations that may not have adequately identified the correct disability (or ruled out others).   
  
Using the statewide IEP data management system employed by all LEAs in Tennessee and correspondence via email with these eight LEAs, SEA staff were able to review the files with noncompliance. The districts were required to fix each case of noncompliance, either by uploading critical documents, convening IEP meetings, or conducting re-evaluations. Updated evaluation reports were completed as part of reevaluations. It was confirmed by the SEA staff that all noncompliant files were addressed and corrected as appropriate.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2019 | 6 | 6 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

Prong 2:   
  
The six LEAs identified with disproportionate representation, based on self-assessments submitted to the department in FFY 2020, were required to undergo site visits the subsequent school year. The director of school psychology services led these visits and conducted interviews with LEA administrative staff regarding the LEA's policies and procedures. Questions were asked about how LEA practices might relate to the identified disproportionate representation and based on the information gleaned from these discussions, the director of school psychology services identified areas in which practices should be improved to ensure the disproportionate representation identified was not a manifestation of inappropriate policies, procedures, and practices.   
  
In addition to meetings with LEA administrative staff, schools were visited within the LEA and staff and documents were observed to see the policies, procedures, and practices in action. The director of school psychology services also pulled a sampling of student eligibility documents and IEPs to assess how they were written and determine if the documents reflected inappropriate policies, procedures, and practices employed in the LEA. This review process was used to get an overall perspective of persistent themes and concerns in the eligibility documentation.   
  
All information gleaned from these site visits was provided to LEA staff via written communication after the site visits. The six LEAs were required to develop action plans based on these site visits and had to periodically submit evidence of activities completed throughout the 2021-22 SY to address findings of potential contributing factors to disproportionate representation. Department staff continuously provided technical assistance as necessary to the six LEAs, giving them priority at relevant trainings and offering professional development opportunities tailored to the LEAs. All LEAs also completed any required trainings with their district staff to ensure knowledge and understanding of compliant policies, practices, and procedures.   
  
Of all the file reviews conducted and information collected through site visits for the six LEAs identified with disproportionate representation in FFY 2020, individual student file noncompliance with practices possibly leading to disproportionate identification was found in all.. (additional information about individual instances of noncompliance outlined below). For the six LEAs, the director of school psychology services and the corresponding regional support staff reviewed additional eligibility documents, after corrections of instances of noncompliance, for other students in the same identified areas, to confirm that the correct regulatory practices were being followed regarding appropriate identification of students with disabilities. The randomly sampled files reviewed after notifications and corrections of noncompliance in these six LEAs revealed that the identified areas of noncompliance in previous student files had been addressed and were in compliance. Additionally, the results of the 2020-2021 SY LEA self-monitoring process were reviewed by state monitors to assess outcomes for LEAs identified as noncompliant in FFY 2019. Findings indicated initial evaluation reports that were submitted for each of the six districts met required standards for all evaluations reviewed; therefore, all districts demonstrated compliance in this area and no concerns were noted.

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

Prong 1:   
  
As outlined in the section above, the director of school psychology services conducted site visits and student file reviews in the six LEAs identified with disproportionate representation. As a result of these file reviews, all six LEAs were identified as having noncompliant records that may have led to disproportionate representation. Two of the districts failed to follow reevaluation guidelines; two districts failed to conduct comprehensive reevaluations considering other eligibility categories; and one district failed to upload required documents.  
  
Using the statewide IEP data management system employed by all LEAs in Tennessee and correspondence via email with these six LEAs, SEA staff were able to review the files with noncompliance. The districts were required to fix each case of noncompliance, either by uploading critical documents or through IEP meetings/re-evaluations. Updated evaluation reports were completed as part of reevaluations. It was confirmed by the SEA staff that all noncompliant files were addressed and corrected as appropriate.

## 10 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the 8 districts identified in FFY 2020 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.  
  
Further, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 6 districts identified in FFY 2019 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification, are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311. In demonstrating the correction of the noncompliance identified in FFY 2019, the State must report, in the FFY 2021 SPP/APR, that the State verified that each district with noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

**Response to actions required in FFY 2020 SPP/APR**

Please refer to the "Correction of Findings of Noncompliance Identified in FFY 2020" and the “Correction of Findings of Noncompliance Identified Prior to FFY 2020” sections in the Indicator Data description.

## 10 - OSEP Response

## 10 - Required Actions

Because the State reported less than 100% compliance for FFY 2021 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the 7 districts identified in FFY 2021 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, 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 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance (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 2021.

# Indicator 11: Child Find

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

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

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 89.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 95.24% | 94.28% | 94.88% | 90.88% | 93.56% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

| **(a) Number of children for whom parental consent to evaluate was received** | **(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 33,475 | 31,139 | 93.56% | 100% | 93.02% | Did not meet target | No Slippage |

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

2,336

**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.**

In Tennessee, an LEA is considered to be compliant if the evaluation is completed within 60 calendar days from the date the LEA received written consent for an initial evaluation. TN uses a student’s final eligibility determination, which is recorded in the statewide IEP data management system (EasyIEP), to mark the end of the evaluation process. The requirement to complete evaluations/eligibility determinations within 60 calendar days of receipt of parental consent for an initial evaluation is outlined in Tennessee State Board of Education Rule 0520-01-09-.05 (https://publications.tnsosfiles.com/rules/0520/0520-01/0520-01-09.20220919.pdf).  
  
Of the 33,475 students for whom parent consent to evaluate was granted in FFY 2021, 2,336 students did not have their evaluations completed within the 60 calendar timeline. These 2,336 students did not have an approved timeline extension request and the evaluation exceeded the timeline OR they did not complete any timeline extension request and the evaluation exceeded the timeline. The number of days beyond the timeline ranged from one to 392 days.   
   
Pursuant to §§300.301(d) and §§300.309(c), LEAs can request timeline extensions for three approved reasons, and this request is submitted through the statewide IEP data management system (EasyIEP). Department staff review and approve or deny these requests. If the requests are approved, these students are not considered out of compliance. However, in instances in which extension requests are denied, these students are considered out of compliance. The three approved timeline extension reasons are:   
   
1. For specific learning disability (SLD) evaluations, there is written mutual agreement on an extended timeframe by the child’s parents and a group of qualified professionals;   
2. The parent repeatedly failed or refused to produce the child for the evaluation;   
3. The child transferred from the district that obtained consent prior to a completed evaluation and the receiving district has made progress toward completing the evaluation.   
   
Rather than being excluded from the compliance calculations, those students with acceptable reasons for delay who had evaluations completed with an approved timeline extension request are included in both the numerator and denominator of the compliance percentage calculation detailed above.  
  
Without an approved timeline extension request, the EasyIEP system requires LEAs that complete evaluations after the 60 day timeline to provide a reason for the delay prior to finalizing the eligibility determination. The list of reasons are:   
  
1. Student transfer within the district   
2. Waiting on specialist reports   
3. Excessive student absences   
4. Parent did not show for scheduled meetings, or parent cancelled scheduled meeting too late to reschedule within timelines, or parent requested to schedule meeting outside of timelines   
5. Student/parent serious medical issues   
6. Repeated attempts to contact parents failed   
7. Student shows documented progress when provided with research-based interventions in general education classroom   
8. Other

**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.**

The department collected data on initial consents for evaluations for all students with signed consent forms during FFY 2021 (July 1, 2021 – June 30, 2022). Data were collected though the statewide IEP data management system for all of Tennessee’s 147 LEAs. FFY 2021 was the thirteenth year these student-level data were collected through this data management system. The student-level data obtained through EasyIEP include:   
   
• Student name and basic demographics   
• LEA information   
• Date of initial consent for eligibility determination   
• Date of eligibility determination   
• Eligibility determination (eligible or ineligible)   
• Days from date of initial parent consent to date of eligibility determination   
• LEA in which initial consent was signed   
   
 Where applicable, the following were also collected:   
   
• Number of days over the 60 calendar day (or SBE emergency rule extended) timeline   
• Reasons for the delay   
• Whether timeline extension request and made and whether it was approved   
• Eligible disability category   
• Exit date and reason   
• District where consent was received

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 1,692 | 1,688 | 0 | 4 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

Prong 2   
   
For those LEAs with 1 or more of the 1,692 late student evaluations during FFY 2020, department staff conducted data pulls of parental permissions signed in FFY 2020 to determine 100% compliance once the individual instances of previously identified noncompliance were corrected. To determine if these LEAs were correctly implementing the regulatory requirements, the department looked at additional initial referrals from each of these LEAs. For LEAs with less than 500 initial referrals for evaluation in FFY 2020, the department required them to demonstrate 100% compliance for initial evaluations for a minimum of 30 consecutive days in FFY 2021. For LEAs with more than 500 initial referrals for evaluation in FFY 2020, the department required them to demonstrate 100% compliance for initial evaluation determinations for a minimum of 10 consecutive days in FFY 2021. After the department verified that the LEA was 100% compliant for at least a 30-day or 10-day time period and that all student-level noncompliance from FFY 2020 had been corrected (Prong 1), the finding was closed.

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

Prong 1   
   
The statewide IEP data management system (EasyIEP) is used to collect the data necessary to determine timely evaluation. This system was also used to follow-up on all instances of FFY 2020 student-level noncompliance when the evaluation exceeded established timelines. The department initially provided LEAs with guidance around how to correct noncompliance for FFY 2020 students whose initial evaluation was late and still open. These LEAs were required to research individual students and update EasyIEP if the evaluation had been completed. In the case of students whose evaluations were still pending, LEAs were required to complete the evaluation as soon as possible. In 1,688 instances, the evaluation or correction of other issues (e.g., mistakenly entered consent form, mistyping of date, etc.) for children whose initial evaluation was not timely was completed within one year. As of January 30, 2023, there are 4 students whose evaluations are still open. The department is conducting an investigation to ensure that these instances of noncompliance are addressed promptly.

**FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

As mentioned in the Prong 1 description, the IDEA Data Manager is conducting an investigation that includes contacting LEA special education supervisors to ensure that individual instances of noncompliance from FFY 2020 (i.e., open and overdue evaluations) are addressed immediately.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2019 | 45 | 45 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

For the LEAs with instances of noncompliance identified in FFY 2019 that were not yet verified as corrected at the time of the FFY 2020 APR submission on February 1, 2022, the department staff conducted data pulls of parental permissions signed in FFY 2019 to determine 100% compliance once the individual instances of previously identified noncompliance were corrected. To determine if these LEAs were correctly implementing the regulatory requirements, the department looked at additional initial referrals from each of these LEAs. For LEAs with less than 500 initial referrals for evaluation in FFY 2019, the department required them to demonstrate 100% compliance for initial evaluations for a minimum of 30 consecutive days in FFY 2021. For LEAs with more than 500 initial referrals for evaluation in FFY 2019, the department required them to demonstrate 100% compliance for initial evaluation determinations for a minimum of 10 consecutive days in FFY 2021. After the department verified that the LEA was 100% compliant for at least a 30 day or 10 day time period and that all student-level noncompliance from FFY 2019 had been corrected (Prong 1), the finding was closed.

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

There were 45 instances of noncompliance identified in FFY 2019 that were not yet verified as corrected at the time of the FFY 2020 APR submission on February 1, 2022. The department immediately contacted the LEAs responsible for the 45 children whose evaluations were still open and required them to promptly correct the noncompliance. The department verified these corrections using the statewide IEP data management system (EasyIEP) and provided guidance to the LEAs to support timely initial evaluations and prevent future noncompliance.

## 11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 45 uncorrected findings of noncompliance identified in FFY 2019 were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
   
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

**Response to actions required in FFY 2020 SPP/APR**

Please refer to the "FFY 2020 Findings of Noncompliance Verified as Corrected" and "Correction of Findings of Noncompliance Identified Prior to FFY 2020" sections in the Indicator Data description.

## 11 - OSEP Response

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 4 uncorrected findings of noncompliance identified in FFY 2020 were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

**Monitoring 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.

Targets must be 100%.

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

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

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

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 99.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.06% | 96.37% | 96.88% | 75.89% | 61.13% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination. | 6,220 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 810 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 2,324 |
| 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. | 2,830 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 69 |
| f. Number of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option. | 0 |

| **Measure** | **Numerator (c)** | **Denominator (a-b-d-e-f)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. | 2,324 | 2,511 | 61.13% | 100% | 92.55% | 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**

187

**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.**

There were 187 children who were served in Part C and referred to Part B for eligibility determination who did not have eligibility determined by their third birthdays, and if eligible, did not have an IEP developed and implemented by their third birthdays. Of the 187 children, 69 had documentation and/or eligibility information completed by January 30, 2023, with a range of 1 to 267 days between the child’s third birthday and the IEP or non-eligibility determination. The 118 children without documentation of an IEP or non-eligibility as of January 30, 2023 were overdue by an average of 419 days. Although all unacceptable, reasons provided for delays included: parent scheduling conflicts, inclement weather, late referrals from Part C, and school system staff training issues related to early childhood transition policies and procedures. The IDEA Data Team and the IDEA APR Support Team are actively supporting LEAs with uncorrected noncompliance to ensure that children who were served in Part C and referred to Part B have eligibility determined and if eligible, an IEP developed and implemented as soon as possible.

**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.**

Data were pulled from the Part C state database, Tennessee’s Early Intervention Data System (TEIDS), and the statewide IEP data management system (EasyIEP). These data were collected, merged, compared, and analyzed into a unified data table to determine if any children had an untimely IEP. Each LEA with records showing an untimely outcome was given the opportunity to verify and respond to the data matched at the individual record level.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 82 | 82 | 0 | 0 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

Prong 2   
  
Training and technical assistance on the policies and procedures for early childhood transition were provided as a virtual presentation to each LEA with a finding of noncompliance. The IDEA APR Support Team provided all trainings and verified LEA participation through a sign-in attendance document. In addition, the APR IDEA Support Consultants provided districts with real-time technical assistance related to currently transitioning children.   
  
The department also conducted a subsequent review of additional data to determine that all LEAs with noncompliance for FFY 2020 were subsequently correctly implementing 34 CFR 300.124(b). Additional data were pulled from the Part C TEIDS system and the Part B statewide IEP data management system and analyzed to see if identified LEAs showed any children who had untimely IEPs. Department staff found that all 82 LEAs with noncompliance identified in FFY 2020 were correctly implementing the regulatory requirements.

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

Prong 1   
  
The department verified that all 82 LEAs with noncompliance identified in FFY 2020 developed and implemented the IEP, although late, for all 969 children for whom implementation of the IEP was untimely. The data from the Part B EasyIEP system identified the date in which the IEP was developed or a non-eligibility determination was made. This information was reviewed and verified by the department's IDEA APR Support Team.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2019 | 1 | 1 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

Prong 2   
  
The IDEA APR Support Team provided additional training and technical assistance on the policies and procedures for early childhood transition to the one LEA with noncompliance identified in FFY 2019 that was not yet verified as corrected in FFY 2020. This team also assisted the LEA in completing its Early Childhood Transition Plan, which outlines procedures for early childhood transition to ensure future compliance. Finally, the APR IDEA Support Consultants provided districts with real-time technical assistance related to currently transitioning children.   
  
The department also conducted a subsequent review of additional data to determine that the LEA identified in FFY 2019 that was not yet verified as corrected in FFY 2020 was subsequently correctly implementing 34 CFR 300.124(b). Additional data were pulled from the Part C TEIDS system and the Part B statewide IEP data management system and analyzed to see if the LEA showed any children who had untimely IEPs. Department staff found that the LEA identified in FFY 2019 that was not yet verified as corrected in FFY 2020 was correctly implementing the regulatory requirements.

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

Prong 1   
  
The department verified that the one LEA with noncompliance identified in FFY 2019 that was not yet verified as corrected in FFY 2020 developed and implemented the IEP, although late, for all 19 children for whom implementation of the IEP was untimely. The data from the Part B EasyIEP system identified the date in which the IEP was developed or a non-eligibility determination was made. This information was previously reviewed and verified by the department's IDEA APR Support Team in FFY 2020.

## 12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 1 uncorrected finding of noncompliance identified in FFY 2019 was corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and the LEA with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
   
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

**Response to actions required in FFY 2020 SPP/APR**

Please refer to the "Correction of Findings of Noncompliance Identified in FFY 2020" and the “Correction of Findings of Noncompliance Identified Prior to FFY 2020” sections in the Indicator Data description.

## 12 - OSEP Response

## 12 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 13: Secondary Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 50.03% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 72.52% | 74.03% | 65.12% | 81.22% | 45.91% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

| **Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition** | **Number of youth with IEPs aged 16 and above** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 82 | 574 | 45.91% | 100% | 14.29% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

The SEA completed an annual update of the IEP Monitoring Protocol in FFY 2021. This included a revised set of expectations for LEAs which provided clarification and specificity to LEAs concerning IEP indicator requirements. There was also ongoing work by the SEA to improve the algorithm and platform to ensure all applicable LEAs have transition documents monitored appropriately and accurately. These updated expectations and changes to the algorithm (i.e., students being selected for IEP monitoring) may have contributed to the significant increase in noncompliance identified.

**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.**

For FFY 2021, staff from the Division of Federal Programs and Oversight (FPO) completed the monitoring requirements of this indicator. Analyses of student documents/records were completed via an IEP Monitoring platform embedded in the statewide IEP data management system (EasyIEP), where individual student documents are randomly selected and reviewed for completion and accuracy. LEAs were required to complete a two-level review of students' documents and evaluate the compliance elements for Indicator 13. After the LEA case manager and LEA IDEA director completed the IEP Monitoring, staff from FPO completed two levels of secondary review. LEAs were subsequently notified and required to address areas identified with noncompliance within 20 business days. Staff from FPO verified that all instances of noncompliance were corrected by July 1, 2022.

| **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**

Tennessee State Board of Education rule 0520-01-09-.12 (https://www.tn.gov/content/dam/tn/stateboardofeducation/documents/meetingfiles2/3-16-17\_IV\_A\_Special\_Education\_Programs\_and\_Services\_Rule\_0520\_01\_09\_11\_Clean\_Copy.pdf) requires that prior to grade 9 or age 14, the IEP for students with disabilities must include information on an initial four-year plan of study and identify possible transition service needs. However, not all components required for Indicator 13 must be addressed at that time. Therefore, the data used for Indicator 13 is collected only for students age 16 or above who are required to have all components of Indicator 13 completed.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 82 | 82 | 0 | 0 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

Prong 2   
  
All 82 LEAs identified as noncompliant on Indicator 13 in FFY 2020 were required to hold a training regarding the corrective actions to retrain special education teams responsible for the completion of IEP transition plans. These LEAs were monitored again in FFY 2021, with the monitoring platform selecting 6 to 28 random student records to review and evaluate for compliance. The exact number is based on a risk assessment from the previous year and an algorithm ensures that at least one file includes an IEP transition plan. Any further noncompliance identified during this process was addressed through additional corrective actions, thus confirming the correct implementation of regulatory requirements in the 82 LEAs identified as noncompliant on Indicator 13 in FFY 2020.

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

Prong 1   
  
The 172 individual cases of Indicator 13 noncompliance identified across 82 LEAs in FFY 2020 were corrected during FFY 2020 (2020-21 school year). Corrective actions were developed for each individual instance of noncompliance, and LEA-level staff members were required to provide evidence of corrected, compliant records within 20 business days. The submitted corrections were reviewed by SEA staff members to ensure that each individual case was compliant by the end of FFY 2020 (July 1, 2021).

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

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

## 13 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the findings of noncompliance identified in FFY 2019 were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

**Response to actions required in FFY 2020 SPP/APR**

Please refer to the "FFY 2020 Findings of Noncompliance Verified as Corrected" section of the Indicator Data description.

## 13 - OSEP Response

The State did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2020 because it did not report that it verified correction of those findings, consistent with OSEP Memo 09-02. Specifically, the State did not report that that it verified that each LEA with noncompliance identified in FFY 2020 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.

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 82 uncorrected findings of noncompliance identified in FFY 2020 were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

A. Enrolled in higher education within one year of leaving high school.

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

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

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

**Data Source**

State selected data source.

**Measurement**

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

**I. *Definitions***

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

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

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

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

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

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

**II. *Data Reporting***

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

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

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

1. Enrolled in higher education within one year of leaving high school;

2. Competitively employed within one year of leaving high school (but not enrolled in higher education);

3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed);

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

“Leavers” should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, “leavers” who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also happen to be employed. Likewise, “leavers” who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

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

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

**III. *Reporting on the Measures/Indicators***

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

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

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

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2009 | Target >= | 24.25% | 24.50% | 26.00% | 26.50% | 26.34% |
| A | 22.00% | Data | 21.17% | 26.11% | 21.99% | 25.75% | 12.49% |
| B | 2009 | Target >= | 60.00% | 60.50% | 61.00% | 62.00% | 63.12% |
| B | 57.00% | Data | 54.60% | 61.08% | 33.30% | 62.55% | 17.32% |
| C | 2009 | Target >= | 70.25% | 71.00% | 71.00% | 72.50% | 74.78% |
| C | 65.00% | Data | 64.62% | 71.13% | 74.63% | 74.25% | 66.57% |

**FFY 2020 Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 26.93% | 27.52% | 28.11% | 28.70% | 29.29% |
| Target B >= | 63.69% | 64.26% | 64.83% | 65.40% | 65.97% |
| Target C >= | 75.31% | 75.84% | 76.37% | 76.90% | 77.43% |

**Targets: Description of Stakeholder Input**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 1,930 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 1,345 |
| Response Rate | 69.69% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 282 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 607 |
| 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) | 44 |
| 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). | 87 |

| **Measure** | **Number of respondent youth** | **Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 282 | 1,345 | 12.49% | 26.93% | 20.97% | Did not meet target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 889 | 1,345 | 17.32% | 63.69% | 66.10% | 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) | 1,020 | 1,345 | 66.57% | 75.31% | 75.84% | 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.

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Response Rate | 71.27% | 69.69% |

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

While most of the demographics of the survey respondents were representative of the overall cohort of students pulled in this sampling, there were three groups - Black students, White students, and dropouts - that were not completely representative. The lack of representativeness in the responses can be contributed to numerous factors, one of the most notable being not having the most accurate and current contact information for students/families. Absent current contact information, LEAs are unable to reach exited students. The department has continued to encourage LEAs to update all contact information for students whenever received, even if they are exiting the LEA at some point in the duration of the school year. Contact information for both students and families can be captured in LEA student information systems. To streamline the availability of this data for special educators, the department transfers student and family contact information from student information systems into the statewide IEP data management system (EasyIEP) nightly. Once in the system, users can augment, delete, add, and update the contact information as appropriate, and these data will remain linked to the appropriate student record. Continued housing of the contact information in a central location that special education staff can access will ideally help keep contact information current. The department provides this service of importing contact information free of charge to LEAs and makes them aware of this process/service multiple times through written and verbal communication/trainings.   
   
The work done by the department in recent years to have contact information readily available in the statewide IEP data management system (EasyIEP), as well as the diligent efforts of the department to send updates, reminders, and suggested contact methods to LEAs required to participate in this indicator's survey, has and will continue to support higher response rates for this indicator. Improving the response rate for the indicator is yet another way to improve the representativeness of the respondents. After a significant increase from FFY 2019 to FFY 2020 (58.71% to 71.27%), the response rate decreased slightly in FFY 2021 (69.69%). While the department is pleased with this overall progress, it will continue focus its efforts to improve representativeness on increasing the overall participation rate and developing targeted strategies aimed at increasing underrepresented populations and decreasing overrepresented populations.

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

Response and nonresponse bias included chi-square tests and comparison of nonresponse rates across underrepresented student groups. Chi-square tests confirmed that there was no statistically significant difference between the proportion of respondents and the proportion in the target exiting population of students with disabilities for female students, Native American students, Asian or Pacific Islander students, Hispanic students, Multi-racial students, and students in each disability category. For Black, White, and dropout students, the difference in response representativeness was statistically significant. Please see the “analyses of the extent to which 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” section below for additional analyses related to response representativeness. Nonresponse rates did not differ by gender with 29.81% of males not responding compared to 31.20% of females. There were differences by race/ethnicity, with nonresponse rates ranging from 47.76% (2 or more races) to 25.08% (White).   
   
Steps to reduce identified nonresponse bias, increase response representativeness, and promote responses from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school are outlined in both the “strategies that will be implemented which are expected to increase the response rate year over year” section above and the “strategies that the State will use to ensure that in the future the response data are representative” section below.

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

The table below provides a summary of representativeness data on all FFY 2021 post-school survey respondents. The calculation, from the National Post-School Outcomes Center (NPSO), compares the respondent pool of students against the targeted group of students. This is done to determine whether the respondents represent the entire group of exited students that could have responded to the survey. The NPSO calculation compares two proportions (target proportion against respondent proportion) by selected attributes including: child disability, child gender, child race/ethnicity, English learner status, and whether the student was a dropout. Differences that are greater than +/- 3% indicate that the respondent group over or underrepresents the entire group of targeted respondents. For this post-school outcomes survey, the demographics were mostly representative; however, White students were slightly overrepresented in the respondent group (4.66%).   
   
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SLD /\_\_\_ED\_\_\_ / \_\_ID\_\_/\_\_\_AO\_\_\_/\_Female\_\_ /\_\_\_B\_\_\_\_ /\_\_NA\_ / A or PI /\_\_H\_\_ /\_\_\_\_W\_\_\_ / \_\_\_M\_\_/ ELL / Dropout   
   
Target Leaver Representation: 47.46% / 6.48% / 7.67% / 38.39% / 35.70% / 23.37% / 0.47% / 1.09% / 9.43% / 62.18% / 3.47% / 0.00% / 9.74%   
   
Respondent Representation:\_\_49.74% / 7.88% / 5.95% / 36.43% / 35.24% / 20.45% / 0.37% / 1.04% / 8.70% / 66.84% / 2.60% / 0.00% / 6.77%   
   
Difference:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2.28% / 1.40% / -1.72% / -1.96% / -0.46% / -2.92% / -0.10% / -0.05% / -0.73% / 4.66% / -0.87% / 0.00% / -2.97%

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

NO

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

The department will continue working in the 2022-23 school year to ensure that the population of youth surveyed is representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. Efforts from the 2021-22 school year to remedy some of the noteworthy over/underrepresentation manifested in a slight decrease in underrepresentation of responses from students who dropped out (improvement from 3.81% underrepresented to only 2.97% underrepresented).   
  
The department will focus its efforts to improve representativeness on increasing the overall participation rate and developing targeted strategies aimed at increasing underrepresented populations and decreasing overrepresented populations, as outlined in the “Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented“ section above.

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

As mentioned above, the metric used to determine representativeness, from the NPSO, compares the respondent pool of youth against the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school (i.e., the target group). The difference row compares the two proportions (target proportion against respondent proportion) by selected attributes including: child disability, child gender, child minority race/ethnicity, English learner status, and whether the student was a dropout. Cells in the difference row that are greater than +/- 3%, indicate that the respondent group over or underrepresents the entire group of targeted respondents.   
  
Chi-square tests confirmed that there was no statistically significant difference between the proportion of respondents and the proportion in the target exiting population of students with disabilities for female students, Native American students, Asian or Pacific Islander students, Hispanic students, Multi-racial students, and students in each disability category. For Black, White, and dropout students, the difference in representativeness was statistically significant.

| **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 LEAs are sampled based on their locations in the state so that all regions are represented and it is ensured that every four years an LEA will complete the survey. This sampling is done via the National Post-School Outcomes Center (NPSO) Sampling Calculator on a four-year sampling cycle. To ensure there is no potential bias or misrepresentation that can sometimes arise from student sampling, all students with disabilities within each selected LEA who exited school by (a) graduating with a regular diploma, (b) graduating with a special education diploma/certificate, (c) aging out of high school, or (d) dropping out are surveyed. For the three LEAs with 50,000 or more students enrolled, a sampling method is utilized so that the LEA is surveyed each year, but that different schools within the LEA are selected every four years (similar to the process used for sampling smaller LEAs). To sample these three large LEAs, percentages of high schools and middle schools are determined for each LEA. Then the number of schools in each school type category is divided by four (for the four-year cycle). Each school is given a unique code to randomize them for selection to remove bias. Once randomized, the number of high schools and middle schools to be surveyed each year are predicated on the previously determined percentages (or weights) of the aforementioned school types in the district.   
   
This sampling methodology ensures that LEAs and schools selected for the survey each year are representative of the state. To ensure there is no potential bias or misrepresentation that can sometimes arise from student sampling, all students with disabilities within each selected LEA who exited school by (a) graduating with a regular diploma, (b) graduating with a special education diploma/certificate, (c) aging out of high school, or (d) dropping out are surveyed. In addition, the application of the same survey collection process and same questions regarding post-school outcomes for each administration certifies that the results of the survey are comparable and will yield valid and reliable estimates across school years.  
   
The department contracts with East Tennessee State University (ETSU) to disseminate, collect, and analyze survey results. To complete the survey, LEA staff contact students who exited by telephone, in-person visits, mail, email, or virtual communication (e.g., FaceTime, Zoom). The LEA staff use an online secure website to enter the data collected through the surveys. The web survey data are housed at ETSU and data are automatically compiled for analysis and reporting by ETSU and provided to the department.  
  
The department will continue to use its previously approved Indicator 14 sampling plan for the FFY 2020 through FFY 2025 SPP/APRs. An overview of the sampling methodology outlining how the design will yield valid and reliable estimates is provided above. The only change to the sampling plan will be the years for which it is used.

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

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

## 14 - Prior FFY Required Actions

In the FFY 2021 SPP/APR, the State must report whether the FFY 2021 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.   
  
With the FFY 2021 APR, the State must submit its sampling plan and provide data consistent with the approved sampling plan.

**Response to actions required in FFY 2020 SPP/APR**

Please refer to 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" and "describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics" sections in the Indicator Data description.  
  
In addition, Tennessee has attached a copy of its current sampling plan for FFY 2020 through FFY 2025.

## 14 - OSEP Response

In its description of its FFY 2021 data, the State did not describe strategies that will be implemented to increase the response rate year over year for those groups that are underrepresented, as required by the Measurement Table.  
  
The State did not analyze the response rate to identify potential nonresponse bias or identify steps taken to reduce any identified bias to promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school, as required by the Measurement Table.

## 14 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.   
  
The State submitted a sampling plan for this indicator with its FFY 2021 SPP/APR. OSEP identified concerns in its evaluation of the sampling plan that indicated it may not yield valid and reliable data for this indicator. The State has not yet responded to OSEP’s concerns. The State must submit by September 1, 2023 its revised sampling plan that the State plans to use for its FFY 2022 – FFY2025 data collections and indicate how the revised plan addresses the concerns identified in OSEP’s evaluation.

# Indicator 15: Resolution Sessions

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

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

## 15 - Indicator Data

Select yes to use target ranges

Target Range is used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1 Number of resolution sessions | 23 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1(a) Number resolution sessions resolved through settlement agreements | 19 |

**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**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 50.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 12.00% | 13.00% | 14.00% | 15.00% | 60.00%-70.00% |
| Data | 69.23% | 66.67% | 47.27% | 65.71% | 83.33% |

**Targets**

| **FFY** | 2021 (low) | 2021 (high) | 2022 (low) | 2022 (high) | 2023 (low) | 2023 (high) | 2024 (low) | 2024 (high) | 2025 (low) | 2025 (high) |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target >= | 60.00% | 70.00% | 60.00% | 70.00% | 60.00% | 70.00% | 60.00% | 70.00% | 60.00% | 70.00% |

**FFY 2021 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2020 Data** | FFY 2021 Target (low) | FFY 2021 Target (high) | FFY 2021 Data | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 19 | 23 | 83.33% | 60.00% | 70.00% | 82.61% | 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 mediations is less than 10. In a reporting period when the number of resolution mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

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

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

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

## 16 - Indicator Data

**Select yes to use target ranges**

Target Range is used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1 Mediations held | 19 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.a.i Mediations agreements related to due process complaints | 7 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.b.i Mediations agreements not related to due process complaints | 5 |

**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**

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 56.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 73.00% | 74.00% | 75.00% | 76.00% | 65.00%-75.00% |
| Data | 31.25% | 53.85% | 70.59% | 66.67% | 52.94% |

**Targets**

| **FFY** | 2021 (low) | 2021 (high) | 2022 (low) | 2022 (high) | 2023 (low) | 2023 (high) | 2024 (low) | 2024 (high) | 2025 (low) | 2025 (high) |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target >= | 65.00% | 75.00% | 65.00% | 75.00% | 65.00% | 75.00% | 65.00% | 75.00% | 65.00% | 75.00% |

**FFY 2021 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2020 Data** | **FFY 2021 Target (low)** | **FFY 2021 Target (high)** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 7 | 5 | 19 | 52.94% | 65.00% | 75.00% | 63.16% | Did not meet target | No Slippage |

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

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

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

**Measurement**

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

**Instructions**

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

**Targets*:*** In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2021 through FFY 2025. The State’s FFY 2025 target must demonstrate improvement over the State’s baseline data.

**Updated Data:** In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State’s targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

*Phase I: Analysis:*

- Data Analysis;

- Analysis of State Infrastructure to Support Improvement and Build Capacity;

- State-identified Measurable Result(s) for Children with Disabilities;

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

*Phase II: Plan* (which, is in addition to the Phase I content (including any updates) outlined above:

- Infrastructure Development;

- Support for local educational agency (LEA) Implementation of Evidence-Based Practices; and

- Evaluation.

*Phase III: Implementation and Evaluation* (which, is in addition to the Phase I and Phase II content (including any updates) outlined above:

- Results of Ongoing Evaluation and Revisions to the SSIP.

**Specific Content of Each Phase of the SSIP**

Refer to FFY 2013-2015 Measurement Table for detailed requirements of Phase I and Phase II SSIP submissions.

Phase III should only include information from Phase I or Phase II if changes or revisions are being made by the State and/or if information previously required in Phase I or Phase II was not reported.

***Phase III: Implementation and Evaluation***

In Phase III, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. This includes: (A) data and analysis on the extent to which the State has made progress toward and/or met the State-established short-term and long-term outcomes or objectives for implementation of the SSIP and its progress toward achieving the State-identified Measurable Result(s) for Children with Disabilities (SiMR); (B) the rationale for any revisions that were made, or that the State intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and (C) a description of the meaningful stakeholder engagement. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State’s last SSIP submission (i.e., Feb 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes, and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023)) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 17 - Indicator Data

**Section A: Data Analysis**

**What is the State-identified Measurable Result (SiMR)?**

In Phase I, Tennessee identified a SiMR of increasing by one percent annually the percent of students with a specific learning disability (SLD) in grades 3-8 scoring at or above Basic (since renamed “Approaching”) on the statewide English/language arts (ELA) assessment. Evaluation activities were developed by the department to track progress toward and achievement of this ambitious but achievable goal.

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

NO

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

YES

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

Tennessee uses a cohort model, calculating the SiMR for the group of districts participating in each annual iteration of the department’s SSIP activities (originally the cohorts of the 2015-2020 OSEP funded State Personnel Development Grant [SPDG] and then the cohorts of the state funded continuation of SPDG activities branded as the Access for All initiative). The FFY 2021 cohort districts began/reengaged in SSIP activities in July 2020, thus the subset represents districts in active implementation of the SSIP evidence-based strategies during FFY 2021.

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

NO

**Please provide a link to the current theory of action.**

Tennessee’s detailed theory of action can be found on page 38 of the SSIP Phase III-4 report: https://www.tn.gov/content/dam/tn/education/special-education/sped\_ssip\_phase\_iii4\_201920.pdf. The broad theory of action can be found on page 7 of the same document: https://www.tn.gov/content/dam/tn/education/special-education/sped\_ssip\_phase\_iii4\_201920.pdf.

**Progress toward the SiMR**

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

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2018 | 31.47% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 38.24% | 39.24% | 40.24% | 41.24% | 42.24% |

**FFY 2021 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of students with a specific learning disability (SLD) in grades 3-8 in SSIP FFY21 districts scoring at or above Approaching on the statewide English language arts (ELA) assessment** | **Number of students with a specific learning disability (SLD) in grades 3-8 in SSIP FFY21 districts who received a valid score on the statewide English language arts (ELA) assessment** | FFY 2020 Data | FFY 2021 Target | FFY 2021 Data | **Status** | **Slippage** |
| 1,542 | 4,591 | 37.24% | 38.24% | 33.59% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

The observed slippage of 3.65% among SSIP 3.0 districts is slightly less than the statewide decrease of 5.44% observed among all students with SLD in grades 3-8 on the ELA assessment. Furthermore, although fewer students with SLD achieved at the “Approaching” level on the statewide ELA assessment in 2022, the proportion of those students who actually achieved proficiency increased from 1.16% in to 2021 to 2.94% in 2022 among SSIP 3.0 districts. Although six SSIP 3.0 districts did increase the percentage of SLD students who achieved at the level of “Approaching” or above, the majority of districts decreased which contributed to the slippage of the entire cohort.

**Provide the data source for the FFY 2021 data.**

The student level statewide assessment file used to populate EDFacts files FS185 and FS188 is the source of TNReady English Language Arts performance levels for students in grades 3-8. This file is merged with the student level End-of-Year Frequency file retrieved from the EasyIEP data system annually on June 30 to identify all students with SLD served by one of the SSIP districts at any point during the relevant school year. The instructional environment data comes from the federal Table 1 and 3 Report formatted to populate EDFacts FS002. It is pulled from the EasyIEP data system with a census date of May 1 in the relevant year.

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

The 2018-19 assessment results, compiled in the fall of 2019-20, were the baseline SiMR data for the current cohort of SSIP districts. For the 2021-22 school year, 33.59% of students with an SLD in grades 3-8 scored at or above Approaching on the statewide ELA assessment with a participation rate of 98.04%. This was a decrease of 3.65%.   
  
Collection of baseline data regarding the percent of students with a SLD who have access to core instruction for 80 percent or more of the day for the current cohort of SSIP districts came from a census report pulled on May 1, 2019. As a baseline for this measure, 73.95% of the students with an SLD were in the general education setting 80 percent or more of the day. The most recent comparison pull was completed on May 1, 2022 to assess change from the baseline data pull to the spring after trainings on access were completed. This data pull indicated that 84.73% of students with an SLD were served in the general education setting 80 percent or more of the day, an increase of 10.78%.

**Optional: Has the State collected additional data *(i.e., benchmark, CQI, survey)* that demonstrates progress toward the SiMR? (yes/no)**

YES

**Describe any additional data collected by the State to assess progress toward the SiMR.**

The Access for All initiative concluded its 2021-2022 activities and then the participating districts continued implementation of SSIP evidence-based practices through the Access for All Learning Network (AALN). Over a multi-year timeline, participants focus on access to high-quality tier 1 literacy and math instruction for all students, intensive reading intervention, and intensive math and writing intervention. The multi-year design allows more time to work with districts, allowing for gradual release of support duties to district personnel and school administrators. During FFY 2021 the participating districts were primarily focused on intensive reading intervention. Progress data were collected throughout the period of Spring 2021-22 and Fall of the 2022-23 school years through a series of post training surveys, classroom observations, coaching records, and a baseline Individualized Education Program (IEP) file review. This data collection was focused specifically on strategies one, two, three, and four.

**Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)**

NO

**Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)**

NO

**Section B: Implementation, Analysis and Evaluation**

**Please provide a link to the State’s current evaluation plan.**

Tennessee’s evaluation plan can be found on pages 62 to 108 of the SSIP Phase II report: https://www.tn.gov/content/dam/tn/education/special-education/sped\_ssip\_phase\_ii.pdf. Although some information such as dates and staffing may have changed, the core components of the plan (including the evaluation questions) remain intact.

**Is the State’s evaluation plan new or revised since the previous submission? (yes/no)**

NO

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

Infrastructure Changes  
The department has continued the implementation efforts of several large-scale infrastructure changes previously undertaken to support the State’s strategic plan, Best for All (https://bestforall.tnedu.gov/).   
  
Winter/Spring 2022 -- The SSIP Evaluators in conjunction with the Access for All higher education partner (The University of Tennessee, UT CLEE) expanded on the initiative’s data collection monitoring plan and data dashboard infrastructure available to all stakeholders to include new activities.  
  
Spring 2022 – The Tennessee Department of Education (TDOE), the New Teacher Project, along with the University of Tennessee at Knoxville’s Center for Literacy, Education and Employment (CLEE) craft the Access for All Network. The network prioritizes professional development resources for district and school administrators – who have the greatest ability to remove barriers and promote the successful implementation of the SSIP EBPs within their classrooms.  
  
Spring 2022 – The AALN is formally introduced to all SSIP districts through a series of virtual office hours and coaching conversations. All SSIP districts are encouraged to continue their efforts through the AALN.  
  
Fall 2022 – The New Teacher Project and TDOE develop the content for the Fall Learning Network dates. The SSIP Regional Access Coaches develop the content and facilitative questions for the seasonal CoP.  
  
Fall 2022 – SSIP member database and reporting schedule created by CLEE and evaluators to monitor participation, schedule coaching, and collect/analyze participant feedback.  
  
Implementation Activities   
Strategy One Access to Core Instruction and Strategy Two: Providing Increasingly Intensive Intervention  
  
Winter/Spring 2022 – Facilitators redelivered the content to their districts through a series of a winter/spring professional development in one full-day training and two one-hour spring CoPs. From January through May 2022, 1,852 from 35 districts completed the professional development participant survey and 1,276 participants from 31 districts completed one or both spring CoP surveys.   
  
Winter/Spring 2022 – The Access for All initiative had eight Regional Access Coaches under its employ who worked with teachers through cognitive coaching cycles; teachers from preschool to grade 12 were eligible for coaching. From January-May 2022, 178 coaching sessions occurred. A coach would see multiple teachers within a single school or may visit teachers in multiple schools during a coaching day.  
  
Winter/Spring 2022 – A core expectation of each participating district was to have approximately half of their teachers who received the fall trainings observed again in the spring to ascertain the growth of SSIP strategy implementation at the school and classroom level. Through May 2022, 289 K-8 English Language Arts teachers from 30 districts had spring observations recorded.  
  
Summer 2022 – 15 districts agree to continue their SSIP implementation with supports from the AALN through a formal partnership letter. All districts attend the 5 day Summer Workshop. Content built upon prior learning and connected it within new learning focused on high-quality instructional materials (HQIM). Each SSIP district wrote an SSIP implementation action plan that included milestone targets.  
  
Fall 2022 – SSIP district participants attend monthly Learning Network meeting and seasonal CoPs (biannual) to review and refine understanding of evidence-based practices.  
  
Fall 2022 – AALN has eight SSIP Regional Access Coaches who work with the district and school administrators at least twice per month to track progress towards milestones, problem solve, and revise each SSIP district’s implementation action plan. Coaches also regularly provide technical assistance to SSIP districts concerning infrastructure development and classroom implementation of the EBPs.  
  
Strategy Three: Addressing Skill Deficits through Instructionally Appropriate IEP (IAIEP) Development   
May-September 2022 – A random sample of SSIP district IEPs were collected and analyzed as a measure of quality using a normed quality rubric addressing the present levels of educational performance (PLEP) and measurable annual goals (MAGs) of the IEP.

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

Infrastructure Changes   
Access for All Data Sharing (expansion of the data collection monitoring plan and redesign of the data dashboard infrastructure available to all stakeholders) – Data measures were uploaded/updated daily and shared throughout the data communication systems. All data dashboards were redesigned to give expanded insights, be more accessible, and to increase access to data for regional support personnel, educator coaches, and district/school leaders. These outcomes were related to the data and accountability/monitoring components of the systems framework. This strategy supported system change through its support of continuous improvement cycles and was necessary to both the achievement of the SiMR and the sustainability of systems improvement efforts.  
  
AALN Created and Installed – The professional development delivery model, curriculum, and learning calendar were created. Member districts were recruited from within the existing SSIP districts. These outcomes were related to the professional development and technical assistance components of the systems framework. This strategy supports system change was necessary to both the achievement of the SiMR and the sustainability of systems improvement efforts.  
  
AALN Data Collection and Reporting System Installed – Post activity surveys were written, digital versions were created, data collection calendars put in place, and reports written and disseminated to all stakeholders. These outcomes were related to the data and accountability/monitoring components of the systems framework. This strategy supported system change through its support of continuous improvement cycles and was necessary to both the achievement of the SiMR and the sustainability of systems improvement efforts.  
  
Implementation Activities   
Strategy One and Two: Access to Core Instruction and Providing Increasingly Intensive Intervention:   
Access for All District Redelivery by Facilitators, Year Two, Winter/Spring (January through May 2022) 1,852 from 35 districts completed the professional development participant survey and 1,276 participants from 31 districts completed one or both spring CoP surveys for winter/spring content in year two (Strand 1). In addition, redelivery participants also complete survey questions designed to measure that the training was redelivered with integrity, with all required activities averaging at 87% or better. These outcomes were related to the governance, professional development, and technical assistance components of the systems framework. This strategy supported system change through the installation of EBPs and was necessary to the achievement of the SiMR, the sustainability of systems improvement efforts, and scale-up.  
  
AALN Training w/ District Action Plan Writing – Participants from 15 districts participated in a 5-day Summer Workshop. Content built upon prior learning and connected it within new learning focused on ensuring students with disabilities have access to high-quality instruction through the use of HQIM. Each SSIP district wrote an SSIP implementation action plan that included milestone targets- this Action Plan is revised throughout the year. SSIP district participants also attend monthly Learning Network meeting and seasonal CoPs (quarterly) to review and refine understanding of evidence-based practices This outcome is related to the governance, professional development, and technical assistance components of the systems framework. This strategy supports system change through the installation of EBPs and is necessary to the achievement of the SiMR, the sustainability of systems improvement efforts, and scale-up.   
  
Coaching – From January through May 2022, 178 coaching sessions occurred. A coach would see multiple teachers within a single school or may visit teachers in multiple schools during a coaching day. AALN has eight SSIP Regional Access Coaches who work with the district and school administrators at least twice per month to track progress towards milestones, problem solve, and revise each SSIP district’s implementation action plan. Coaches also regularly provide technical assistance to SSIP districts concerning infrastructure development and classroom implementation of the EBPs. These outcomes are related to the data, quality standards, and accountability/monitoring components of the systems framework. These strategies support system change through their support of continuous improvement cycles and are necessary to both the achievement of the SiMR and the sustainability of systems improvement efforts.  
  
Fidelity Measurement -- Through May 2022, 289 K-8 English Language Arts teachers from 30 districts had spring observations recorded. This outcome was related to the data, quality standards, and accountability/monitoring components of the systems framework. This strategy supported system change through its support of continuous improvement cycles and was necessary to both the achievement of the SiMR and the sustainability of systems improvement efforts.   
  
Strategy Three: Addressing Skill Deficits through IAIEP Development:   
IEP sampling – A random sample of SSIP district IEPs were collected and analyzed as a measure of quality using a normed quality rubric addressing the present levels of educational performance (PLEP) and measurable annual goals (MAGs) of the IEP.. This outcome is related to the data, quality standards, and accountability/monitoring components of the systems framework. This strategy supports system change through its support of continuous improvement cycles and is necessary to both the achievement of the SiMR and the sustainability of systems improvement efforts.

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

YES

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

Strategy Four: Access to High-Quality Instructional Materials (HQIM) and Access  
A key shift in literacy textbook adoption materials in 2019 within the state was a focus on HQIM. Since 2014, Tennessee has had a State Textbook and Instructional Materials Quality Commission whose responsibility is to recommend an official list of textbooks and instructional materials for approval of the State Board of Education. The state then provides rubrics and needs assessment tools for the districts in selecting textbooks from this approved list. This support/guidance for local level leadership ensures HQIM, including access points and scaffolds foe all students. For literacy, the state also offers a free resource: the TN Foundational Skills Curriculum Supplement.  
  
HQIM are one lever to ensure students with disabilities have improved outcomes (i.e., close the achievement gap). HQIM should be used to better provide access for SWDs in the general education classroom. This strategy includes strengthening opportunities for ongoing collaboration among general education teachers and special education teachers, building leadership, and support staff to actively engage in lesson preparation and unit preparation when using HQIM.   
  
In addition to the district adoption of HQIM for literacy, the state also offered early literacy courses/professional development, beginning in 2021, to educators across the state. These courses primarily focused on the use of the adopted materials for better preparation of lessons and units in each teacher’s classrooms. TDOE launched an early literacy network in the same year to bring districts together for peer learning, technical assistance, mentoring, and HQIM supports connected with the State’s Reading 360 initiative. The state is currently engaged in a Math textbook adoption cycle that mirrors the successes of the installation of Literacy HQIM.  
  
Spring 2022 – HQIM content from the Reading 360 initiative continues to be connected within Access for All EBP trainings and supports. The Instruction Utilizing HQIM domain average score on the SSIP implementation fidelity instrument for K-8 English Language Arts teachers increased 75% from fall to spring with 78% of the elements of the HQIM practice or strategy observed during the spring.  
  
Spring 2022 – While Access for All has embedded HQIM into its activities for the past three phases within its focus to align the SSIP practices with the broader state improvement plan, HQIM is selected as a primary SSIP infrastructure improvement strategy.  
  
Summer 2022 – 15 districts agree to continue their SSIP implementation with supports from the Access for All Network (AALN) through a formal partnership letter. All districts attend the 5-day Summer Workshop. Content built upon prior learning and connected within new learning focused on ensuring students with disabilities have access to high-quality instruction through the use of HQIM. The workshop focused on making sure that ALL students in Tennessee learn foundational reading skills through HQIM. District teams were given significant time to explore and use their HQIM as they contextualized proper unit and lesson planning in their district’s schools. Teams identified strengths, weakness, opportunities, and threats for providing access to all students in their reading instruction and left the week with preliminary action plans.  
  
Fall 2022 – SSIP district participants attend monthly Learning Network meeting and seasonal COPs (quarterly) to review and refine understanding of evidence-based practices.  
  
Fall 2022 – AALN has four SSIP Regional Access Coaches who work with the district and school administrators at least 4 times per year to track progress towards milestones, problem solve, and revise each SSIP district’s implementation action plan. Coaches also regularly provide technical assistance to SSIP districts concerning infrastructure development and classroom implementation of the EBPs.

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

All district and school administrators will continue through this year’s training support progression (Year One Literacy content) which includes monthly Learning Network meetings, the Spring CoP, and ongoing coaching until May 2023. These district and school leaders will continue to receive technical assistance from SSIP leadership as needed. Teacher fidelity observations (Instructional Practice Guide) will continue to be collected by SSIP districts through the 2022-23 academic year (Phase III:7).  
  
Year Two Literacy content will be presented to existing and new SSIP district and school administrators beginning in August 2023. The implementation support activities for the 2023-24 school year will follow the same progression as this school year: monthly fall and spring Learning Network, quarterly CoPs, and ongoing coaching.

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

• Inclusive Culture and Environment  
• Flexible Access to Instruction  
• Multi-Sensory Approach and Data-Based Decision-Making  
• Writing of IAIEPs  
• Cognitive Coaching  
• Access to HQIM

**Provide a summary of each evidence-based practices.**

Evidence-Based Practice: Environment – For a student to truly have access to core instruction, there must be an inclusive culture and environment established to effectively support students and research contends that both emotional support and classroom climate – which the department groups under the umbrella of “culture and environment” – have the capacity to yield improved student outcomes.  
  
Evidence-Based Practices: Flexible Access to Instruction – This was one of the initial EBPs employed to address the SSIP’s first improvement strategy. Work with this EBP has continued, in conjunction with additional training on the EBP of environment, as a positive environment is essential for flexible access strategies to be successful. Trainings around this EPB have focused on ensuring students have the appropriate scaffolds and infrastructure in place to succeed in the classroom. Flexible access centers on the principles of effective learning through flexibility in engagement, representation, and expression. Flexible access and scaffolding of instruction serve as effective complements. Flexible access encourages educators to respond to the beneficial, and inevitable, variance among students in the classroom to ensure access to instruction and accurate assessment of knowledge/skills. The use of accommodations and modifications for SWDs was one of the focal points of the trainings on access and scaffolding. This was done to ensure districts adequately understand that fair does not necessarily mean equal as (1) SWDs may require additional supports and services to best access core instruction and (2) greater flexible access for all students lessens the need for individual student accommodations. This contention lies at the very heart of this EBP – it prioritizes that instruction must be accessible to every student in the classroom and that this is the responsibility of the educator.  
  
Evidence-Based Practices: Multi-Sensory Approach and Data-Based Decision-Making – These EBPs have been grouped together, as they are innately intertwined. As shared in Phase III – 2, both inform one another, as do their sub practices. The materials developed for SSIP strategy two were focused heavily on utilizing a multi-sensory approach to educate and support SWDs, partially informed by the research findings on the integration of multiple senses to enhance and strengthen learning pathways.  
  
Evidence-Based Practice: Writing of IAIEPs – This EBP has been implemented in several waves over the last several phases. To assess the quality of the IEPs being developed in the SSIP districts, the department created a rubric that continues to measure the quality of IEPs for specific sections of the document, and the annual review allows the department to identify concerning trends in writing IEPs, particularly regarding both the data collection and writing of present levels of performance and measurable annual goals. To address these prominently weak areas of the IEPs sampled throughout the SSIP’s previous phases, these sections of the IEP became a major focus of continuing SSIP work.  
  
Evidence-Based Practice: Cognitive Coaching – This EBP is a process that truly embodies what it means to “coach,” contrasting with what “coaches” often provide in education which is actually “consulting.” Cognition drives behavior, so in Cognitive Coaching, specific paraphrasing and mediative questions asked by the coach aim to draw out the district leadership and teacher resourcefulness and create more self-directed professionals who can change their own behavior. So, to see an even greater behavioral change in educators, leading to greater outcomes for students, the department created a coaching position in addition to the eight hired previously. These regional access coaches (RACs) have been added to the team to specifically provide coaching cycles at the district leadership and individual teacher level. These coaches engage in a planning conversation, then collect data in the classroom that the teacher requests, then engage in reflecting and/or problem resolving conversations using training in Cognitive Coaching.  
  
Evidence-Based Practice: HQIM and access – HQIM are one lever to ensure students with disabilities have improved outcomes (i.e., close the achievement gap). Through professional development, HQIM are being used to better provide access for SWDs in the general education classroom. This professional development includes strengthening opportunities for ongoing collaboration among general education teachers and special education teachers, building leadership, and support staff to actively engage in lesson preparation and unit preparation when using HQIM.

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

Inclusive Culture and Environment -- For the SWDs particularly addressed in Tennessee’s SiMR – students with an SLD – core instruction should be a part of a student’s least restrictive environment given that appropriate interventions and supports should make access to core instruction in the general education setting a viable option for 80% or more of a student’s day. Access for All training and coaching activities focused on this EBP lead to district’s prioritizing access to core instruction through both general and special education change in practice, inclusive teaching mindsets paired with greater educator efficacy, as a result, improved student outcomes.  
  
Flexible Access to Instruction – For the SWDs particularly addressed in Tennessee’s SiMR – students with an SLD – core instruction should focus on ensuring students have the appropriate access and scaffolds in place to succeed in the classroom. Access for All training and coaching activities focused on this EBP lead to teachers’ greater use of a larger and more flexible “toolbox” of engagement, representation, and expression, reducing the need for accommodations and modifications for SWDs. Greater access, through flexibility for all students, leads to better student outcomes, especially for SWDs.  
  
Multi-Sensory Approach and Data-Based Decision-Making – For the SWDs particularly addressed in Tennessee’s SiMR – students with an SLD – core instruction should focus on ensuring students have learning activities that are strengths-based and naturally engaging. Access for All training and coaching activities focused on this EBP lead to teachers’ greater use of practices that are tailored to every child’s learning needs which leads to better student outcomes, especially for SWDs who rely on this approach to learn, remember, and use new knowledge and skills.  
  
Writing of IAIEPs – For the SWDs particularly addressed in Tennessee’s SiMR – students with an SLD – IEPs must capture thorough and accurate present levels of educational performance and reasonably calculated and individualized measurable annual goals. Consultation through district partnerships across the state provide districts with support to improve IAIEP writing.  
Cognitive Coaching – The nine regional access coaches (RACs) provide coaching cycles at the district leadership or individual teacher level. These coaches engage in planning conversations, collect data in the classroom, and then engage in reflecting and/or problem resolving conversations using training in Cognitive Coaching. This activity supports the greater understanding of and implementation of the other EBPs which increases a student with an SLD’s access to high-quality instruction which leads to better student outcomes.  
  
Access to HQIM: If districts have HQIM and are provided high-quality professional learning focused on creating structures and alignment of HQIM to the individual needs of students with disabilities through the identification of access points and appropriate scaffolds, then educator and administrative teams will improve classroom practice for students with disabilities in grades K-12, leading to increased academic and post-secondary success.

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

The instructional fidelity observations gathered last spring for the Access for All initiative reflect successful classroom implementation and noteworthy fidelity growth from baseline. The fidelity observation instrument included 25 items representing six domains: Environment, Lesson Preparation, Assessment, Instruction Utilizing HQIM, Classroom Leader and Management, and Culture and Collaboration. The observer assesses each item not evident, not adopted, installing, installed, refining, or full implementation. While mastery of the EBPs is the long-term goal of all support efforts, the Access for All initiative set the goal of increasing the number of teachers who had the majority of items installed within their instruction (regular and consistent implementation). Through the spring, 70% of teachers had 70% of items at the installed level or better.  
  
The Environment domain average score for K-8 English Language Arts teachers increased 50% from fall to spring with 84% of the elements of the classroom environment practice or strategy observed during the spring. The Lesson Preparation domain average score for K-8 English Language Arts teachers increased 60% from fall to spring with 79% of the elements of the classroom lesson preparation practice or strategy observed during the spring. The Assessment domain average score for K-8 English Language Arts teachers increased 82% from fall to spring with 72% of the elements of the assessment practice or strategy observed during the spring. The Instruction Utilizing HQIM domain average score for K-8 English Language Arts teachers increased 75% from fall to spring with 78% of the elements of the HQIM practice or strategy observed during the spring. The Classroom Leader and Management domain average score for K-8 English Language Arts teachers increased 73% from fall to spring with 73% of the elements of the leadership practice or strategy observed during the spring. The Culture and Collaboration domain average score for K-8 English Language Arts teachers increased 40% from fall to spring with 77% of the elements of the culture and collaboration practice or strategy observed during the spring.  
  
The Access for All initiative had eight Regional Access Coaches under its employ who worked with teachers through cognitive coaching cycles; teachers from preschool to grade 12 were eligible for coaching. In the winter/spring of 2022, 178 coaching visits occurred. A coach may see multiple teachers within a single school or may visit teachers in multiple schools during a coaching day. The most frequent coaching cycle components engaged during these coaching sessions were reflecting conversations (56%), data collection (41%), and planning conversations (33%). Coaches felt the most successful in implementing the conversation pacing, clarifying goals, and building rapport skill components of the cognitive coaching framework during the spring. The two components most chosen by coaches as a continuous improvement skill for their coaching were mediative questioning and having awareness of the coachees’ state of mind. Coaches learned conversation “maps” to assist them in Cognitive Coaching with fidelity so that they are authentically coaching the person, not the process. Coaches’ internalization (automaticity) of these maps has grown significantly over the full academic year; when comparing the first two and the last two months, the Planning Map confidence grew from 3.0 to 3.7 and the Reflecting Map confidence grew from 2.7 to 3.9 on a five-point Likert scale.  
  
A random sample of IEPs from high-incidence disability categories in every SSIP district this year was collected and reviewed for quality using the current SSIP IAIEP rubric (developed under previous SSIP phases) between May 1 – September 30, 2022. During the same data window, a random sample of IEPs from common disability categories in every Early Childhood Access for All district were also analyzed.  
  
The Instructional Practice Guide (IPG) is a rubric that an observer completes during a foundational literacy skills lesson walk-through. The observer focuses on interactions between materials, teacher moves, and student engagement through practice. Focus is on observable outcomes such as student work, student application, and student discussions. The primary focus of data collection is to provide feedback that is most beneficial for the teacher. All SSIP districts conduct systematic observations of instruction in a sample of their classrooms to gauge the implementation of EBPs and to inform continuous improvement. SSIP participants collect and share their IPG data regularly with the SSIP Regional Access Coaches to identify successes, address implementation barriers, and to update their District Action Plan items related to classroom instruction.

**Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.**

Access for All Facilitators redelivered content to their districts throughout the Winter of 2022 through a series of a professional development days and two one-hour fall CoPs. Through May 2022, 1,852 educators from 35 districts had completed the professional development participant survey (93% response rate) and 1,276 participants from 31 Districts completed one or both winter/spring CoP surveys (96% response rate).   
  
For the full day winter redelivery training, six main topics were taught through a combination of traditional instruction and adult learning strategies. These learning activities and tasks included literacy sort, topic sort, show your colors, main idea through art, making connections, and essences. Almost two-thirds of the trained educators last winter/spring primarily served students in general education settings; 92% teach K-8 students. 95% of participants agreed or strongly agreed with the statement "I understand better that Literacy has 6 parts, with 3 inputs (viewing, listening, reading) and 3 outputs (showing, speaking, writing).” At least 93% of participants agreed or strongly agreed with the three primary ability gain survey items; with “My ability to provide access to instruction and tasks by assessing and aligning to students’ literacy strengths and needs has increased.” having the highest overall positive sentiment.  
  
The CoPs were set up to offer winter/spring redelivery participants with the opportunity to get a refresher on previously trained content, to dig deeper into these concepts, and to get technical assistance that would aid their continued implementation. Each school has the flexibility to conduct the two CoPs to their own scheduling needs; either hosting two 1-hour sessions or having one larger 2-hour session. Overall educators have seen great benefit from CoPs, agreeing or strongly agreeing that facilitators were knowledgeable and helpful (95%) and that the CoP(s) provided them with the opportunity to apply the fall training concepts (94%). More than 91% of participants agreed or strongly agreed that “Given all trainings and follow-up support, I feel better equipped to support student with disabilities in my role," “The CoP(s) improved my ability to utilize my new learning in my role," and “My teaching practices are improving based on my learning during the Winter training and/or Winter CoP(s).”  
  
A core expectation of each participating district was to have approximately half of their teachers who received the fall trainings observed again in the spring in order to ascertain the growth of SSIP strategy implementation at the school and classroom level. Through May 2022, 289 K-8 English Language Arts teachers from 30 districts had spring observations recorded. The observation instrument includes 25 items across six domains (environment, lesson preparation, assessment, instruction utilizing HQIM, classroom leadership and management, and culture and collaboration) and is completed by a trained district facilitation team member. The observer scores every item on a scale of not evident, not adopted, installing, installed, refining, or full implementation.  
  
During June 6-10, 2022, teams of district educators from 15 districts across Tennessee were trained by TDOE Leaders, AALN Regional Access Coaches, and a national facilitator from The New Teacher Project. The workshop focused on making sure that ALL students in Tennessee learn foundational reading skills through HQIM. District teams were given significant time to explore and use their HQIM as they contextualized proper unit and lesson planning in their district’s schools. Teams identified strengths, weakness, opportunities, and threats for providing access to all students in their reading instruction and left the week with preliminary action plans. At the conclusion of the training, participants were provided with online evaluation surveys to gather their perceptions and suggestions concerning the training. Participants in the training completed 32 surveys. A little over half the participants (62.5%) worked primarily in special education, but a quarter (25.0%) worked in both special education and general education.  
  
The post training survey used a Likert Scale to ascertain the participants’ agreement with the nine statements aligned to the expected training outcomes. Most participants strongly agreed or agreed with all the survey items. The items with which respondents most agreed was “I plan to apply the content of this workshop in my school/district in this school year.” and “I feel better prepared to support all teachers with providing students with disabilities access to our high-quality literacy materials.” (94%). The item with the lowest agreement was “The support that my district team received throughout the week from the Regional Access Coaches, CORE Interventionists, and the TDOE enhanced our learning” (88%).

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

AALN will continue to employ a training and implementation support model focused on all four strategies. Consistent reinforcement of the work through the Learning Network, CoPs, classroom observations, coaching, and refined materials/resources ensure the continued integration of the strategies and EBPs into the classroom. Coaching will be used by SSIP Regional Access Coaches to continue to impact strong educator behavioral change through the effective implementation and access of HQIM. SSIP districts will continue to review, update, and revise their Action Plans through the use of data-driven decision making and continuous improvement cycles. Several districts have set increasing the opportunities for general educations and special education collaborative literacy unit and lesson preparation as the major priority. Other districts are looking to continue to install and then refine their implementation of the IPG walkthroughs protocol. It also anticipated that the SSIP Regional Access Coaches will be invited to facilitate district/school professional development topics related to district Action Plans. IAIEP data will be presented to districts to inform their district professional development activities and teachers will review and revise their IEP writing practices. The department will collect a new sample of IEPs for quality measurement between May-September of 2023.

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

YES

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

ACCESS to High-Quality Core Instruction for All Students was provided during the Summer before the 2021-22 academic year to 45 K-12 SSIP school district facilitation teams. Facilitators then redelivered the content to their districts in a series of PD activities spread across the fall and spring. Throughout the Winter and Spring of 2022 these trainings were provided through a series of a professional development in two full-day trainings and two one-hour CoPs. 95% of participants agreed or strongly agreed that the training helped them better understand that “literacy has six parts, with three inputs (viewing, listening, reading), and three outputs (showing, speaking, writing), and “delivery modes for instruction affect memory, and “covering” material does not lead to retention or understanding.”   
  
The CoPs were set up to offer winter redelivery participants with the opportunity to apply previously trained content, dig deeper into these concepts, and create collaborative discussion to strengthen implementation at the school and classroom level. Overall educators saw great benefit from CoPs, agreeing or strongly agreeing that facilitators were knowledgeable and helpful (95%) and that the CoP(s) provided them with the opportunity to apply the fall training concepts (94%). 93% of participants agreed or strongly agreed that “The CoP(s) improved my ability to utilize my new learning in my role” and “My teaching practices are improving based on my learning during the training and/or CoP(s).”   
  
A core expectation of each participating district was to have approximately half of their teachers, who received the training, observed to ascertain that the content and strategies they were trained in are being used with fidelity in their classrooms. After matching the fall and spring observations for each teacher observed, a total of 295 of the 663 teachers taught English Language Arts in a K-8 classroom. The spring average (66.7) saw an 85% growth rate from the fall observation window; a positive indicator of the role that systemic professional development and coaching had on teacher practices.  
  
The Access for All Initiative had eight Regional Access Coaches under its employ who work with teachers through cognitive coaching cycles; teachers from preschool to grade 12 are eligible for coaching although only K-12 teachers will be included in this report. From August 1, 2021 through May 25, 2022, 451 coaching sessions have occurred, more than with 250 K-12 teachers. A coach may see multiple teachers within a single school or may visit teachers in multiple schools during a coaching day. 95% of coachees felt that the coaching conversation supported their thought process to plan ahead or reflect. The post-coaching participant survey included a space for optional feedback. The responses were overwhelmingly positive and included terms of gratitude, validation, and cooperative activity. In addition to the K-12 SSIP work, the Early Childhood 3.0 cohort targets the need for appropriately less restrictive placements for preschool-age students, as we know that this trajectory begins in preschool and impacts student access to grade level standards and, ultimately, academic proficiency.   
  
The AALN Summer Workshop was provided before the 2022-23 academic year to 15 SSIP school districts’ central office and school administrators. The participants were trained by TDOE Leaders, AALN Regional Access Coaches, and a national facilitator from The New Teacher Project. The workshop focused on making sure that ALL students in Tennessee learn foundational reading skills through HQIM. District teams were given significant time to explore and use their HQIM as they contextualized proper unit and lesson planning in their district’s schools. Teams identified strengths, weaknesses, opportunities, and threats for providing access to all students in their reading instruction and left the week with preliminary action plans. 94% of participants agreed or strongly agreed that their district team (who attended the workshop) was better prepared to voice the needs of students with disabilities in their district.  
  
The monthly Learning Networks this fall were facilitated by the Regional Access Coaches to give district leaders the opportunity to build community while they learn, discuss, and collaborate on HQIM, tools, and content provided by The New Teacher Project. 91% of respondents felt empowered to be active participants during the Learning Network and found the facilitators knowledgeable and helpful. From before to after the meetings, there was a 34% increase in confidence of participants’ ability to facilitate discussions in their districts regarding the use of the tools discussed.  
The Fall CoP was set up to dig deeper into concepts taught during the Summer Workshop and give opportunities for collaboration between educational leaders on the topics of implementation tools and HQIM lesson preparation. 88% of participants agreed or strongly agreed that the training improved their ability to utilize new learning in their roles and were empowered to be active participants during the CoP. From before to after the meetings, there was a 29% increase in confidence of their ability to facilitate discussions in their districts regarding the use of the tools discussed.  
  
The AALN employs eight Regional Access Coaches, four are assigned to work one-on-one with district leaders twice a month varying the discussions to meet the individual needs of each district, school-level staff member, or administrator on SSIP EBP implementation. The coaches accompanied the districts on IPG walkthroughs, helped facilitate collaboration between special education and general education, and gave individualized training on HQIM, problem-solving, lesson planning, and Unit Preparation. The coaching participation survey included 3 qualitative questions for feedback. The responses overall were very positive with several respondents expressing how beneficial the walk-throughs and planning sessions were for their district.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the Governor’s Advisory Council for the Education of Students with Disabilities (AC) through quarterly meetings, presentations of data, and guided question and answer sessions. The AC met three times during FFY 2021 (July 2021, October 2021, and January 2022) and three times during FFY 2022 (July 2022, October 2022, and January 2023). Stakeholders represented via the AC include individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly AC meetings on the APR and local determinations processes, providing information over the last two FFYs regarding Tennessee’s APR state determination, APR target setting, and new APR local determinations resources available to LEAs. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to the performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.   
  
Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education supervisor study council meetings. At these meetings, data from the APR (including indicator 17 formative milestones and outcomes) and how local determinations are made are shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. At the study council meetings, which typically occur monthly, supervisors are delivered important updates around special education activities and can ask questions or provide feedback on issues they are encountering in their district. Additionally, the department regularly engages representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT), parent training and information centers like Support and Training for Exceptional Parents (TN STEP), and parent advocacy groups such as The ARC Tennessee. For more information on the specific activities and/or strategies used to engage and increase the capacity of diverse groups of parents, please see the “Activities to Improve Outcomes for Children with Disabilities” section below.   
   
Although there were no substantive revisions to FFY 2021 baselines and/or targets, the department made concerted efforts prior to the FFY 2020 APR submission to engage the AC, district special education supervisors, other agencies supporting individuals with disabilities, and parents of SWDs in the target setting process for the FFY 2020-2025 SPP/APR package. Understanding the value and power of these groups’ and other stakeholders’ input, the department used short presentations with accompanying feedback surveys to both disseminate information to and collect feedback from a wide range of respondents. These presentations and links to surveys are available under the “SPP/APR Target Setting Feedback” tab here: https://www.tn.gov/education/families/student-support/special-education/special-education-data-services-reports.html. Once survey results were collected, the data were analyzed and adjustments were made to proposed targets based on stakeholders’ feedback around whether targets were “too challenging,” “not challenging enough,” or “just right.” The department also considered any specific feedback in response to the following prompt: “Please provide any specific feedback you have regarding the proposed targets.” Further, the department collected feedback on whether the data and analyses presented to stakeholders were “too complex,” “not complex enough,” and “appropriate,” as well as “any specific feedback” stakeholders have “regarding the improvement strategies or activities needed to reach the proposed targets. This information will be taken into consideration for future efforts to collect stakeholder feedback. More information about target setting presentation content, methods for soliciting public feedback, and timelines related to the target setting process are included in the “Soliciting Public Input” section of this report.  
  
In addition, the department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP. Various stakeholders have received information on the work through a variety of modes. Written communications and briefs are posted to state websites and communicated through various internal and external newsletters. Partners have made content of the plan available to families and provided resources about the progress implementing the work. Statewide data was also communicated within the SEA, via social media, and on the project’s website. Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. The department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content.

The Access for All Initiative gathered participant feedback at every stage of the content delivery process through surveys that collect facilitators’ knowledge and ability gains, their district’s educators’ knowledge and ability gains through district facilitation, the implementation of activities according to expected training fidelity, and a series of open-ended feedback questions. Surveys collected during this Phase have included winter/spring professional development redelivery days within districts, CoPs, and coaching sessions (both coach and coachee).  
  
The full day redelivery Winter Participant Survey asked for how the training could be improved, and 628 responses were provided last winter/spring. 56% of respondents shared that they liked the training and that no changes were needed. Of the improvements requested, pacing was the most frequent theme (12%) with a desire for the training to be shorter and have more breaks. 4% of responses requested more attention to participant comfort – less crowded spaces, more comfortable chairs, better sound, and food; this was a 7%-point decrease from the fall trainings. 25% participants gave specific feedback regarding activities they disliked, request to expand the audience to other teaching/administrator groups, or additional material to cover in the future. Each district had employed different facilitators and varied redelivery approaches (with many having to revise plans due to weather cancelations of originally scheduled professional development days), therefore state SSIP leadership and the SSIP coaches addressed feedback individually with districts since isolating SSIP-wide improvement strategies was impossible. Also, improvement feedback was shared with districts through their personalized data dashboards.  
  
The Winter/Spring CoP Participant Survey asked for how future CoPs could be improved, and 675 responses were provided last winter/spring. 57% of respondents shared that they liked the training and that no changes were needed. Of the improvements requested, scheduling was the most frequent theme (10%) with a desire for CoPs to be held at different times, different locations whether in-person or virtually, or to be paced differently. Other themes were more varied, of highlight, 6% requested more interactive/hands on activities and 6% wanted content more differentiated and specific to their grade level or curriculum.  
  
Teachers were asked to take the post-coaching participant survey after each coaching session. The survey was aimed at providing key feedback to coaches and SSIP leadership for continuous improvement; it is anonymous and does not ask for any district, school, or classroom identifiers. 86 coaching sessions ended this spring/winter with a completed survey. 98% of coachees felt that the coaching conversation supported their thought process to plan ahead or reflect, and 1% selected “maybe,” which is common as teachers get acclimated to cognitive coaching as it is very different than a consultative model. Teachers primarily spent their coaching session reflecting on something that happened or planning ahead (36-37% each).  
  
The post-coaching participant survey also included a space for optional feedback. The responses were overwhelmingly positive and included terms of gratitude, validation, and cooperative activity. The specific coaching topics, goals, and next steps written about were all varied and provided evidence that coaches tailored the experience to each teacher’s needs and self-directed goals. The majority of participants cited professional growth examples and a few also said they had seen student gains.  
  
Thirty-eight K-12 classroom teachers from 23 districts concluded a full coaching cycle from January through May 2022. The average coaching sessions per cycle was 3.7 visits. About 10% of these cycles concluded prematurely due to the teacher no longer being interested in engaging with the coach any further. When appropriate, the coach and teacher can mutually select to begin a second coaching cycle. The most popular areas for focused improvement during the winter/spring coaching cycles were questioning (39%) , personal set-asides (16%), and internalizing the reflecting map (13%).  
  
After a coaching cycle concludes, coaches also reflect on their hunches about the coachees’ states of mind throughout the coaching cycle. The coaches focus their reflection in five areas: efficacy, craftsmanship, consciousness, interdependence, and flexibility. Some teachers in the fall initially resisted coaching because of time constraints (loss of planning period time) because they were unsure that they needed to grow, or because cognitive coaching was outside of their comfort zone and they needed more time to “buy-in,” but this resistance dissipated in the spring.  
  
The AALN also gathers participant feedback at every stage of the content delivery process through surveys that collect district administrators’ knowledge and ability gains, the implementation of activities according to expected training fidelity, and a series of open-ended feedback questions. These surveys are tailored to each professional development activity and are annually reviewed, and content and surveys are modified at least annually by SSIP leadership based on participant feedback. Surveys collected during this Phase have included the summer workshop, monthly Fall Learning Network sessions, a Fall CoP, and Fall Coaching Survey.  
  
The Summer Workshop Participant Survey received ten responses related to feedback about the content provided. Six of the responses were positive, “great learning” and “I really liked that you all modeled best practice by altering your instructional plans for the last few days in order to meet the needs of your learners.” A few participants offered suggestions for shortening the number of days off the training or presenting content in a different sequence.  
  
The monthly Learning Network Participant Surveys asked for how future Learning Network meetings could be improved and thirty responses were provided. Forty percent of responses were positive. Twenty-seven percent of respondents requested to receive PowerPoint slides, handouts, and other materials before the Learning Network meetings to make it easier to use them during discussion (many preferred to print them out). A few requested more discussion time with other districts while an equal number wanted to not have these breakout sessions.  
  
The Fall CoP Participant Survey asked for how future CoPs could be improved, and eleven responses were provided. Almost half focused on the success of the sessions, stating that they were informative. Three participants felt the sessions should be shortened and four participants requested additional resources, more concrete examples, and strategies districts are using to support teachers in unit planning.  
  
An electronic AALN Coaching Feedback Survey was collected at the end of Fall 2022. Ten participants provided feedback on what way(s) could the Regional Access Coach better support their district. Half of the responses were solely positive. The other half requested more in-person supports from their coach. The AALN Coaching Feedback Survey also included an opportunity to collect district needs for overall implementation during the upcoming quarter. The six responses varied and were specific to district action plans and classroom needs.  
  
In addition, the Access for All initiative and AALN university partner (University of Tennessee) facilitates weekly meetings with all Regional Access Coaches and CORE Interventionists where real-time implementation feedback is provided and shared with the department’s SSIP leaders. The department also hosts a monthly project Leadership Meeting where coaches, key stakeholders, and SSIP evaluators share participant and stakeholder input.

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

The department has continued to engage and solicit feedback from stakeholders during implementation of the SSIP in three Access for All cohorts and the AALN. Various stakeholders have received information on the work, including special education supervisors, educators, administrators, service providers, advocacy groups, other SEA divisions, and the Governor’s Advisory Council for the Education of Students with Disabilities. Information has been shared publicly through a variety of modes, including council/task force meetings and newsletters. In addition, partners have made content available to families and provided resources about the progress implementing the work through the Access for All website. Statewide data was also communicated within the SEA, via social media, and on the project’s website.  
  
Success of the SSIP is contingent upon not just the communication methods outlined above, but also on the availability of feedback loops. At presentations, feedback is gathered verbally from attendees/participants and recorded. In addition, the department analyzes qualitative data and feedback from training attendees who may see challenges or opportunities for improvement relative to the content. SSIP leadership from the TDOE have facilitated discussion and shared feedback of the SSIP implementation and activities as a regular item in the Governor’s Advisory Council for the Education of Students with Disabilities meetings. AC members (comprised of parents of SWDs, individuals with disabilities, educators, and student and parent advocates) and other stakeholders in attendance at these meetings provide feedback through participation in roundtable conversations. These are open meetings which are recorded and available on the department’s website for public viewing.  
  
To ensure that training is resulting in implementation, various data is collected on the quality of IEPs, the fidelity of training, observations focused on training concept implementation, and training and classroom visits by the SSIP Regional Access Coaches.

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

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

The State used the Access for All data dashboards and quarterly reports to consistently monitor stakeholder concerns. The State uses the AALN data reports (produced at the conclusion of each major support activity cycle) to consistently monitor stakeholder concerns.  
  
In addition, stakeholders are provided with a “who to contact” document so they know who to contact for questions/concerns in specific areas, as well as a single email address that any question or concern can be sent to that is checked daily and assigned to the best person to address. Districts have milestone meetings with SSIP Regional Access Coaches twice per month and can contact their additional regional support staff (CORE special education interventionists), the general email address, the project manager, or the CORE interventionist directly with concerns or requests at any time, and they do. The applicable team members followed up with stakeholders through email, phone/zoom calls, and/or in-person. Technical assistance was provided, data reviewed, dashboard features redesigned or added, and data cleaned as concerns were related to data collection, data dashboard functionality, or data accuracy. CORE interventionists, coaches, and other initiative leaders review feedback data with district facilitators and observers through continuous improvement cycles to improve action planning for technical assistance and classroom observations. Technical assistance and coaching sessions are provided to the districts and teachers to strengthen implementation and problem-solve in a truly collaborative manner. The project manager meets weekly with the coaches and CLEE staff, biweekly with the CORE intervention team/lead, and monthly with the full project team, and the CLEE logistics teams meet with the UK evaluation team weekly to raise and solve data issues/needs that arise.  
  
Scheduling was the most frequent improvement theme (12%) shared after the fall CoPs with a desire for CoPs to be held at different times, different locations whether in-person or virtually, or to be paced differently. This theme dropped 2% in the spring. Several participants shared appreciation to their districts for making changes based on their previous feedback, “It was better having shorter sessions” and “This was the best! It was a smaller group than the last.”  
  
While the majority of teachers consistently shared that the Access for All trainings were beneficial, two common themes from the feedback received throughout the year (between 12-15%) centered around a desire for the trainings to not conflict with the planning time that teachers desperately need (“when educators are drowning. We need more time,” “need more time for planning,” and “more time to look at activities for our classroom”) and for the SSIP content to be more directly tied to their day-to-day teaching (“more concrete less theoretical,” “grade specific groups to brainstorm ideas,” and “I would love activities that focused more on the curriculum”). SSIP leadership desired to continue the success of the first three strategies but make changes to the delivery model to be more responsive to participant requests. The shift to the Access for All Network (AALN) increases direct supports for district leadership to aid them in being responsive to teachers’ needs, to increase collaboration between general education and special education, set a Leadership Vision, protect, and increase teachers’ effective collaborative planning time, and using HQIM with integrity for students with disabilities. By continuing to implement the first three strategies, but within HQIM as the primary strategy, the SSIP is directly doing what teachers requested; “more applications that shows how to use these strategies and activities within our curriculum,” “give more clear and different strategies to implement in the classroom for daily lessons,” give us “more time with team members” and our “grade level.”  
  
In the last five months, based on the feedback from their teachers, SSIP coaches have reported that District Leaders are changing building level schedules to ensure regular and consistent grade level/content group lesson and unit preparation, providing more special educators with the schedule flexibility to participate in general education unit/lesson planning, increasing access to HQIM and professional development within special education, and reevaluating current HQIM to remove implementation barriers.

**Additional Implementation Activities**

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

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

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

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

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

## 17 - Required Actions

# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

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

**Name:**

Zachary Stone

**Title:**

Senior Director of Data Reporting

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**Submitted on:**

04/27/23 9:50:08 PM

# Determination Enclosures

## RDA Matrix

**Tennessee**

2023 Part B Results-Driven Accountability Matrix

**Results-Driven Accountability Percentage and Determination[[4]](#footnote-5)**

| **Percentage (%)** | **Determination** |
| --- | --- |
| 68.75% | Needs Assistance |

**Results and Compliance Overall Scoring**

|  | **Total Points Available** | **Points Earned** | **Score (%)** |
| --- | --- | --- | --- |
| **Results** | 24 | 15 | 62.50% |
| **Compliance** | 20 | 15 | 75.00% |

**2023 Part B Results Matrix**

**Reading Assessment Elements**

| **Reading Assessment Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 89% | 1 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 83% | 1 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 25% | 2 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 88% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 23% | 0 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 79% | 0 |

**Math Assessment Elements**

| **Math Assessment Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 89% | 1 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 83% | 1 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 44% | 2 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 85% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 20% | 1 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 84% | 1 |

**Exiting Data Elements**

| **Exiting Data Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of Children with Disabilities who Dropped Out** | 9 | 2 |
| **Percentage of Children with Disabilities who Graduated with a Regular High School Diploma\*\*** | 76 | 1 |

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

**2023 Part B Compliance Matrix**

| **Part B Compliance Indicator[[5]](#footnote-6)** | **Performance (%)** | **Full Correction of Findings of Noncompliance Identified in FFY 2020** | **Score** |
| --- | --- | --- | --- |
| **Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.** | 100.00% | YES | 0 |
| **Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.** | 0.00% | N/A | 2 |
| **Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.** | 5.11% | YES | 2 |
| **Indicator 11: Timely initial evaluation** | 93.02% | NO | 1 |
| **Indicator 12: IEP developed and implemented by third birthday** | 92.55% | YES | 2 |
| **Indicator 13: Secondary transition** | 14.29% | NO | 0 |
| **Timely and Accurate State-Reported Data** | 95.24% |  | 2 |
| **Timely State Complaint Decisions** | 100.00% |  | 2 |
| **Timely Due Process Hearing Decisions** | 100.00% |  | 2 |
| **Longstanding Noncompliance** |  |  | 2 |
| **Specific Conditions** | None |  |  |
| **Uncorrected identified noncompliance** | None |  |  |

## Data Rubric

**Tennessee**

FFY 2021 APR[[6]](#footnote-7)

|  | **Part B Timely and Accurate Data -- SPP/APR Data** |  |
| --- | --- | --- |
| **APR Indicator** | **Valid and Reliable** | **Total** |
| **1** | 1 | 1 |
| **2** | 1 | 1 |
| **3A** | 1 | 1 |
| **3B** | 1 | 1 |
| **3C** | 1 | 1 |
| **3D** | 1 | 1 |
| **4A** | 1 | 1 |
| **4B** | 1 | 1 |
| **5** | 1 | 1 |
| **6** | 1 | 1 |
| **7** | 1 | 1 |
| **8** | 1 | 1 |
| **9** | 1 | 1 |
| **10** | 1 | 1 |
| **11** | 1 | 1 |
| **12** | 1 | 1 |
| **13** | 1 | 1 |
| **14** | 1 | 1 |
| **15** | 1 | 1 |
| **16** | 1 | 1 |
| **17** | 1 | 1 |
|  | **Subtotal** | 21 |
| **APR Score Calculation** | **Timely Submission Points** - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right. | 5 |
|  | **Grand Total** - (Sum of Subtotal and Timely Submission Points) = | 26 |

|  |  | **618 Data[[7]](#footnote-8)** |  |  |
| --- | --- | --- | --- | --- |
| **Table** | **Timely** | **Complete Data** | **Passed Edit Check** | **Total** |
| **Child Count/**  **Ed Envs**  **Due Date: 4/6/22** | 1 | 1 | 1 | 3 |
| **Personnel Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Exiting Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Discipline Due Date: 11/2/22** | 1 | 1 | 0 | 2 |
| **State Assessment Due Date: 12/21/2022** | 1 | 0 | 1 | 2 |
| **Dispute Resolution Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **MOE/CEIS Due Date: 5/4/22** | 1 | 1 | 1 | 3 |
|  |  |  | **Subtotal** | 19 |
| **618 Score Calculation** |  |  | **Grand Total** (Subtotal X 1.23809524) = | 23.52 |

| **Indicator Calculation** |  |
| --- | --- |
| A. APR Grand Total | 26 |
| B. 618 Grand Total | 23.52 |
| C. APR Grand Total (A) + 618 Grand Total (B) = | 49.52 |
| Total N/A Points in APR Data Table Subtracted from Denominator | 0 |
| Total N/A Points in 618 Data Table Subtracted from Denominator | 0.00 |
| **Denominator** | 52.00 |
| D. Subtotal (C divided by Denominator\*) = | 0.9524 |
| E. Indicator Score (Subtotal D x 100) = | 95.24 |

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

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APR and 618 -Timely and Accurate State Reported Data**

**DATE: February 2023 Submission**

**SPP/APR Data**

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

**Part B 618 Data**

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

|  |  |  |
| --- | --- | --- |
| **618 Data Collection** | **EDFacts Files/ EMAPS Survey** | **Due Date** |
| Part B Child Count and Educational Environments | C002 & C089 | 1st Wednesday in April |
| Part B Personnel | C070, C099, C112 | 1st Wednesday in November |
| Part B Exiting | C009 | 1st Wednesday in November |
| Part B Discipline | C005, C006, C007, C088, C143, C144 | 1st Wednesday in November |
| Part B Assessment | C175, C178, C185, C188 | Wednesday in the 3rd week of December (aligned with CSPR data due date) |
| Part B Dispute Resolution | Part B Dispute Resolution Survey in EMAPS | 1st Wednesday in November |
| Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services | Part B MOE Reduction and CEIS Survey in EMAPS | 1st Wednesday in May |

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

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

## Dispute Resolution



## How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP’s IDEA Website.  How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

[https://sites.ed.gov/idea/how-the-department-made-determinations/](https://nam10.safelinks.protection.outlook.com/?url=https%3A%2F%2Fsites.ed.gov%2Fidea%2Fhow-the-department-made-determinations%2F&data=05%7C01%7Cdan.royal%40aemcorp.com%7C56561a053eed4e4dffea08db4cd0ea7f%7C7a41925ef6974f7cbec30470887ac752%7C0%7C0%7C638188232405320922%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=REJfNg%2BRs0Gk73rS2KzO2SIVRCUhHLglGd6vbm9wEwc%3D&reserved=0)

1. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-2)
2. Percentage blurred due to privacy protection. [↑](#footnote-ref-3)
3. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-4)
4. For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part B." [↑](#footnote-ref-5)
5. The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: <https://sites.ed.gov/idea/files/2023_Part-B_SPP-APR_Measurement_Table.pdf> [↑](#footnote-ref-6)
6. In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table. [↑](#footnote-ref-7)
7. In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a ‘0’. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table. [↑](#footnote-ref-8)