PA
Part B

FFY2014
State Performance Plan / Annual Performance Report

Introduction to the State Performance Plan (SPP)/Annual Performance Report (APR)

Attachments

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In order to ensure consistent data across indicators, provide the number of districts in this field and the data will be loaded into the applicable indicator data tables.

674

This data will be prepopulated in indicators B3A, B4A, B4B, B9, and B10.

General Supervision System:

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

School Age Programs (Bureau of Special Education)

In 2014-15, there were approximately 1.7 million students enrolled in Pennsylvania's public schools, with 15.6% of these students receiving special education. The state has 500 school districts and approximately 176 charter schools; these entities serve as the responsible Local Education Agency (LEA) for the provision of a Free Appropriate Public Education (FAPE) to students with disabilities. In accordance with the Individuals with Disabilities Education Act (IDEA) and Chapter 14 of the State Board Regulations, the Pennsylvania Department of Education (PDE) provides general supervision of all public schools, school districts, and other public education agencies within the state to ensure that each student with a disability receives a FAPE and that each family has the benefits of a system of procedural safeguards.

Pennsylvania fulfills its general supervision requirements for comprehensive, effective monitoring and dispute resolution, including timely identification and correction of noncompliance in a number of ways, as described below.

Monitoring

PDE's Bureau of Special Education (BSE) focuses significant personnel and resources on monitoring LEA compliance and outcomes. All systems for monitoring and dispute resolution are web-based, and therefore conducive to cross-system data analysis and tracking of timelines. The BSE monitors all school districts and charter schools on a six-year cycle. County prisons and detention facilities, as well as other facilities where children are placed by a public entity, e.g., residential treatment facilities and private residential rehabilitation institutions, are also monitored on a six-year cycle. State juvenile facilities and state correctional institutions are monitored on a three-year cycle.

In addition to cyclical monitoring, the BSE also conducts focused monitoring. Topical areas for focused monitoring are selected based on data reported in Pennsylvania's State Performance Plan/Annual Performance Report (SPP/APR) and recommendations from the Special Education Advisory Panel (SEAP) and other stakeholder groups. Target monitoring of any LEA may also occur at BSE discretion when information from any source, including complaint or other dispute resolution data, suggests a pattern or systemic concern that warrants review.

In FFY 2014, the BSE conducted on-site cyclical monitoring of 92 school districts, 35 charter schools, 13 correctional facilities, and 10 private residential rehabilitation institutions, partial hospitalization programs and residential treatment facilities. Secondary transition focused monitoring was conducted in eight LEAs. The BSE also conducted several SPP/APR on-site follow-up reviews, which occur when analysis of 618 or other SPP/APR data indicates potential noncompliance. A description of how BSE identifies and corrects noncompliance for specific SPP/APR indicators is included within each of those indicator sections of this report.

When findings of noncompliance are issued to an LEA through these web-based monitoring systems, the LEA is informed of the regulation that is being violated (linked to federal and state regulations) and must develop a Corrective Action Verification Plan (CAVP) that is approved by the BSE. The CAVP is systemically linked to technical assistance resources through the Pennsylvania Training and Technical Assistance Network (PaTTAN) and Intermediate Unit (IU) systems (see description in Technical Assistance Section below). The CAVP requires correction of policies, procedures and practices to ensure systemic correction, and includes specific required corrective action/evidence of change, timelines and resources, and tracking of timelines to closure. The BSE monitors implementation of the CAVP primarily through on-site visits that include review of revised policies and procedures, and correction of practices as evidenced by updated data in a representative sample of student files. All corrective action must be completed within one year of notification of a finding of noncompliance. Because the system is web-based, BSE is able to effectively track progress in closing the CAVP and can capture real-time data about the status of corrective action. The CAVP is monitored until all corrective action has been completed.

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

As reported to OSEP in prior APRs, the BSE has achieved between 99% and 100% compliance for timely correction of noncompliance for the past several years; this high level of performance was also achieved during the FFY 2014 reporting period. Should any LEA fail to correct noncompliance as required, BSE has clearly defined enforcement procedures, as described in the Basic Education Circular titled *Special Education Compliance*.

The BSE's monitoring system is aligned with OSEP's new Results Driven Accountability (RDA) in several ways. Although a major focus of the state's current cyclical monitoring continues to be ensuring compliance with federal and state regulatory requirements, BSE's system also reviews outcome data such as graduation/dropout and participation in statewide assessments for students with disabilities. Since 2010-11, BSE's monitoring has also included an Educational Benefit Review, through which the LEA and BSE determine if students are progressing and deriving benefit from their educational programs. Focused monitoring also incorporates review of both compliance and performance outcomes.

Dispute Resolution

The IDEA requires states to establish systems for state complaints, mediation, resolution processes, and due process complaints. Pennsylvania fulfills its general supervision requirements for these systems as described below. Data documenting the state's compliance with these requirements are collected by the state and reported annually to OSEP.

State Complaints

The BSE has effective procedures for investigating and resolving complaints filed under the IDEA and

corresponding federal and state law and regulations. It is the responsibility of the BSE to resolve all complaints that meet the requirements of 34 CFR §300.153 and are filed with the BSE in accordance with these requirements. In the event that noncompliance is determined through a complaint investigation, the BSE monitors to ensure correction, including provision of technical assistance where needed. The BSE ensures correction of systemic and student specific noncompliance identified through the complaint system.

Mediation

The IDEA requires each state to offer mediation services to parents and educational agencies. The Office for Dispute Resolution (ODR) contracts with highly trained, independent mediators to provide mediation services. In Pennsylvania, the vast majority of mediations result in agreements between the parties.

Due Process Complaints

The IDEA also requires that states have effective systems for managing due process complaints. The ODR uses a cadre of highly trained, independent hearing officers to conduct hearings in accordance with federal requirements. In Pennsylvania, greater than 90% of due process complaints settle prior to full adjudication.

Pennsylvania has procedures in place to review, identify and correct child-specific noncompliance identified in a hearing officer's decision, as well as correction of any policies, procedures and practices that may affect other students with disabilities within the LEA.

Resolution Process

IDEA 2004 introduced the resolution meeting process as an additional opportunity for parties to resolve disputes. The purpose of the resolution meeting is for the parent to discuss a due process complaint and the facts that form the basis of the complaint so that the LEA has an opportunity to resolve the dispute. Strict timelines apply to the process. The ODR oversees timely implementation of the resolution meeting process. Any compliance concerns related to the resolution process are addressed by the BSE.

Additional Dispute Resolution Options

While not required by federal regulations, the ODR provides additional resources and systems for parents and LEAs to resolve educational disputes involving students with disabilities. The ODR Stakeholder Council brings together representatives from a broad array of interested parties to provide input and recommendations regarding the special education dispute resolution system.

The Hearing Officer Settlement Conference (formerly the Evaluative Conciliation Conference), is the newest service offered by ODR. Due process hearings are an important procedural safeguard for parents; however, most special education disputes settle without the need for a fully-adjudicated due process hearing. Many of these cases benefit from the assistance of someone knowledgeable and impartial to offer an informed opinion toward reaching agreement. This is the basic concept of the Hearing Officer Settlement Conference. Beginning in 2015-16, in addition to the presiding hearing officer, the ODR will assign a Settlement Conference Hearing Officer to every due process case.

The Special Education ConsultLine is a toll-free information helpline for parents and advocates who have questions or concerns about special education for school-age children. ConsultLine is staffed by specialists that provide information about special education and regulatory requirements. ConsultLine specialists may be reached by voice or text telephone devices for the deaf (TTY). Interpreter services are available for non-English speaking callers. In FFY 2014, ConsultLine provided service to over 3,000 constituents.

ConsultLine's Call Resolution Process (CRP) is an effective dispute resolution tool for compliance-related concerns. During CRP, the call specialist acts as a conduit of information between the parent and the school; the specialist does not serve as an advocate, decision-maker, mediator, or compliance adviser.

IEP Facilitation has been offered by ODR for more than a decade, long before most states developed such a program. Facilitation services are available to parents and educators when developing an IEP. Because facilitation is a voluntary process, both the parent and LEA must agree to the presence of a facilitator.

Pennsylvania's recognition as an "exemplar state" by OSEP and the Center for Appropriate Dispute Resolution in Special Education (CADRE) is an acknowledgement of the array of quality dispute resolution services offered by ODR.

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

Pennsylvania's oversight and general supervision of local programs occurs on an on-going basis. Each preschool early intervention program participates in a verification visit every four years. There are seven areas reviewed during the verification visit that cover the components of the early intervention program. In each of the seven areas, there are a number of required indicators that address compliance, program management, and results items that focus on improving outcomes for children and families. Verification visits include the following activities: data reviews, review of policies, individual child record reviews and observations of service delivery. Verification teams are utilized during these on-site visits and include state Bureau of Early Intervention Services (BEIS) staff, Early Intervention Technical Assistance (EITA) staff, and peer reviewers. The utilization of verification teams allows BEIS to increase or decrease the number of staff conducting verification visits based on the performance level of the local early intervention program and contributes to inter-rater reliability. Following the verification visits, local programs develop quality enhancement plans that focus on the correction of noncompliance, as well as activities to enhance program quality to improve outcomes for children and families. BEIS staff continues to validate that all areas of noncompliance that are identified during the verification visit and self-verification process are corrected within a year.

During the years a verification visit does not take place, local program participate in a self-verification process. The self-verification process includes: the analysis of local data, updates on program management activities, updates on result goals and targets, and updates on activities to maintain program compliance. Following the results of the self-verification process, local programs update their quality enhancements plans to reflect new activities needed to address compliance issues and enhancements to program quality initiatives. BEIS staff continues to validate that all areas of noncompliance that are identified during the verification visit and self-verification process are corrected within a year.

The results of both the verification visit and the self-verification process are used to assist BEIS in making local program determinations that are issued on a annual basis. The verification process is also designed to provide differentiated levels of support to local programs depending on their determinations. This allows the BEIS to use resources in a more effective and efficient manner and have the greatest impact on program practices.

Additional on-site visits from BEIS staff may occur at the discretion of BEIS staff if during the verification cycle there is a significant decrease in program performance or individual or systematic concerns arise.

Pennsylvania also uses a comprehensive data management system that enables the review of individual child data as well as statewide data. The data management system supports referral information, service coordination activities, planning information, financial management, quality measures and other reporting needs for the BEIS. This information system generates documents (Evaluation and Plan Documents) and the information contained in these documents is used to create reports to manage the program. Rigorous analysis of the data by staff on a monthly, quarterly and annual basis allows BEIS to ensure data driven decision making for quality improvement.

Pennsylvania ensures that a complaint management process is implemented. BEIS staff reviews data from complaint investigations, mediations and due process hearings to improve the EI system. Trends are

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

In addition, each preschool early intervention program is assigned a BEIS advisor. Each BEIS advisor serves as a primary contact to each preschool early intervention program and is responsible for addressing budget issues, compliance issues, complaint issues, policy and procedural requirements and overall program performance. As a result of this involvement with local programs, each BEIS advisor has on-going contact with each of his/her local programs. These contacts occur throughout the year during verification visits, validation visits, training and technical assistance visits, complaint investigations, biannual leadership meetings and monthly local regional meetings. This attention to local programs: 1) allows all BEIS staff, advisors and statewide management staff to be aware of program concerns and issues; 2) provides BEIS with the ability to fulfill requirements for a comprehensive and effective general supervision system that identifies and addresses issues of noncompliance; 3) ensures the correction of noncompliance within one year; and 4) allows for the implementation of improvement strategies and enforcement strategies in a timely manner.

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Technical Assistance System:

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

School Age Programs (Bureau of Special Education)

The PaTTAN is designed to support the efforts and initiatives of the PDE and BSE, and build capacity of IUs and LEAs to serve students receiving special education services. PaTTAN provides a continuum of high quality technical assistance designed to help LEAs improve student outcomes. PaTTAN provides support to schools, parents, educators, students and administrators via multiple statewide initiatives. There are three PaTTAN locations, one each in the eastern (PaTTAN-King of Prussia), central (PaTTAN-Harrisburg), and western (PaTTAN-Pittsburgh) areas of the state.

The majority of technical assistance provided is tied directly to federal regulatory requirements. In addition to the three PaTTAN offices, the BSE also funds five full-time equivalent Training and Consultation (TaCs) positions within each of the state's 29 IUs. The roles of the PaTTAN and IU TaCs fulfill consultation and technical assistance federal requirements. In addition, because Pennsylvania has established regional PaTTAN offices, training and technical assistance is localized and highly customized through ongoing collaboration between PaTTAN and IU consultants and LEAs. This model helps the PDE positively influence the quality of technical assistance services and professional development provided for each LEA, and ensures that processes are in place to systematically collect outcome data, consistent with state and federal reporting requirements.

The role of the PaTTAN consultants and the IU TaCs is based on collaboration, since IU TaCs are the first resource available to LEAs. If an LEA is in need of technical assistance, it first contacts the local IU for support. The system is designed to ensure that IU and PaTTAN consultants will "pool" their expertise in order to meet the needs of LEAs. In some instances, the PaTTAN staff will work directly with the LEA if it is determined this is the most effective and efficient way to assist a given school.

Under IDEA, there are two major components that the BSE relies on PaTTAN offices to provide information and resources around technical assistance. The first component is the IDEA grant application. The federal government has identified priority areas for professional development and federal reporting, including

secondary transition, low incidence disabilities, assistive technology, literacy, statewide assessments, Multi-Tiered Systems of Support and behavior. BSE reports annually to the federal government indicating the resources that will be allocated for each of these initiatives. PaTTAN assists with data collection and outcome analyses associated with each initiative and in partnership with IUs as per grant requirements.

The second component is support for SPP/APR indicators, including the State Systemic Improvement Plan (SSIP). PaTTAN and IU consultants are responsible for providing documentation of training and technical assistance activities in order to determine the impact that services are having on outcomes for students with disabilities. PaTTAN consultants are also responsible for the SSIP on-site technical assistance with participating learning sites. This includes providing support with the coherent improvement strategies identified with stakeholders and the National Dropout Prevention Center for Students with Disabilities.

The PaTTAN offices and IU TaCs also work collaboratively in other activities, such as providing technical assistance and professional development needed by LEAs as the result of state monitoring. If LEAs are found to be out of compliance, or in need of plans to improve outcomes, consultants work together to assist the LEA with customized support. LEAs may also contact PDE directly with training and technical assistance requests.

The BSE, through Pennsylvania's multi-layered statewide system of training and technical assistance, has demonstrated a consistently positive impact and associated outcomes for students with disabilities. The current technical assistance system has the personnel needed to effectively support the SPP/APR and SSIP. In addition, the system has the advantage of working in collaboration with multiple stakeholders such as the state Special Education Advisory Panel (SEAP), multiple bureaus within the PDE (e.g., Title I, Title III, Corrections, Migrant Education, Career and Technical Education) and other state and national agencies to support effective practices that have resulted in positive outcomes for students with disabilities.

Pennsylvania's Statewide System of Support (PaTTAN and IU TaCs) serves as both: (1) Pennsylvania's Technical Assistance System, and (2) Pennsylvania's Professional Development System. The technical assistance provided by the PaTTAN and IU TaCs is based upon current research and best practice in the field. Data are collected before, during, and after the implementation and delivery of technical assistance to ensure that the technical assistance is directly benefiting students with disabilities. The technical assistance provided by Pennsylvania's Statewide System of Support is aligned with the principles of OSEP's RDA.

Each year, statewide training and technical assistance plans associated with each broad initiative are informed by data and outcomes, LEA needs and stakeholder input. Stakeholders include LEAs, IUs, national organizations, Parent Training and Information (PTI) centers, Community Parent Resource Centers (CPRCs), SEAP, parents, students with disabilities and other agencies. Collaboration continues to be one of the most important mechanisms for evaluating the effectiveness and efficiency of technical assistance.

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

- *Educational Consultants*: PaTTAN has professional staff with expertise in every aspect of special education, including autism, behavior, reading, math, speech, school psychology, regulations, Multi-Tiered Systems of Support and Assistive Technology. These staff provide technical assistance in multiple ways, including presentations at statewide conferences, direct TA to LEAs, buildings, classrooms, teams working with students with disabilities and one-on-one guided practice. The consultants also provide the on-site technical assistance to support the SSIP's intended outcome of increasing graduation rates for students with disabilities.

- *Summer Institutes:* Statewide conferences, institutes and forums, are offered each year for all stakeholders, including families, educators, students and others. Examples include: Multi-Tiered Systems of Support Forum, National Autism Conference, Secondary Transition Conference, Special

Education Leadership Summer Academy, PA Deaf-Blind Project Family Learning Conference, Summer Academy for Students with Vision Impairments and Blindness and the Low Incidence Institute.

- *Onsite Guided Practice Technical Assistance:* On-site implementation support that includes intensive coaching and mentoring is routinely included as part of technical assistance. Data is collected before, during and after the technical assistance to ensure improved students outcomes. Additional information about on-site guided practice for the SSIP is presented in detail in the Indicator 17 section of this report.

- *Collaboration with other agencies and Institutions of Higher Education (IHE):* Pennsylvania's Statewide System of Support works in collaboration with agencies and multiple IHEs to ensure timely delivery of high quality evidence-based technical assistance and supports to LEAs. In addition to helping the system design the technical assistance, agencies and IHE personnel also participate in training opportunities (e.g., Penn State University partnering for the National Autism Conference, research analyses with Lehigh University's Center for Research to Practice).

- *Webinars and face-to-face training sessions:* PaTTAN offers webinars and on-site training and technical assistance to interested stakeholders. Webinars are closed-captioned and are posted on the PaTTAN website for later viewing.

- *Federal and state regulations:* PaTTAN offers multiple technical assistance opportunities throughout the year to support the implementation of federal and state regulations and special education procedural safeguards.

- *Website resources:* PaTTAN maintains a robust website (www.pattan.net) featuring training opportunities, resources, and publications that address relevant topics, and provides access to other educational partners supporting student learning and achievement. The website also features SSIP resources, publications and contact information for LEAs, parents and community agencies.

The following are examples of statewide initiatives that Pennsylvania has in place to ensure timely delivery of high quality, evidence-based technical assistance and support to LEAs:

- The SSIP: Increasing Graduation Rates for Students with Disabilities
- Autism Initiative
- Behavior Initiative
- Blind-Visual Impairment Initiative
- Deaf-Blind Initiative
- Early Intervention Initiative
- Family Engagement Initiative
- Inclusive Practices Initiative
- Intensive Interagency Initiative
- Mathematics Initiative
- Multi-Tiered Systems of Support Initiative

- Paraprofessionals Initiative
- Reading Initiative
- School Psychology Initiative
- Secondary Transition Initiative
- Special Education Leadership Initiative
- Speech and Language Initiative
- Students with Complex Needs Initiative
- Traumatic Brain Injury Initiative

A new initiative, the Dyslexia and Early Intervention Pilot Program, was established pursuant to Act 69 of 2014. The purpose of the pilot is to provide evidence-based early screening and multi-tiered support systems, using evidence-based intervention services for students with potential risk factors for early reading deficiencies and dyslexia, such as low phonemic awareness, low letter and symbol naming, and inability to remember sequences. There are currently eight districts participating in the pilot program. The districts were carefully selected to ensure that they are representative of various size student populations and geographical regions of the state. These districts have committed to supporting full implementation of the initiative for a period of at least three years in addressing screening, intervention, core program, diagnostic assessments, and evaluation procedures.

PaTTAN provides technical assistance to LEAs and support to students with disabilities through its Accessible Instructional Materials and Assistive Device Short-Term Loan programs. PaTTAN offers ongoing technical assistance opportunities for both programs through workshops, guided practice, seminars, statewide conferences, distance learning, video conferences, and online courses. Many of the technical assistance opportunities have accompanying support materials to further explain the concepts addressed in training and to provide “take home” materials for learners.
In a typical year, PaTTAN provides over 1,800 technical assistance/professional development opportunities to over 130,000 individuals and develops over 200 new or revised publications for widespread dissemination.

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

The Early Intervention Technical Assistance system (EITA) provides statewide training and technical assistance on behalf of the Bureau of Early Intervention Services (BEIS), Pennsylvania Departments of Human Services and Education. The primary recipients of EITA training and technical assistance are the local infant/toddler and preschool early intervention programs that provide supports and services to children with developmental disabilities and their families. EITA is part of the Pennsylvania Training and Technical Assistance Network (PaTTAN), which provides training and technical assistance for school age children and their families. EITA provides both statewide and regional training initiatives that are developed through the analysis of statewide data, including program verification visit and self-verification results, state and federal requirements, relevant research, and planning with state department staff. Statewide professional development trainings are provided across the Commonwealth when it is necessary to ensure a consistent message from the BEIS. Family members are always included and welcome participants and trainers in professional development activities. Examples of current statewide training initiatives include literacy, autism, positive behavior supports, inclusion, assistive technology, trainings for shelter staff that work with young children and their families experiencing homelessness, families and parent leadership, and Early Childhood Outcomes (ECO) trainings.

EITA also provides assistance in the development of quality enhancement plans developed annually with each infant/toddler and preschool early intervention program. The quality enhancement plan is based on

findings from verification visits with local programs, self-verifications completed by local programs, BEIS priorities, relevant research, and locally identified needs. The quality enhancement plan is linked to the SPP/APR submitted to the OSEP. Quality enhancement planning is an ongoing process that is the result of conversations, data collection and review, research and clear identification of outcomes. The quality enhancement plan focuses on specific programmatic changes or outcomes, and includes information on how change will be measured. Quality enhancement plans focus on providing technical assistance and building local capacity through repeated contacts with the same persons/programs to assist with program wide change. The plan is a flexible document that is updated as needed.

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Professional Development System:

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

School Age Programs (Bureau of Special Education)

The BSE, through Pennsylvania's Statewide System of Support, has demonstrated a consistently positive impact and associated outcomes for students with disabilities. The system has expertise in RDA, and has the personnel needed to effectively support the SPP/APR, including the SSIP. (For additional information regarding the BSE, the PaTTAN offices and the IU TaCs, as well as how the data collected by PaTTAN and IU TaCs are tied to the BSE and used for federal reporting, please refer to the Technical Assistance section of this report.)

Pennsylvania's Statewide System of Support serves as the state's technical assistance and professional development systems. The professional development for service providers delivered by PaTTAN and IU TaCs is based upon current research and best practice in the field. Each initiative is required to develop a multi-year plan aligned with the principles of OSEP's RDA, and must demonstrate how the professional development activities will equip service providers with the skills needed to effectively provide services to improve results for students with disabilities. Collaboration among the PaTTAN offices, the IU TaCs and stakeholders continues to be one of the most important mechanisms for evaluating the effectiveness and efficiency associated with professional development in Pennsylvania.

This support system is designed to provide a continuum of timely professional development opportunities to LEAs and other service providers. It provides a full array of training and professional development opportunities targeted to improving outcomes for students with disabilities.

Professional development includes, but is not limited to:

- *PA Standards Aligned System (SAS):* SAS is a comprehensive school improvement framework that is comprised of six key elements that, when implemented with fidelity, have shown promise in helping schools improve outcomes for all students, including students with disabilities. Designed as a web-based portal and updated on an ongoing basis, the SAS gathers materials for each of the six elements and centralizes them in one location. The six elements are: Standards, Assessments, Curriculum Frameworks, Instruction, Materials and Resources, and Safe and Supportive Schools. More information about SAS is located at www.pdesas.org.

- *Pennsylvania Deaf-Blind Project:* This project provides targeted professional development to service providers, parents, and educators supporting infants, toddlers, and students with deaf-blindness.

Educational consultants from all three PaTTAN offices and the EITA system provide targeted support to LEA teams. Two family consultants also deliver services and supports to service providers and families of students with deaf-blindness. The goals of the Project are to: 1) increase the knowledge and skills of early intervention providers related to deaf-blindness so that they can implement evidence-based best practices; 2) increase the skills and knowledge of school teams to improve secondary transition outcomes for youth who are deaf-blind; 3) create a multi-tiered system of support for families that provides information and helps network and connect family members; 4) increase the knowledge and skills of paraprofessionals related to deaf-blindness so that they can effectively support the learning of students with deaf-blindness; and 5) create a network of Pennsylvania Deaf-Blind Liaisons to serve as regional contacts for educators supporting children with deaf-blindness.

- *State Professional Development Grant (SPDG) Project MAX:* The goal of this project is to provide access for students with complex support needs to high-quality, standards-aligned and grade level instruction and intervention. Capacity building occurs with interdisciplinary teams and service providers who receive coaching and technical assistance related to evidence-based methodologies, implementation feedback, standards-aligned instruction and assessment practices.

- *The Arc of Pennsylvania, Include Me From the Start:* Include Me From the Start (Include Me) is a program of The Arc of Pennsylvania, designed to promote and expand inclusive practices for students with the most significant disabilities and the schools they attend. The Arc of Pennsylvania, in collaboration with the PDE, BSE, and PaTTAN, is working with student teams and families to provide training and on-site technical assistance to participating students in grades K-12 so they can attend school with the supports they need to be successfully and meaningfully included in general education classrooms. Since 2010, Include Me has provided technical assistance to build inclusive capacity to schools in 96 school districts, and directly supported the inclusion of 763 students. In the 2014-2015 school year, Include Me consultants held approximately 300 trainings and assemblies to promote inclusion and disability awareness for over 10,000 students, school staff, and parents.

- *Pennsylvania Inspired Leadership Program (PIL):* This program ensures that school leaders receive timely and effective support through a multi-year, 4-course program delivered to cohorts of principals and other school leaders. Open to administrators at the building and central office levels, participants engage in professional reading, discussion, activities and projects throughout the year. They are expected to apply what they are learning within their roles and responsibilities. The PIL program includes specific components that address special education requirements.

- *Comprehensive Planning Tools:* Pennsylvania's regulations require a variety of plans, including plans for professional development, technology, and special education. Elementary and Secondary Education Act (ESEA) requirements for school improvement plans add to the mix of required "blueprints." In addition, Pennsylvania has a long history of district-level strategic planning. To facilitate deliberate, systemic approaches to improvement, PDE developed the Comprehensive Planning Tool, an online resource built on solid research, to support the process of identifying needs through root-cause analyses, developing strategies based on evidence-based practices and monitoring implementation efforts. Schools/districts are divided into three phases so that every LEA develops its plans on a manageable cycle, with support from IU staff specially trained in the use of the online tool. IUs also facilitate school improvement planning and review school improvement plans required under ESEA.

- *National Institute for School Leadership (NISL) Training:* For new principals and other administrators, the NISL offers high-quality, research-based professional development programs designed to give principals the critical knowledge and skills they need to become effective instructional leaders and improve student achievement in their schools. Researchers based the training of school principals on

leadership training developed for business, the military, medicine and other fields to create a state-of-the-art executive education program for principals. The teaching materials build on the best learning strategies for adult professional education.

- *Training Opportunities:* PaTTAN provides a full array of professional development and technical assistance targeted to improving student results. This takes many forms in order to meet the varied needs of PaTTAN's constituents. Week-long summer institutes, ongoing professional development series, webinars, on-site assistance and individual student or teacher supports are some of the means by which PaTTAN provides services to schools. In addition to the SSIP on-site training provided by PaTTAN to participating learning sites, presentations and guided discussions are featured at all statewide conferences throughout the year.

- *Federal-State Regulations:* PaTTAN works closely with the BSE in developing the needed professional development and services for Pennsylvania to meet requirements under the IDEA and Chapter 14 of the Pennsylvania School Code. These supports include professional development linked to the SPP/APR indicators, development of compliant special education forms, the annual collection of student data and the monitoring system.

- *Assistive Technology and Accessible Instructional Materials:* PaTTAN maintains a short-term loan library that offers a broad array of assistive technology devices. These devices are borrowed by LEAs and are used to determine the appropriateness of a particular device for an individual student prior to purchasing the equipment. In addition, the PaTTAN Accessible Instructional Materials Center provides large print and Braille text materials to students who are blind or visually impaired. PaTTAN represents the PDE as the Ex-Officio Trustee with responsibility for managing and coordinating federal quota funds with the American Printing House for the Blind (APH) for the purchase of text and educational supplies for students who are legally blind. PaTTAN also maintains an annual census of children from birth through 21 who are legally blind, and provides an annual report of eligible students to the APH.

- *Secondary Transition*. An innovative resource, the "Planning for the Future Checklist," provides youth, young adults, and professionals with secondary transition resources to support a young person's progress toward the attainment of post-secondary goals related to education, employment, and community living. Pennsylvania's Secondary Transition website, sponsored by PDE, BSE and the Pennsylvania Community on Transition, includes a vast array of resources that promote effective transition practices.

- *Website Resources:* PaTTAN's website (www.pattan.net) features training opportunities, resources and publications that address relevant topics and provide access to other educational partners supporting student learning and achievement. The website also features SSIP resources, publications and contact information for LEAs, parents and community agencies.

Ultimately, the focus of PaTTAN's work is on building the capacity of LEAs and services providers to promote effective instructional practices for students with disabilities. In order to do this, PaTTAN provides technical assistance and professional development that is framed by Pennsylvania's Standards Aligned System.

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

Pennsylvania's professional development system through EITA focuses on a model that supports the BEIS in its management of the early intervention system to ensure skilled, highly qualified Early Intervention (EI) staff that results in high quality services. The four core functions that are used to support the BEIS are listed below.

- *Verification Support* - providing support to the BEIS's verification process to ensure high quality EI services:
    - participation in infant toddler and preschool EI verification teams;
    - training and technical assistance support to local programs based on verification needs and quality enhancement plans; and
    - targeted, intensive support to select programs based on the results of the verification process or program management data analysis.
- *Policy Support* - providing assistance to the BEIS in development of policies to ensure high quality EI services and assisting local programs in translating EI policies into practice. This is accomplished through:
    - assistance in developing BEIS policy documents and reports;
    - development of statewide leadership activities; and
    - policy related research and materials development.
- *Support for professional development in EI core competencies* - providing professional development to ensure that all EI staff have the basic competencies needed to provide high quality EI services to children and families. This is accomplished through:
    - statewide and local workshops;
    - online learning modules and webinars; and
    - materials development and dissemination.
- *Professional development support for EI evidence-based practices* – providing professional development activities to EI staff based on innovative evidence-based practices, designed to enhance existing high quality EI services. This is accomplished through:
    - statewide and local training;
    - online learning modules and webinars; and
    - materials development and dissemination.

To support the four core functions of EITA, the following strategies and business practices are utilized:

- build partnerships with state and local EI leadership;
- provide support to families by actively working to build family leaders;
- provide technical assistance that is informed by multiple forms of data;
- use the most current learning technologies to effectively reach our audiences;
- build partnerships with other early intervention and early childhood technical assistance agencies and organizations, such as connections to the school age training and technical assistance network (i.e., PATTAN);
- evaluate both the long and short term impact of our activities;
- provide effective and efficient project management; and
- provide solutions that are responsive to identified needs.

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

Stakeholder Involvement: apply this to all Part B results indicators

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

School Age Programs (Bureau of Special Education)

The BSE has a long history of obtaining broad stakeholder input in developing plans and reports required by the IDEA. The state implemented a comprehensive process to gather stakeholder input on targets for the SPP/APR covering FFY 2013-18. That process was described in Pennsylvania's FFY 2013 Part B SPP/APR. The BSE regularly reviews the state's performance with the Special Education Advisory Panel (SEAP) to determine if revisions to targets are needed.

Due to changes in Pennsylvania's ESEA Flexibility Request, revisions to targets for indicator 3C were required. Pennsylvania's SEAP has been briefed about the alignment of ESEA and SPP/APR assessment targets. SEAP continues to provide input to the BSE regarding targets and improvement activities.

BSE is not proposing changes to targets for the remaining SPP/APR school age results indicators (i.e., 1, 2, 3A, 3B, 4A, 5, 8, 14, 15 and 16) in the current submission.

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

Pennsylvania's EI system has two primary stakeholder groups, one with a birth-5 focus, the State Interagency Coordinating Council (SICC), and one with a 3-21 focus, the SEAP. Using these two groups allows BEIS to gather statewide stakeholder input. The Committee for Stakeholder Engagement (CSE), formerly the Committee for Cohesive Early Intervention (CCEI), is a workgroup of the SICC. It focuses on the review of data that specifically impacts the coordination of the state's birth-5 EI system. BEIS presented its data and infrastructure analysis to the SICC and SEAP, and continues to gather input on targets and improvement activities for the SPP/APR. Membership in the SICC and CSE is composed of parents (as co-chairs), local program administrators, EI service delivery agencies, the Department of Health, legislators, the Children's Health Insurance Program (CHIP), the American Academy of Pediatrics, higher education, and a representative from Pennsylvania's Education for Children and Youth Experiencing Homelessness Program.

The BEIS convenes monthly EI leadership meetings with administrators of local EI programs. In addition, leadership conferences are held twice annually (Policy Forum in spring, leadership conference in fall).

BEIS will continue to meet regularly with all of our stakeholder community to continue this collaboration.

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

Reporting to the Public:

How and where the State reported to the public on the FFY 2013 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 2013 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2013 APR in 2015, is available.

School Age Programs (Bureau of Special Education)

Pennsylvania complies with all federal requirements for reporting to the public. The BSE publishes annual,

online Special Education Data Reports that illustrate the performance of each LEA in meeting SPP/APR targets. Reporting on FFY 2013 LEA performance was completed in accordance with 34 CFR §300.602(b)(1)(i)(A). These reports are located at the following website: http://penndata.hbg.psu.edu.

A complete copy of Pennsylvania's SPP/APR is posted on the PDE's website, http://www.education.state.pa.us, and the PaTTAN website, http://www.pattan.net.

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

Pennsylvania will continue to comply with all federal requirements for the annual reporting to the public. Data from the SPP/APR are available on a statewide level and for each preschool early intervention program. Pennsylvania's updated SPP/APR will be posted to the following websites:

- The Pennsylvania Department of Education Early Intervention OSEP Reporting webpage at http://www.education.pa.gov/Early%20Learning/Early%20Intervention/Pages/default.aspx and the website of the Pennsylvania Training and Technical Assistance Network at www.pattan.net. The websites are the primary sources of statewide information on the early intervention program and are used by the early intervention community to obtain updates and new information.
- An announcement will be made about the availability of the updated SPP/APR on the BUILD list serve, an email listserv that reaches early childhood/early intervention advocates across the state.
- The BEIS, in conjunction with the Pennsylvania State Data Center, developed a web-based dashboard that is used to disseminate updated SPP/APR data on OSEP indicators to the general public. The dashboard currently includes FFY 2005 through FFY 2013 data for each preschool early intervention program and will be updated to include the FFY 2014 data after submission of the SPP/APR, but no later than 120 days from submission of the SPP/APR. Information can be found at http://penndata.hbg.psu.edu/Preschool_EI_Program/index.aspx .

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 1: Graduation

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with IEPs graduating from high school with a regular diploma. (20 U.S.C. 1416 (a)(3)(A))

Historical Data

Baseline Data: 2011

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			92.65%	58.00%	88.00%	80.00%	82.50%	82.50%	85.00%	0%
Data		91.79%	84.48%	86.52%	87.27%	84.30%	86.10%	71.02%	70.18%	74.98%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥	75.98%	0%	0%	0%	0%

Key:

Explanation of Changes

For FFY 2014, BSE has entered the calculated target. Please refer to the attachment for this indicator.

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Pennsylvania's SEAP has been briefed about the federal requirement to align ESEA and SPP/APR graduation data and targets. PDE establishes graduation targets, while SEAP continues to provide input to the BSE regarding improvement activities.

Explanation of FFY 2015 - FFY 2018 target entries: PDE's ESEA four-year adjusted cohort graduation goal for these years is *NOT* 0% as displayed above. Please refer to the attachment for this indicator for the selected targets.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	12/2/2015	Number of youth with IEPs graduating with a regular diploma	14,527	
SY 2013-14 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	12/2/2015	Number of youth with IEPs eligible to graduate	20,439	null

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec C150; Data group 695)	12/2/2015	2012-13 Regulatory four-year adjusted-cohort graduation rate table	71.07%	Calculate

FFY 2014 SPP/APR Data

Number of youth with IEPs in the current year's adjusted cohort graduating with a regular diploma	Number of youth with IEPs in the current year's adjusted cohort eligible to graduate	FFY 2013 Data	FFY 2014 Target	FFY 2014 Data
14,527	20,439	74.98%	75.98%	71.07%

Explanation of Slippage

Slippage of 3.91% was observed from FFY 2013 to FFY 2014 reporting. Although slippage did occur, the current year's performance exceeds the FFY 2011 and FFY 2012 reported performance.

Since the 4-year cohort graduation rate for 2013-14 was 3.91% lower than the previous year, additional analyses were conducted to gather insight. There were 3,298 fewer students in the 2013-14 cohort than there were in the 2012-13 cohort. While a large number of LEAs improved their 4-year cohort graduation rate, 10 school districts with large populations of students with disabilities eligible to graduate accounted for approximately 18% fewer graduates. A review of preliminary 4-year cohort graduation data for 2014-15, along with previous years' performance, confirms that the rate of 74.98% observed for 2012-13 was atypical.

Contrasting this slippage in the 4-year cohort graduation rate, Pennsylvania observed a substantial improvement in its 5- and 6-year cohort rates, as shown in Table 1.1. This demonstrates that students with disabilities are exercising their right to remain in school and earn their diplomas.

Table 1.1

5-Year and 6-Year Cohort Graduation Rates for Students with Disabilities, 2011-12 through 2013-14		
Year	*5-Year*	*6-Year*
2011-12	72.6%	NA
2012-13	72.2%	72.7%

2013-14	80.2%	81.0%

Although Pennsylvania's graduation rate for students with disabilities compares favorably at the national level, the state is focusing its State Systemic Improvement Plan (SSIP) to increase performance in this area. Implementation of SSIP improvement activities began in the 2015-16 school year. Refer to Indicator 17 for targets and anticipated outcomes of these efforts.

Graduation Conditions Field

Provide the four-year graduation cohort rate. The four-year graduation rate follows a cohort, or a group of students, who begin as first-time 9th graders in a particular school year and who graduate with a regular high school diploma in four years or less. An extended-year graduation rate follows the same cohort of students for an additional year or years. The cohort is "adjusted" by adding any students transferring into the cohort and by subtracting any students who transfer out, emigrate to another country, or die during the years covered by the rate.

Under 34 C.F.R. §200.19(b)(1)(iv), a "regular high school diploma" means the standard high school diploma awarded to students in a State that is fully aligned with the State's academic content standards and does not include a GED credential, certificate of attendance, or any alternative award. The term "regular high school diploma" also includes a "higher diploma" that is awarded to students who complete requirements above and beyond what is required for a regular diploma.

In 2013, Pennsylvania's State Board of Education approved new academic standards and revised high school graduation requirements, as set forth in Title 22, Chapter 4 Regulations. The regulations require that each school district, charter school, cyber charter school and area vocational-technical school (AVTS) (if the AVTS graduates students) adopt and implement requirements for high school graduation that, at a minimum, include course completion and grades. These regulations are applicable to all students and include an extensive multi-year implementation schedule.

The state's assessment system includes the PSSA (grades 3-8), the Keystone Exams, which are state developed end-of-course assessments (high school), and the Pennsylvania Alternate System of Assessment, or PASA, (for students with significant cognitive disabilities). The PDE has also developed a project based assessment (PBA) system for students who are unable to demonstrate proficiency on a Keystone Exam. All students, including students with disabilities, must take the Keystone Exams no later than grade 11 (unless parentally excused due to religious conflict, or participating in the PASA). The requirements for the Keystone Exams and PBA are identical for students with disabilities and students without disabilities. However, a student with a disability can take the PBA after taking the Keystone Exams only once, if determined appropriate by their IEP team, while a general education student must attempt the Keystone Exams at least twice before taking the PBA.

Pennsylvania has no alternate high school diploma for students with disabilities. All students graduating receive a regular high school diploma.

Actions required in FFY 2013 response

None

OSEP Response

The State revised its targets for FFY2014 to FFY 2018 for this indicator (in an attachment to this indicator), and OSEP accepts those targets.

Required Actions

Indicator 2: Drop Out

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with IEPs dropping out of high school. (20 U.S.C. 1416 (a)(3)(A))

Historical Data

Baseline Data: 2006

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≤			6.65%	12.75%	11.33%	9.91%	8.50%	8.50%	8.50%	10.97%
Data		7.36%	14.17%	12.16%	11.13%	11.10%	10.50%	10.90%	12.24%	10.97%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≤	10.97%	10.97%	10.97%	10.97%	9.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Exiting Data Groups (EDFacts file spec C009; Data Group 85)	6/4/2015	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	17,829	null
SY 2013-14 Exiting Data Groups (EDFacts file spec C009; Data Group 85)	6/4/2015	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (b)	48	null
SY 2013-14 Exiting Data Groups (EDFacts file spec C009; Data Group 85)	6/4/2015	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (c)	269	null
Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (d)	6/4/2015	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (d)	2,537	null
SY 2013-14 Exiting Data Groups (EDFacts file spec C009; Data Group 85)	6/4/2015	Number of youth with IEPs (ages 14-21) who exited special education as a result of death (e)	58	null

FFY 2014 SPP/APR Data

Number of youth with IEPs who exited special education due to dropping out	Total number of high school students with IEPs	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
2,537	20,741	10.97%	10.97%	12.23%

Explanation of Slippage

Slippage of 1.26% was observed from FFY 2013 to FFY 2014 reporting. While this slippage did occur, the current year's performance approximates the state's FFY 2012 performance on this indicator, and remains substantially improved over baseline.

To seek root causes, exploratory analyses of data for LEAs with a minimum n size of 10 students eligible to graduate revealed the following:

- while 51 of 461 LEAs reported improvement in dropout rates of greater than 10% from 2012-13 to 2013-14, 54 LEAs reported increases in dropout rates of greater than 10%;
- four LEAs reported increases in dropout rates of greater than 20%;
- one large school district accounted for an amount equal to 79% of the overall slippage, and
- one cyber charter school accounted for an amount equal to 25% of the overall slippage.

Provide additional information about this indicator (optional)

OSEP's Indicator Measurement Table requires a narrative description of what constitutes dropping out in the state:

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

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 3A: Districts Meeting AYP/AMO for Disability Subgroup

Monitoring Priority: FAPE in the LRE

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

A. **Percent of the districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP/AMO targets for the disability subgroup.**
B. **Participation rate for children with IEPs.**
C. **Proficiency rate for children with IEPs against grade level, modified and alternate academic achievement standards.**

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

Historical Data

Baseline Data: 2012

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥										43.70%
Data									38.60%	30.37%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥	48.80%	53.90%	59.00%	64.10%	69.20%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2014 SPP/APR Data

Does your State have an ESEA Flexibility Waiver of determining AYP?

Yes No

Are you reporting AYP or AMO?

AYP AMO

Number of districts in the State	Number of districts that met the minimum "n" size	Number of districts that meet the minimum "n" size AND met AMO	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
674	null	null	30.37%	48.80%	

Actions required in FFY 2013 response

None

OSEP Response

Indicator 3A is not applicable for FFY 2014.

Required Actions

Indicator 3B: Participation for Students with IEPs

Monitoring Priority: FAPE in the LRE

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

A. **Percent of the districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP/AMO targets for the disability subgroup.**
B. **Participation rate for children with IEPs.**
C. **Proficiency rate for children with IEPs against grade level, modified and alternate academic achievement standards.**

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

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Reading	A Overall	2005	Target ≥			95.25%	95.50%	95.70%	95.85%	96.00%	96.10%	96.20%	95.00%
			Data		97.40%	97.30%	91.70%	98.30%	98.60%	98.60%	98.40%	98.00%	97.62%
Math	A Overall	2005	Target ≥			95.25%	95.50%	95.70%	95.85%	96.00%	96.10%	96.20%	95.00%
			Data		97.40%	97.60%	91.80%	98.80%	98.50%	98.70%	98.50%	98.20%	97.77%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

	FFY	2014	2015	2016	2017	2018
Reading	A ≥ Overall	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A ≥ Overall	95.00%	95.00%	95.00%	95.00%	95.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Would you like to use the assessment data below to automatically calculate the actual data reported in your FFY 2013 APR by the grade groups you provided on the Reporting Group Selection page? yes

Would you like the disaggregated data to be displayed in your final APR? yes

Data Source: SY 2014-15 Assessment Data Groups - Reading (EDFacts file spec C188; Data Group: 589) **Date:** 3/3/2016

Reading assessment participation data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs	22514	23451	23772	23245	22897	23308	n	n	20976	n	n
b. IEPs in regular assessment with no accommodations	7344	6561	6089	6528	7231	7238			8709		

Reading assessment participation data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
c. IEPs in regular assessment with accommodations	12273	13909	14748	13767	12590	12858			8612		
d. IEPs in alternate assessment against grade-level standards											
e. IEPs in alternate assessment against modified standards											
f. IEPs in alternate assessment against alternate standards	2475	2519	2493	2513	2547	2563			1937		

Data Source: Date:

Math assessment participation data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs	22523	23482	23766	23266	22890	23270	n	n	20987	n	n
b. IEPs in regular assessment with no accommodations	7280	6495	6401	6927	7494	7730			8636		
c. IEPs in regular assessment with accommodations	12404	14067	14495	13396	12373	12362			8819		
d. IEPs in alternate assessment against grade-level standards											
e. IEPs in alternate assessment against modified standards											
f. IEPs in alternate assessment against alternate standards	2481	2514	2492	2512	2551	2562			1932		

FFY 2014 SPP/APR Data: Reading Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A Overall	160,163	155,504	97.62%	95.00%	97.09%

FFY 2014 SPP/APR Data: Math Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A Overall	160,184	155,923	97.77%	95.00%	97.34%

Public Reporting Information

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

Public reports of assessment results conforming to 34 CFR §300.160(f) are located at http://www.eseafedreport.com, and assessment results by accommodation type with the unit of analysis as the state, LEA and the school are located at http://www.portal.state.pa.us/portal/server.pt/community/special_education/7465.

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 3C: Proficiency for Students with IEPs

Monitoring Priority: FAPE in the LRE

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

A. **Percent of the districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP/AMO targets for the disability subgroup.**
B. **Participation rate for children with IEPs.**
C. **Proficiency rate for children with IEPs against grade level, modified and alternate academic achievement standards.**

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

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Reading	A Overall	2014	Target ≥			28.80%	31.80%	63.00%	63.00%	73.00%	81.00%		38.00%
			Data		28.30%	28.50%	31.10%	32.69%	35.30%	42.00%	39.80%	32.70%	33.78%
Math	A Overall	2014	Target ≥			29.20%	32.20%	56.00%	56.00%	67.00%	78.00%		41.00%
			Data		32.40%	33.60%	36.10%	38.86%	45.70%	46.70%	43.60%	37.80%	36.95%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

	FFY	2014	2015	2016	2017	2018
Reading	A ≥ Overall		31.37%	37.61%	43.85%	50.09%
Math	A ≥ Overall		24.03%	30.94%	37.85%	44.76%

Key:

Explanation of Changes

The Every Student Succeeds Act (ESSA), signed into federal law on December 10, 2015, requires states to establish ambitious state-designed long term goals for all students. Under the Act, ESEA Flexibility Requests will be null and void as of August 2016. The targets for Indicator 3C in this SPP/APR were calculated in accordance with Pennsylvania's currently approved ESEA Flexibility Request. The benchmark for closing the achievement gap is that 50% of the gap will be closed over a six-year period from the baseline year. These targets will be revised as the state moves to full implementation of the ESSA. Since baseline has been reset in the approved ESEA Flexibility Request to 2014-15, there is no target displayed for that year.

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Would you like to use the assessment data below to automatically calculate the actual data reported in your FFY 2013 APR by the grade groups you provided on the Reporting Group Selection page? yes

Would you like the disaggregated data to be displayed in your final APR? yes

Data Source: SY 2014-15 Assessment Data Groups - Reading (EDFacts file spec C188; Data Group: 589) **Date:** 3/3/2016

Reading proficiency data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs who received a valid score and a proficiency was assigned	22092	22989	23330	22808	22368	22659	n	n	19258	n	n
b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level	3492	2700	2390	1844	1580	1380			2525		
c. IEPs in regular assessment with accommodations scored at or above proficient against grade level	1865	1816	2192	2089	1695	1709			2283		
d. IEPs in alternate assessment against grade-level standards scored at or above proficient against grade level											
e. IEPs in alternate assessment against modified standards scored at or above proficient against grade level											
f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level	1349	1479	1325	1411	1370	1427			1152		

Data Source: SY 2014-15 Assessment Data Groups - Math (EDFacts file spec C185; Data Group: 588) **Date:** 3/3/2016

Math proficiency data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs who received a valid score and a proficiency was assigned	22165	23076	23388	22835	22418	22654	n	n	19387	n	n
b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2899	2193	1737	1222	750	555			1829		
c. IEPs in regular assessment with accommodations scored at or above proficient against grade level	1580	1476	1175	865	544	441			1645		
d. IEPs in alternate assessment against grade-level standards scored at or above proficient against grade level											
e. IEPs in alternate assessment against modified standards scored at or above proficient against grade level											
f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level	1128	1277	1263	1409	890	945			875		

FFY 2014 SPP/APR Data: Reading Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A Overall	155,504	39,073	33.78%		25.13%

FFY 2014 SPP/APR Data: Math Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A Overall	155,923	26,698	36.95%		17.12%

Public Reporting Information

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

Public reports of assessment results conforming to 34 CFR §300.160(f) are located at http://www.eseafedreport.com, and assessment results by accommodation type with the unit of analysis as the state, LEA and the school are located at http://www.portal.state.pa.us/portal/server.pt/community/special_education/7465.

Provide additional information about this indicator (optional)

Since baseline has been reset in the approved ESEA Flexibility Request to 2014-15, there is no target displayed for this year.

The Pennsylvania System of School Assessment (PSSA) is administered in grades 3 through 8 in English language arts and mathematics. The spring 2015 administration of the assessment marked the first time the test was fully aligned to the new, more rigorous Pennsylvania Core Standards. The PDE has communicated to stakeholders that the 2015 PSSA is fundamentally different from previous assessments and thus year-to-year comparison is inappropriate.

Additional analyses revealed that the decline in performance observed in reading for students with disabilities on the PSSA is not as severe as the decline observed for students without disabilities, and the decline in performance observed in mathematics for students with disabilities is comparable to the decline observed for students without disabilties.

Actions required in FFY 2013 response

None

OSEP Response

The State revised its baseline (using FFY 2014 data) and targets for this indicator, and OSEP accepts those revisions

Required Actions

Indicator 4A: Suspension/Expulsion

Monitoring Priority: FAPE in the LRE

Results indicator: Rates of suspension and expulsion:

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

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

Historical Data

Baseline Data: 2006

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≤										2.42%
Data		0%	5.40%	2.20%	2.20%	2.80%	2.60%	2.80%	2.60%	2.37%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≤	2.42%	2.42%	2.27%	1.97%	1.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2014 SPP/APR Data

Please indicate the type of denominator provided

Number of districts in the State

Number of districts that met the State's minimum n-size

Number of districts that have a significant discrepancy	Number of districts in the State	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
11	674	2.37%	2.42%	1.63%

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

The rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for nondisabled children in the same LEA

State's definition of "significant discrepancy" and methodology

Pennsylvania determined that an LEA had a significant discrepancy by comparing the suspension/expulsion

rates for children with IEPs among LEAs in the state. To establish baseline, Pennsylvania calculated the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs for LEAs within the state, inclusive of all school districts and charter schools. Pennsylvania determined the state's baseline rate to be 0.78%. A school district or charter school is determined to be significantly discrepant if its rate is two times or greater than 0.78%.

Actions required in FFY 2013 response

None

FFY 2013 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2014 using 2013-2014 data)

Description of review

Prior to June 30, 2015, the BSE conducted an on-site review in all 11 LEAs that were identified as having a significant discrepancy. In preparation for the review, each LEA was required to prepare and analyze its suspension data, including an examination of patterns and trends, and policies and procedures for functional behavioral assessment, manifestation determinations, IEPs, procedural safeguards and provision of FAPE to students whose removal constitutes a change of placement.

To determine compliance with requirements of 34 CFR §300.170(b), the BSE reviewed the LEA's policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports and implementation of procedural safeguards to ensure that these policies, procedures and practices comply with IDEA. The BSE reviewed the LEA's self-assessment during an on-site visit. The LEA provided a list to the BSE of all students with disabilities who were suspended during the entire year. The Monitoring Chairperson reviewed a sample of at least 20% of the files of students who were suspended or expelled and considered all data to determine whether the LEA was in compliance with IDEA requirements.

- ○ The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)
- ◉ The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b). If YES, select one of the following:
  - ◉ The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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

    The BSE conducted reviews as described above, and determined that seven LEAs had policies, procedures or practices that contributed to the significant discrepancy and did not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. Therefore, the state issued written findings of noncompliance. The LEAs were required to develop a Corrective Action Verification/Compliance Plan, approved by BSE. The BSE monitored implementation of corrective action through interviews with administrative personnel, analysis of updated suspension data, and student file reviews. The state verified that the LEAs have corrected policies, practices and procedures as well as each individual case of noncompliance, in conformance with OSEP Memorandum 09-02.
  - ○ The State did NOT ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Correction of Findings of Noncompliance Identified in FFY 2013

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	5	0	0

FFY 2013 Findings of Noncompliance Verified as Corrected

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

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

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

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

OSEP Response

Required Actions

Indicator 4B: Suspension/Expulsion

Monitoring Priority: FAPE in the LRE

Compliance indicator: Rates of suspension and expulsion:

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

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

Historical Data

Baseline Data: 2010

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			0%	0%	0%	0%	0%	0%	0%	0%
Data						0%	0%	0%	0%	0.15%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	0%	0%	0%	0%	0%

FFY 2014 SPP/APR Data

Please indicate the type of denominator provided

Number of districts in the State

Number of districts that met the State's minimum n-size

Number of districts that have a significant discrepancy, by race or ethnicity	Number of those districts that have policies, procedures, or practices that contribute to the significant discrepancy and do not comply with requirements	Number of districts in the State	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
16	1	674	0.15%	0%	0.15%

All races and ethnicities were included in the review

State's definition of "significant discrepancy" and methodology

Pennsylvania uses a comparison to the state average as the methodology for identifying LEAs with a significant discrepancy. Using data collected under section 618 of the IDEA (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) for the school year 2013-14, Pennsylvania compared the rates of suspensions/expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the state. Pennsylvania calculated a state level suspension/expulsion rate to set a single "state bar," then calculated an LEA rate for each racial/ethnic group, and next compared each LEA's rate for each racial/ethnic group to the single state bar.

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

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

Actions required in FFY 2013 response

None

FFY 2013 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2014 using 2013-2014 data)

Description of review

Based on the criteria and methodology described, BSE identified 16 LEAs as having a significant discrepancy in rates of suspension and expulsion by race or ethnicity. The BSE conducted on-site reviews in all 16 LEAs prior to June 30, 2015.

In preparation for the on-site review, each LEA completed a Facilitated Self Assessment (FSA), which required the LEA to examine and describe its written policies, procedures and practices for suspension of students with disabilities. The LEAs provided written responses to a series of probes designed to gather information and gain insights from the LEA team.

During the review, the BSE examined the following:

- written policies and procedures for suspension of students with disabilities;
- suspension data for racial/ethnicity categories where discrepancies exist;
- FSA responses regarding building and LEA-wide suspension patterns;
- professional development program, including training focused on opportunities to increase understanding of the ways in which race, culture, ethnicity and language can influence student behavior and disciplinary practices;
- use of data to plan and implement effective behavior support; and
- information from interviews of LEA personnel.

The BSE Monitoring Chairperson also conducted a student file compliance review for a minimum 20% sample of suspended students.

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

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

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

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

Correction of Findings of Noncompliance Identified in FFY 2013

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

FFY 2013 Findings of Noncompliance Verified as Corrected

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

The BSE monitored implementation of corrective action through interviews with administrative personnel, analysis of updated suspension data and student file reviews. The state verified that the LEA has corrected policies, procedures and practices in conformance with regulatory requirements.

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

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

OSEP Response

Required Actions

Indicator 5: Education Environments (children 6-21)

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 6 through 21 served:

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A	2005	Target ≥			43.80%	53.00%	57.00%	61.00%	65.00%	65.00%	65.00%	62.10%
		Data		46.50%	49.70%	53.00%	55.30%	57.80%	61.00%	62.20%	62.10%	62.43%
B	2005	Target ≤			16.00%	11.30%	10.20%	9.10%	8.00%	8.00%	8.00%	8.90%
		Data		14.40%	12.40%	11.10%	10.80%	10.50%	9.60%	9.20%	8.90%	8.93%
C	2005	Target ≤			4.00%	4.00%	3.70%	3.50%	3.30%	3.30%	3.30%	4.60%
		Data		4.40%	4.20%	4.40%	4.37%	4.30%	4.30%	4.50%	5.00%	4.80%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A ≥	62.60%	63.10%	63.60%	64.10%	65.00%
Target B ≤	8.70%	8.50%	8.30%	8.10%	8.00%
Target C ≤	4.60%	4.60%	4.60%	4.60%	4.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	6/4/2015	Total number of children with IEPs aged 6 through 21	265,548	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/2/2015	A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	164,535	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec	7/2/2015	B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	25,188	null

Source	Date	Description	Data	Overwrite Data
C002; Data group 74)				
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/2/2015	c1. Number of children with IEPs aged 6 through 21 in separate schools	11,376	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/2/2015	c2. Number of children with IEPs aged 6 through 21 in residential facilities	1,009	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/2/2015	c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements	480	null

FFY 2014 SPP/APR Data

	Number of children with IEPs aged 6 through 21 served	Total number of children with IEPs aged 6 through 21	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	164,535	265,548	62.43%	62.60%	61.96%
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	25,188	265,548	8.93%	8.70%	9.49%
C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	12,865	265,548	4.80%	4.60%	4.84%

Explanation of B Slippage

Additional analyses revealed that one large school district accounted an amount equal to nearly two-thirds of the 0.56% slippage observed for this indicator. While improvement was observed in many LEAs, minor fluctuations in several districts also contributed to the slippage.

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 6: Preschool Environments

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children aged 3 through 5 with IEPs attending a:

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A	2011	Target ≥									65.19%	62.00%
		Data								64.70%	61.82%	61.71%
B	2011	Target ≤									14.49%	15.00%
		Data								15.00%	15.88%	16.12%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A ≥	62.50%	63.00%	63.50%	64.50%	64.80%
Target B ≤	15.00%	15.00%	15.00%	15.00%	14.70%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	Total number of children with IEPs aged 3 through 5	32,726	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	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	20,316	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	b1. Number of children attending separate special education class	4,756	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	b2. Number of children attending separate school	497	null

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	b3. Number of children attending residential facility	7	null

FFY 2014 SPP/APR Data

	Number of children with IEPs aged 3 through 5 attending	Total number of children with IEPs aged 3 through 5	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	20,316	32,726	61.71%	62.50%	62.08%
B. Separate special education class, separate school or residential facility	5,260	32,726	16.12%	15.00%	16.07%

Please explain the methodology used to calculate the numbers entered above.

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 7: Preschool Outcomes

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))

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A1	2008	Target ≥						70.80%	71.30%	71.30%	71.30%	89.84%
		Data					70.80%	70.09%	77.90%	76.60%	88.80%	89.84%
A2	2008	Target ≥						55.00%	55.50%	55.50%	55.50%	68.02%
		Data					55.00%	54.93%	57.80%	54.10%	65.50%	68.02%
B1	2008	Target ≥						72.90%	73.40%	73.40%	73.40%	91.69%
		Data					72.90%	69.08%	76.70%	76.40%	89.60%	91.69%
B2	2008	Target ≥						47.20%	47.70%	47.70%	47.70%	66.54%
		Data					47.20%	46.55%	48.20%	51.90%	63.20%	66.54%
C1	2008	Target ≥						70.80%	71.30%	71.30%	71.30%	89.48%
		Data					70.80%	69.06%	74.60%	75.60%	88.10%	89.48%
C2	2008	Target ≥						56.80%	57.30%	57.30%	57.30%	70.37%
		Data					56.80%	57.56%	58.00%	57.50%	67.50%	70.37%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A1 ≥	89.84%	89.84%	89.84%	89.84%	90.84%
Target A2 ≥	68.02%	68.02%	68.02%	68.02%	69.02%
Target B1 ≥	91.69%	91.69%	91.69%	91.69%	92.69%
Target B2 ≥	66.54%	66.54%	66.54%	66.54%	67.54%
Target C1 ≥	89.48%	89.48%	89.48%	89.48%	90.48%
Target C2 ≥	70.37%	70.37%	70.37%	70.37%	71.37%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2014 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed	13121.00

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

	Number of Children
a. Preschool children who did not improve functioning	54.00
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1040.00
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3041.00
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	4831.00
e. Preschool children who maintained functioning at a level comparable to same-aged peers	4145.00

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A1. Of those preschool children who entered or exited the preschool 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. (c+d)/(a+b+c+d)	7872.00	8966.00	89.84%	89.84%	87.80%
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. (d+e)/(a+b+c+d+e)	8976.00	13111.00	68.02%	68.02%	68.46%

Explanation of A1 Slippage

Through additional analysis of the data, the slippage can be attributed to four preschool early intervention programs that submitted the lowest percentages of early childhood outcome data based on their number of children exiting the early intervention program in FFY 2014. When these four preschool early intervention programs are removed from the data analysis for indicator 7, Pennsylvania shows progress across all of the early childhood outcomes and meets its FFY 2014 Summary Statement 2 targets for all early childhood outcomes.

Targeted technical assistance is being provided to these programs through our SSIP/SiMR activities to increase data quality. In addition, Pennsylvania continues to monitor data for the four lower performing programs and implement a series of interventions to improve program performance. These interventions and reporting activities include:

- notification in writing to the program administrator of the poor performance concerns;
- monthly review of data by BEIS staff;
- local analysis of data on this indicator to identify specific areas of concern, development of an action plan with data-based targets for correction of the poor performance;
- revision to procedures for monitoring; and
- verification of the implementation of new procedures.

BEIS continues to provide professional development for all local EI programs in the area of early childhood outcomes data quality and evidence-based practices to increase child progress.

BEIS/EITA will continue to provide professional development for all local EI programs on ECOs. BEIS/EITA will also provide professional development on positive early language/literacy and social/emotional practices.

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

	Number of Children
a. Preschool children who did not improve functioning	45.00
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1106.00
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3355.00
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	6047.00
e. Preschool children who maintained functioning at a level comparable to same-aged peers	2563.00

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
B1. Of those preschool children who entered or exited the preschool 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. (c+d)/(a+b+c+d)	9402.00	10553.00	91.69%	91.69%	89.09%
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. (d+e)/(a+b+c+d+e)	8610.00	13116.00	66.54%	66.54%	65.65%

Explanation of B1 Slippage

Through additional analysis of the data, the slippage can be attributed to four preschool early intervention programs that submitted the lowest percentages of early childhood outcome data based on their number of children exiting the early intervention program in FFY 2014. When these four preschool early intervention programs are removed from the data analysis for indicator 7, Pennsylvania shows progress across all of the early childhood outcomes and meets its FFY 2014 Summary Statement 2 targets for all early childhood outcomes.

Targeted technical assistance is being provided to these programs through our SSIP/SiMR activities to increase data quality. In addition, Pennsylvania continues to monitor data for the four lower performing programs and implement a series of interventions to improve program performance. These interventions and reporting activities include:

- notification in writing to the program administrator of the poor performance concerns;
- monthly review of data by BEIS staff;
- local analysis of data on this indicator to identify specific areas of concern, development of an action plan with data-based targets for correction of the poor performance;
- revision to procedures for monitoring; and
- verification of the implementation of new procedures.

BEIS continues to provide professional development for all local EI programs in the area of early childhood outcomes data quality and evidence based practices to increase child progress.

BEIS/EITA will continue to provide professional development for all local EI programs on ECOs. BEIS/EITA will also provide professional development on positive early language/literacy and social/emotional practices.

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children
a. Preschool children who did not improve functioning	61.00
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1029.00

	Number of Children
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2823.00
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	5038.00
e. Preschool children who maintained functioning at a level comparable to same-aged peers	4170.00

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
C1. Of those preschool children who entered or exited the preschool 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. (c+d)/(a+b+c+d)	7861.00	8951.00	89.48%	89.48%	87.82%
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. (d+e)/(a+b+c+d+e)	9208.00	13121.00	70.37%	70.37%	70.18%

Explanation of C1 Slippage

Through additional analysis of the data, the slippage can be attributed to four preschool early intervention programs that submitted the lowest percentages of early childhood outcome data based on their number of children exiting the early intervention program in FFY 2014. When these four preschool early intervention programs are removed from the data analysis for indicator 7, Pennsylvania shows progress across all of the early childhood outcomes and meets its FFY 2014 Summary Statement 2 targets for all early childhood outcomes.

Targeted technical assistance is being provided to these programs through our SSIP/SiMR activities to increase data quality. In addition, Pennsylvania continues to monitor data for the four lower performing programs and implement a series of interventions to improve program performance. These interventions and reporting activities include:

- notification in writing to the program administrator of the poor performance concerns;
- monthly review of data by BEIS staff;
- local analysis of data on this indicator to identify specific areas of concern, development of an action plan with data-based targets for correction of the poor performance;
- revision to procedures for monitoring; and
- verification of the implementation of new procedures.

BEIS continues to provide professional development for all local EI programs in the area of early childhood outcomes data quality and evidence based practices to increase child progress.

BEIS/EITA will continue to provide professional development for all local EI programs on ECOs. BEIS/EITA will also provide professional development on positive early language/literacy and social/emotional practices.

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COSF)? Yes

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 8: Parent involvement

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))

Do you use a separate data collection methodology for preschool children? Yes

Will you be providing the data for preschool children separately? Yes

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Preschool	2008	Target ≥					84.20%	85.20%	86.20%	87.20%	88.20%	86.50%
		Data				83.20%	84.10%	85.90%	87.30%	85.70%	85.90%	86.50%
School Age	2008	Target ≥					34.13%	34.89%	35.65%	35.65%	35.65%	40.34%
		Data				34.00%	34.50%	34.30%	39.30%	39.46%	42.26%	41.51%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Preschool Target ≥	86.50%	87.00%	87.00%	87.50%	88.00%
School-age Target ≥	40.34%	40.84%	40.84%	41.34%	41.34%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2014 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 2013 Data*	FFY 2014 Target*	FFY 2014 Data
Preschool	3599.00	4223.00	86.50%	86.50%	85.22%
School-age	550.00	1419.00	41.51%	40.34%	38.76%

Explanation of Preschool Slippage

BEIS analyzed data to determine whether specific trends could be identified as sources for the decline. No specific trends were identified. Focused technical assistance is being provided to the two programs that have either not made sufficient progress or have regressed in this area.

The verification tool used by BEIS to evaluate programs has been updated to include a stronger focus on two factors: analyzing the family survey data, and participation in the survey as an on-going activity for programs. These factors will be closely monitored as part of BEIS reviews throughout the year.

Explanation of School-age Slippage

This year's performance of 38.76% is a decrease of 2.75% from FFY 2013. Previous years' percentages were: 34.5% for FFY 2008 (baseline), 34.3% for FFY 2009, 39.3% for FFY 2010, 39.5% for FFY 2011, 42.26% for FFY 2012, and 41.51% for FFY 2013. Given that the upper bound of the confidence interval for 2014 was 41.36%, and last year's rate was 41.51%, this year's percentage represents a small, albeit significant, decline from the prior year.

The BSE consulted with its technical assistance provider, Dr. Batya Elbaum, to further evaluate whether specific patterns or trends could be identified as potential sources of explanation for the decline. Various analyses were undertaken, including examination of trends in the single large LEA where annual survey administration occurs, comparison of school district and charter school responses, and whether any dramatic shifts occurred in a group or geographic cluster of LEAs. No trends or patterns were identified.

Pennsylvania is continuing to refine and expand its Family Engagement Initiative to improve performance on this indicator.

Describe how the State has ensured that any response data are valid and reliable, including how the data represent the demographics of the State.

School Age Programs (Bureau of Special Education)

For the current reporting year, the school age National Center for Special Education Accountability Monitoring (NCSEAM) Survey was distributed to 16,353 parents of students with disabilities from 137 LEAs. The overall response rate was approximately 9.1%. Included in this distribution was an over-sampling of parents of Black or African American (not Hispanic) and Hispanic students to compensate for historically lower response rates within these groups.

The representativeness of the school age race/ethnicity categories in the survey results (see Table 8.1) was tested using the +/-3% tolerance level established by the Response Calculator developed by the National Post School Outcomes Center (NPSO). The oversampling again had the desired effect of improving the representativeness of the respondent group, as all racial/ethnic categories fell within these tolerance levels.

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

	Total Respondent Group	*State Race/Ethnicity Population*
Race/Ethnicity	*Percent*	*Percent*

American Indian or Alaskan Native	<1.0	<1.0
Asian	1.8	1.4
Black or African American (not Hispanic)	14.5	17.0
Hispanic or Latino	11.0	10.7
White (not-Hispanic)	69.9	67.1
Native Hawaiian or Other Pacific Islander	<1.0	<1.0
Multiracial	2.7	3.6

Table 8.2 shows the representativeness of school age students whose parents responded to the survey when examined by disability category. Overall, the proportions of the disability categories are relatively close to the proportions observed in the state's December 1 Federal Child Count. Each of the disability categories, with the exceptions of specific learning disabilities and autism, fall within the +/- 3% tolerance level established by the Response Calculator. The proportion of parents of students with specific learning disabilities is 3.5% below the tolerance level, continuing the trend that began in FFY 2013. The proportion of respondents who are parents of students with autism lies 1.8% above the tolerance level, again continuing a trend previously established. Pennsylvania will be consulting with the Pennsylvania State Data Center to address the representativeness of these two disability categories in the FFY 2015 survey.

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

	Total Respondent Group	*State Disability Population*
Disability	*Percent*	*Percent*
Intellectual Disability	9.2	6.6
Hearing Impairment	1.3	1.0
Speech or Language Impairment	13.3	15.4
Visual Impairment	<1.0	<1.0
Emotional Disturbance	8.8	8.5
Orthopedic Impairment	<1.0	<1.0
Other Health Impairment	11.5	13.2
Specific Learning Disability	37.8	43.3
Deaf-Blindness	<1.0	<1.0
Multiple Disabilities	1.8	1.1
Autism	14.7	9.9
Traumatic Brain Injury	<1.0	<1.0

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

Table 8.3 displays the racial/ethnic representation of parents of preschool age children who returned the survey. The representativeness of the preschool race/ethnicity categories in the survey results, using the +/-3% tolerance level established by the Response Calculator indicates that Black or African American families were slightly underrepresented.

In FFY 2015, BEIS will continue to implement a second mailing to obtain representativeness for all population groups, and will identify specific program areas within the state that fall outside the tolerance level for additional targeted mailings. In addition, a stakeholder work group will be developed for the purpose of identifying and supporting local strategies that will increase the response rate of the family survey.

Table 8.3
Respondent Group by Race/Ethnicity for Preschool Children

	Respondent Group	State Race/Ethnicity Population
Race/Ethnicity	Percent	Percent
American Indian or Alaskan Native	<1.0	<1.0
Asian or Pacific Islander	2.74	2.66
Black or African American(not Hispanic)	12.22	15.26
Hispanic or Latino	13.34	11.63
White (Not-Hispanic)	68.12	66.21
Native Hawaiian or Pacific islander	<1.0	<1.0
Multiracial	3.42	4.06

Table 8.4 shows the representativeness of the preschool respondent group when examining by disability category. Using the +/-3% tolerance level established by the Response Calculator, one category was above the +/-3% tolerance level. Within the disability categories, families with a child with a speech or language impairment were slightly overrepresented.

Table 8.4

Respondent Group by Disability for Preschool Children

	Respondent Group	State Disability Population
Disability	Percent	Percent
Intellectual Disability	<1.0	<1.0
Hearing Impairments	<1.0	1.26
Speech or Language Impairments	40.08	36.82
Visual Impairments	<1.0	<1.0
Emotional Disturbance	<1.0	<1.0
Orthopedic Impairments	<1.0	<1.0
Other Health Impairments	1.58	1.87

Specific Learning Disabilities	<1.0	<1.0
Deaf-Blindness	<1.0	<1.0
Multiple Disabilities	1.30	1.41
Autism	9.74	9.80
Traumatic Brain Injury	<1.0	<1.0
Developmental Delay	44.24	46.17

Was sampling used? Yes
Has your previously-approved sampling plan changed? No

Was a collection tool used? Yes
Is it a new or revised collection tool? No

- (●) **Yes, the data accurately represent the demographics of the State**
- ( ) **No, the data does not accurately represent the demographics of the State**

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

School Age Programs (Bureau of Special Education)

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

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

Sampling did not occur in the Early Intervention program.

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 9: Disproportionate Representations

Monitoring Priority: Disproportionate Representations

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			0%	0%	0%	0%	0%	0%	0%	0%
Data		0%	0%	0%	0%	0%	0%	0%	0%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	0%	0%	0%	0%	0%

FFY 2014 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts with disproportionate representation of racial and ethnic groups in special education and related services	Number of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n-size	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
0	0	598	0%	0%	0%

All races and ethnicities were included in the review

Define "disproportionate representation" and describe the method(s) used to calculate disproportionate representation

To complete its analysis for this indicator, Pennsylvania compared data collected for the Report of Children with Disabilities Receiving Special Education under Part B of the IDEA, as amended (Child Count) for all children with disabilities aged 6 through 21 served under IDEA and the most current general enrollment data available from the Pennsylvania Information Management System (PIMS) system.

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

- weighted risk ratio analysis;
- same threshold (single bar) for all racial categories;

- cut point of 3.0 for the upper bound;
- minimum cell size of 40 students with disabilities in racial category; and
- two consecutive years of data indicating disproportionate representation.

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

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

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

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

OSEP Response

Required Actions

Indicator 10: Disproportionate Representations in Specific Disability Categories

Monitoring Priority: Disproportionate Representations

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			0%	0%	0%	0%	0%	0%	0%	0%
Data		0%	0%	0%	0%	0%	0%	0%	0%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	0%	0%	0%	0%	0%

FFY 2014 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n-size	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
2	0	598	0%	0%	0%

☑ **All races and ethnicities were included in the review**

Define "disproportionate representation" and describe the method(s) used to calculate disproportionate representation

To complete its analysis for this indicator, Pennsylvania compared data collected for the Report of Children with Disabilities Receiving Special Education under Part B of the IDEA, as amended (Child Count) for all children with disabilities aged 6 through 21 served under IDEA and the most current general enrollment data available from PIMS.

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

- weighted risk ratio (WRR) analysis,
- same threshold (single bar) for all racial categories,

- cut point of 3.0 for the upper bound,
- minimum cell size of 40 students with disabilities in racial category, and
- two consecutive years of data indicating disproportionate representation.

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

Using the above criteria, the BSE determined that one LEA met the data threshold as having disproportionate representation for students with autism who are White, and one LEA met the data threshold for students with autism in the reporting category of Two or More Races.

To determine whether the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification, BSE conducted timely on-site monitoring in these two LEAs and determined that both LEAs were in compliance with the requirements of 34 CFR §§300.111, 300.201, and 300.301 through 300.311. Therefore, no LEA had disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

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

OSEP Response

Required Actions

Indicator 11: Child Find

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		94.35%	90.00%	93.00%	98.30%	96.50%	95.00%	96.00%	93.00%	94.57%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 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 2013 Data*	FFY 2014 Target*	FFY 2014 Data
29,264	28,693	94.57%	100%	98.05%

Number of children included in (a), but not included in (b) [a-b]	571

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

School Age Programs (Bureau of Special Education)

BSE's review of the FFY 2014 database for indicator 11 confirms that all 346 school age students that did not receive a timely initial evaluation did receive an evaluation, although late. Of the late 346, 82% were completed within 61-90 days, 95% were completed within 120 days. Reasons for delays were primarily attributed to errors in timeline calculations, staffing issues and administrative delays, as well as weather emergencies and scheduling problems with outside agency resources over which the LEA had limited control.

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

Data indicates that the range of delays for the majority of children in preschool programs is between 1-120 days. Of those that were late, 82% were completed within 61-90 days and 91% were completed within 120

days. Reasons for delays were primarily attributed to errors in timeline calculations, staffing issues, administrative delays, as well as weather emergencies and scheduling problems over which the LEA had limited control.

Indicate the evaluation timeline used

- (●) **The State used the 60 day timeframe within which the evaluation must be conducted.**
- ( ) **The State established a timeline within which the evaluation must be conducted.**

What is the State's timeline for initial evaluations?

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

- ( ) **State monitoring**
- (●) **State database that includes data for the entire reporting year**

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

School Age Programs (Bureau of Special Education)

LEAs submit required data for indicator 11 on a cyclical basis aligned with BSE's monitoring cycle (approximately one-sixth of the LEAs in the Commonwealth are monitored each year). Student specific and aggregated data sufficient to address all technical reporting requirements for this indicator are collected. Data were reported as the actual number of days, not an average number of days, for the period of July 1, 2014 through June 30, 2015.

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

For Preschool Early Intervention Programs, Pennsylvania collected data for this indicator through a statewide data collection based on actual number of days, not an average number of days, for the period of July 1, 2014 through June 30, 2015.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
60	52	8	0

FFY 2013 Findings of Noncompliance Verified as Corrected

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

School Age Programs (Bureau of Special Education)

The process for collecting data is explained above. Annually, in July-August, BSE reviews a database in which LEAs report data from the entire year for all students who have had initial evaluations for special education. The database includes mandatory reporting fields to document that for any student where the LEA did not meet required timelines, an initial evaluation was conducted, although late, and an IEP was developed if the student was determined to be eligible for special education. Following BSE review of the database, all LEAs are provided with written notification of their compliance status. LEAs determined to be in noncompliance are informed that they must correct the noncompliance as soon as possible, but not later than one year from the notification. These LEAs are required to do quarterly reporting, through which the LEA provides updated data on all new initial evaluations. When the LEA demonstrates 100% compliance with evaluation timelines for two consecutive quarters, BSE closes corrective action. If an LEA is not demonstrating progress through quarterly reports, BSE conducts on-site reviews to assist in identifying root causes, including required technical assistance. BSE also informs the LEA of pending enforcement actions should the LEA not correct the noncompliance within the one year timeline (from the date of the original notification).

BSE conducted follow-up of all LEAs identified with noncompliance through quarterly reporting and conducted on-site reviews of student files as well as policies and procedures. Eight LEAs did not achieve closure of corrective action within one year of notification. The BSE directly informed these LEAs of pending enforcement actions. BSE advisers continued to examine policies and procedures and student files in each of the LEAs to verify correct implementation of 34 CFR §300.301(c)(1). Three of the eight LEAs achieved closure within 35 additional days, three more achieved closure within 56 additional days, one LEA achieved closure within 102 additional days and the remaining LEA completed corrective action at 178 days.

One LEA had not corrected all noncompliance by the original submission date of this SPP/APR. The BSE initiated Level I enforcement actions against the LEA, in conformance with the Basic Education Circular, Special Education Compliance. The BSE continued to monitor corrective action in this LEA and took additional enforcement actions, as required. As noted above, this LEA has completed corrective action. Therefore, the state has verified that all FFY 2013 findings of noncompliance have been corrected.

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

BEIS conducts annual data reviews from the statewide data management system for all preschool early intervention programs. All child records in the data management system are reviewed to determine the rate of compliance for this indicator for all programs. Any program with a compliance rate less than 100% is issued a written finding of noncompliance. Corrective action is required for the correction of all individual child instances of noncompliance and for the implementation of the specific regulatory requirement.

Compliance with evaluations is also a component of on-site verification reviews and self-verifications. BEIS staff conducts on-site reviews that include data reviews, review of policies, individual child record reviews and observations of service delivery. Preschool early intervention programs are required to submit a Quality Enhancement Plan (QEP), approved by BEIS, to address all areas of noncompliance. The plan's implementation is validated within one year of issuance of the findings report.

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

School Age Programs (Bureau of Special Education)

BSE has verified that each LEA with noncompliance reported in its FFY 2013 APR has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02. This was verified through review of the database and/or onsite review of

student files.

Preschool Early Intervention Programs (Bureau of Early Intervention Services)

A subsequent review of data was completed 6 months after the issuance of the written notification of noncompliance to verify that all individual instances of noncompliance were corrected.

OSEP Response

Because the State reported less than 100% compliance for FFY 2014, the State must report on the status of correction of noncompliance identified in FFY 2014 for this indicator.When reporting on the correction of noncompliance, the State must report, in the FFY 2015 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2014 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 2015 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 2014, although its FFY 2014 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2014.

Required Actions

Indicator 12: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		94.80%	95.10%	95.30%	97.00%	95.00%	95.00%	98.00%	98.00%	98.59%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	6,948
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	474
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	5,932
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.	522
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	2

	Numerator (c)	Denominator (a-b-d-e)	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
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. [c/(a-b-d-e)]x100	5,932	5,950	98.59%	100%	99.70%

Number of children who have been served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e	18

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

The reasons for delays in developing and implementing IEPs for these children included delays in the evaluation process, personnel scheduling issues (illness, vacations, inclement weather, cancellations, missed appointments), staff errors (delay in completing evaluation reports, changes in staff assignments,

incorrectly documenting dates) and delays in transition meetings for children transitioning from Part C. Of the 18 children whose IEPs were not developed by their 3rd birthday, 12 had their IEP developed within 30 days, and five others had their IEPs developed between 31-89 days. As confirmed through data reports, all 18 children had an IEP developed and implemented, although beyond their 3rd birthday.

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

- ○ State monitoring
- ◉ 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.

Pennsylvania collected data for this indicator through a statewide data collection based on actual number of days, not an average number of days, for the period of July 1, 2014 through June 30, 2015.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

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

FFY 2013 Findings of Noncompliance Verified as Corrected

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

BEIS conducts annual data reviews from the statewide data management system for all preschool early intervention programs. All child records in the data management system are reviewed to determine the rate of compliance for this indicator for all programs. Any program with a compliance rate less than 100% is issued a written finding of noncompliance. Corrective action is required for all individual child instances of noncompliance and for the implementation of the specific regulatory requirement.

Compliance with timelines for transition is also a component of on-site verification reviews and self verifications. BEIS staff conducts on-site reviews that include data reviews, review of policies, individual child record reviews and observations of service delivery. Preschool early intervention programs are required to submit a Quality Enhancement Plan (QEP), approved by BEIS, to address all areas of noncompliance. The plan's implementation is validated within one year of issuance of the findings report.

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

A subsequent review of data was completed 6 months after the issuance of the written finding of noncompliance to verify that all individual instances of noncompliance were corrected.

OSEP Response

Because the State reported less than 100% compliance for FFY 2014, the State must report on the status of correction of noncompliance identified in FFY 2014 for this indicator.When reporting on the correction of noncompliance, the State must report, in the FFY 2015 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2014 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 2015 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 2014, although its FFY 2014 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2014.

Required Actions

Indicator 13: Secondary Transition

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 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))

Historical Data

Baseline Data: 2009

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data						76.10%	81.40%	86.60%	83.20%	78.16%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 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 2013 Data*	FFY 2014 Target*	FFY 2014 Data
410	505	78.16%	100%	81.19%

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

- (●) **State monitoring**
- ( ) **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.

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

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
99	99	0	0

FFY 2013 Findings of Noncompliance Verified as Corrected

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

When findings of noncompliance are issued, the LEA is informed of the regulation that is being violated (linked to federal and state regulations) and must develop a CAVP that is approved by the BSE. The CAVP is also linked to technical assistance resources through the PaTTAN and IU systems. The CAVP addresses correction of policies, practices and procedures to ensure systemic correction. CAVPs include required corrective action/evidence of change, timelines and resources required, and tracking of timelines to closure. The BSE monitors implementation of the CAVP primarily through on-site reviews of revised policies and procedures and verification of correction as evidenced by data in a sample of student files. The CAVP is monitored until all corrective action has been completed. All corrective action must be completed within one year of the notification of a finding. Because the system is web-based, BSE is able to track progress in closing the CAVP and can capture real-time status data concerning status in completing corrective action.

BSE has follow-up procedures in place to verify correction of noncompliance. In addition to systemic correction of noncompliance, the BSE reviewed the files of all students whose IEPs were not in compliance with indicator 13 transition requirements in FFY 2013 monitoring, and reviewed the students' updated IEPs until all noncompliance was corrected. The BSE ensured correction of noncompliance systemically and specifically for every individual student whose IEP had noncompliance, unless the student was no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02.

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

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

OSEP Response

Because the State reported less than 100% compliance for FFY 2014, the State must report on the status of correction of noncompliance identified in FFY 2014 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2015 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2014 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 2015 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 2014, although its FFY 2014 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2014.

Required Actions

Indicator 14: Post-School Outcomes

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))

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A	2009	Target ≥							28.10%	28.20%	28.30%	25.00%
		Data						27.99%	31.16%	26.90%	25.00%	24.36%
B	2009	Target ≥							49.10%	49.20%	49.30%	60.00%
		Data						48.90%	63.78%	61.90%	60.00%	59.89%
C	2009	Target ≥							66.00%	66.00%	66.00%	66.70%
		Data						65.84%	73.56%	73.00%	66.70%	64.62%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A ≥	25.70%	26.40%	27.10%	27.80%	28.50%
Target B ≥	60.40%	60.80%	61.00%	62.00%	65.00%
Target C ≥	67.80%	68.80%	69.90%	70.90%	72.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2014 SPP/APR Data

Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	2038.00
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	525.00
2. Number of respondent youth who competitively employed within one year of leaving high school	710.00
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)	168.00
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).	8.00

	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 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A. Enrolled in higher education (1)	525.00	2038.00	24.36%	25.70%	25.76%
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1235.00	2038.00	59.89%	60.40%	60.60%
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)	1411.00	2038.00	64.62%	67.80%	69.23%

Was sampling used? Yes
Has your previously-approved sampling plan changed? No

Plan submitted for approval: No Sampling Plan Submitted No Sampling Plan Submitted

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

The sampling plan for this indicator was approved by OSEP in Pennsylvania's FFY 2005 SPP and is continued for this submission. The present cohort consists of the same set of LEAs on the same schedule as was devised in the original submission. The sampling plan also includes all LEAs that have been established since the original approval. This group of LEAs provides a representative sample of leavers based on LEA size, whether the LEAs are urban, suburban or rural, disability category, race/ethnicity and gender.

The current Part B Indicator Measurement Table requires states to include a description of how the state has ensured that survey data are valid and reliable, including how the data represent the demographics of the state. Pennsylvania uses the NPSO Response Calculator to measure this requirement.

Representativeness of minority leavers in the respondent group has fluctuated from year to year, and while this group is underrepresented in the current survey, its representativeness has improved from FFY 2013, validating the effectiveness of the strategies to address under-representation as described in Pennsylvania's FFY 2013 SPP/APR. Each of the differences of the respondent population from the target leaver population in all other categories of interest falls within the ±3% tolerance level. The response rate of 57.0%, an improvement of 4.7% from the previous year's rate, provides confidence that the results of the survey validly and reliably represent the target leaver population as a whole.

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 15: Resolution Sessions

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))

Historical Data

Baseline Data: 2012

FFY	2004	2005		2006			2007			2008		
Target		-			-	67.00%	50.00%	-	60.00%	50.00%	-	
Data	67.00%			33.00%			52.00%			41.00%		

FFY	2009			2010			2011			2012			
Target	50.00%	-	60.00%	50.00%	-	60.00%	50.00%	-	60.00%	50.00%	-	60.00%	24.00%
Data	70.00%			37.98%			35.03%			27.38%			

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014			2015			2016			2017			2018		
Target	24.00%	-	35.00%	24.00%	-	35.00%	24.00%	-	35.00%	24.00%	-	35.00%	28.00%	-	38.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/5/2015	3.1(a) Number resolution sessions resolved through settlement agreements	167	null
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/5/2015	3.1 Number of resolution sessions	503	null

FFY 2014 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
167	503	33.25%	24.00% - 35.00%	33.20%

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 16: Mediation

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005		2006			2007			2008		
Target		-			-	80.80%	75.00%	-	85.00%	75.00%	-	
Data		79.30%		77.80%			77.00%			77.00%		

FFY	2009			2010			2011			2012			
Target	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%	75.00%
Data	68.40%			76.50%			79.80%			77.78%			

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014			2015			2016			2017			2018		
Target	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%	79.50%	-	89.50%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	2.1.a.i Mediations agreements related to due process complaints	10	null
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	2.1.b.i Mediations agreements not related to due process complaints	135	null
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	2.1 Mediations held	186	null

FFY 2014 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
10	135	186	76.99%	75.00% - 85.00%	77.96%

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 17: State Systemic Improvement Plan

Monitoring Priority: General Supervision

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

Reported Data

Baseline Data:

FFY	2013	2014
Target ≥		
Data		

Key: Gray – Data Prior to Baseline Yellow – Baseline
Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≥				

Key:

Description of Measure

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Overview

Data Analysis

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Children with Disabilities, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., LEA, region, race/ethnicity, gender, disability category, placement, etc.). As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in LEAs to implement, scale up, and sustain the use of evidence-based practices to improve results for children with disabilities. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and initiatives, including special and general education improvement plans and initiatives, and describe the extent that these initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

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

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified result(s) must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified result(s) must be clearly based on the Data and State Infrastructure Analyses and must be a child-level outcome in contrast to a process outcome. The State may select a single result (e.g., increasing the graduation rate for children with disabilities) or a cluster of related results (e.g., increasing the graduation rate and decreasing the dropout rate for children with disabilities).

Statement

Description

Selection of Coherent Improvement Strategies

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified result(s). The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support LEA implementation of evidence-based practices to improve the State-identified Measurable Result(s) for Children with Disabilities. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build LEA capacity to achieve the State-identified Measurable Result(s) for Children with Disabilities.

Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in LEAs, and achieve improvement in the State-identified Measurable Result(s) for Children with Disabilities.

Submitted Theory of Action: No Theory of Action Submitted

Provide a description of the provided graphic illustration (optional)

Description of Illustration

Infrastructure Development

(a) Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.
(b) Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
(c) Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
(d) Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

Support for EIS programs and providers Implementation of Evidence-Based Practices

(a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
(b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
(c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.

Evaluation

(a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
(b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.
(c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
(d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

OSEP Response

Required Actions

Certify and Submit your SPP/APR

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.

Selected: 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: Patricia Hozella

Title: Director, Bureau of Special Education

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