

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

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

**For reporting on
FFY18**

Tennessee



PART B DUE February 3, 2020

**U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202**

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The State Performance Plan (SPP)/Annual Performance Report (APR) documents and evaluates state implementation of special education on an annual basis. Every state is required to develop a plan describing how improvements will be made to special education programs, how special education programs will be assessed, and the targets for the 16 indicators of performance. These indicators focus on information specific to students with disabilities (SWDs) and can be either compliance-based or results-based. A summary of each indicator, the results from FFY 2017, the results for FFY 2018, and the targets set for FFY 2018 have been provided in the attached table "Introduction_FFY 2018 Indicator Summary_TN_1."

Number of Districts in your State/Territory during reporting year

146

General Supervision System

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

To ensure that IDEA Part B requirements are being met, the Tennessee Department of Education utilizes a general supervision structure that entails multiple systems working in concert with one another. These systems include: monitoring, local determinations for LEAs based on indicators in the SPP/APR, and dispute resolution.

Monitoring System

There is a shared responsibility of monitoring IDEA Part B within the department. The division of special populations monitors specific indicators from the SPP/APR (4A, 4B, 9, and 10) through reviews of policies, procedures, and practices, while all other monitoring is completed by the office of federal programs and oversight (FPO).

Results-based Monitoring: Monitoring and oversight of ESEA and IDEA programs are the primary responsibilities of the Division of Federal Programs and Oversight (FPO) at the Tennessee Department of Education. In order to meet these responsibilities, FPO uses a three-tier results-based framework for monitoring ESEA and IDEA programs.

Tennessee's multi-tiered monitoring framework includes three distinctive levels: on-site, desktop, and self-assessment. A risk analysis comprised of approximately 50 factors identifies an increased risk that an LEA may not comply with federal requirements. Each school year, all LEAs must participate in one of the three tiers. Results from the analysis designate each LEA's risk as one of three levels: significant (which results in an on-site visit), elevated (which identifies LEAs for participation in desktop monitoring), or low risk (with LEAs completing a self-assessment). A random selection of one or more LEAs to participate in on-site monitoring occurs prior to determining the desktop and self-assessment selections.

IEP Monitoring: The IEP monitoring system developed by FPO utilizes a two-step process that typically includes all LEAs in the state.

Typically, in the first step of this monitoring system all LEAs are assigned a proportionate amount of randomly sampled student records to evaluate. These records are representative of the disability category makeup of each individual LEA for viable sampling. The LEAs must assess these records using the rubric made available through a monitoring platform and receive training and support on how to assess these records. A copy of this monitoring rubric, titled "Introduction_IEP Review Protocol 18-19_TN_2," has been attached.

In FFY 2018, a select group of LEAs piloted a new process and platform for IEP monitoring. As a result, fewer LEAs were selected for review as compared to previous years. This new monitoring platform is now housed within the existing statewide IEP management system used in Tennessee. This ensures that appropriate documentation is updated for monitoring and will alleviate paperwork burdens on LEAs. By FFY 2019, all LEAs will be utilizing this monitoring platform and process.

The second step in the monitoring process entails state monitors assessing these same student records via desktop auditing. Monitors use the same rubric as the LEAs do in their own self-assessments. The results of both reviews are compared and LEAs are notified of discrepancies between the two rubrics and/or findings of noncompliance.

Fiscal Monitoring: The fiscal monitoring of IDEA Part B funds and grants is completed by the office of finance. This monitoring entails ensuring that LEAs are appropriately spending and allocating IDEA Part B funds LEA-wide and at individual schools. As well, fiscal monitoring is completed for those LEAs awarded grants and discretionary funding coming from IDEA Part B to certify that grants and discretionary funds are being used as intended and in accordance with IDEA Part B requirements.

Local Determinations

Since the FFY 2011 APR, the department has employed a local determinations process focused not only on compliance indicators but also on results. This process supports not only the overall goals of the department to continue redirecting focus on student performance and outcomes, but also aligns to the national shift toward results-driven accountability. Local determinations are made using LEA-specific data for almost all indicators and each indicator selected is weighted based on the department's priorities. The focus on student performance is manifest in the heavy weighting of results-based indicators. Other indicators that are solely compliance focused and/or predicated on less reliable data (e.g., survey results) might have a lesser weight.

The actual local determination assigned to each LEA is based on overall points allocated once the weights of each indicator are calculated. In addition, the department uses a growth metric to assess improvement in LEA performance for each results-based indicator from year-to-year, when possible. Each LEA is provided a detailed matrix (see attached "Introduction_Local Determinations Matrix_TN_3") listing their actual data for each indicator included in the determinations process, how their data compare against the state, and whether they met the state-established target.

Rather than have LEAs develop separate improvement activities for individual indicators and submit them piecemeal to the department, LEAs must address any flagged indicators in their LEA plan. These plans are submitted through the LEA planning platform, InformTN. This reduces the paperwork

burden for LEAs, creates a continuum of communication throughout the entire department, and ensures that improvement strategies and efforts for students with disabilities are included in the overall LEA improvement plan rather than being disparate and disconnected.

For those LEAs found in "needs intervention," a site visit to conduct a needs assessment is required. Staff from the division of special populations visit LEAs to address those indicators flagged in the determinations process. Using a uniform protocol (see attached "Introduction_Complete Self-Assessment Document_TN_4"), relevant LEA staff are asked about LEA-wide practices and procedures that might impact each of the flagged indicators. Data from the APR fiscal year and current data are used to inform the discussion.

The visits are intended to hold LEAs accountable to data from a previous year, but not to fixate on this old data that cannot not be altered. Instead, the focus is on discussing LEAs' current data, where they would like their future data to be, and how the department can be a thought partner in helping them attain their goals. School-specific visits are also done in addition to the visits with central office staff and administrators to better flesh out the impression of the LEA as a whole and get input from other parties. Improvement plans are developed based on these visits with both recommended and required tasks that address each of the flagged indicators. These plans are developed in concert between the division of special populations staff and LEA staff, and follow-up conversations to discuss progress within the plan are scheduled subsequent to the visits.

Dispute Resolution

The department's office of general council is responsible for overseeing dispute resolution throughout the course of each year. This includes investigation and resolution of administrative complaints as well as mediations and due process requests and/or hearings. Signed written complaints should have reports issued and be resolved within the allotted 60-day timeline or the agreed upon extended timeline (could be due to exceptional circumstances relative to the particular complaint or because the parent/individual/organization and department agree to extend the timeline to engage in mediation or alternative forms of dispute resolution). Due process requests are to be documented by the office of general council and if requests are fully adjudicated, this must be done within the 45-day timeline or the agreed upon extended timeline (an extension can be approved by hearing officer at the request of either party).

Technical Assistance System

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

For the sake of continuity and prevention of redundancy both professional development and technical assistance have been combined in this section.

Identifying Initiatives

The department has continued championing the initiatives outlined in Tennessee's State Personnel Development Grant (SPDG) and State Systemic Improvement Plan (SSIP) regarding models of differentiated instruction for all students with disabilities, and ensuring educators are providing appropriate interventions to students that address their areas of deficit/need. Due to the successes seen as result of this work, both in classroom observations of participating teachers/schools, and concrete student-level data, these initiatives expanded to even more LEAs. In the 2017-18 school year, LEAs had the opportunity to apply for participation in a second SPDG/SSIP cohort to implement these strategies/contents. Twenty additional LEAs were selected for participation and began implementation during the 2018-19 school year.

As another initiative outlined in the SPDG, the department has been looking at instructional access for 619 students (ages 3-5). Tennessee has one of the lowest percentages in the nation of students ages 3-5 receiving the majority of their special education services in a regular early childhood program. Accordingly, the department identified leveraging points and resources to improve this measure and developed guidance on how special education services might be provided in the regular early childhood program to the maximum extent possible. Seventeen LEAs were selected to participate in an initial cohort implementing activities and strategies targeting access to peers without disabilities in pre-K settings. These seventeen LEAs saw a 10% increase in the percentage of children with disabilities who were enrolled in a general education program and receiving a majority of their services in that setting.

Training on Initiatives

The department has gone to great lengths to increase the amount of high-quality technical assistance and professional development offered to LEAs throughout the state. Many of the divisions within the department provide individual trainings and professional development to their specific populations relative to current policies and initiatives. However, to avoid siloing of efforts, the Tennessee Department of Education has used its strategic plan to create linkages in work being done across divisions and ensure that a diverse group of department staff and stakeholders are at the table to have conversations about the broad array of work being done. This work has ensured that SWDs and educators of SWDs remain a focus of the work being done by the department as a whole and that department staff remain cognizant of these subgroups.

The instructional programming team within the division of special populations conducts the majority of instructional technical assistance and professional development for special education staff within Tennessee, particularly regarding the aforementioned initiatives. This assistance has included the development of a special education framework to assist teachers in the writing of Instructionally Appropriate IEPs and the collaboration with others in the department relative to Response to Instruction and Intervention (RTI²). Each member of the instructional programming team has a particular area of expertise, ranging from speech/language therapy to high school transition, so that the team can offer a wide gamut of professional development and technical assistance to LEAs in all areas of special education.

The regional support team within the division of special populations serves as regional support for LEAs across the state. They take the lead in working with "needs intervention" LEAs, but they also assist with training on the aforementioned initiatives or providing requested professional development. These regional consultants serve as the conduit to LEAs so that there is one main point of contact at the state for LEAs rather than a multitude of different people needed to answer different questions. The consultants are able to connect LEAs to resources, training opportunities, and guidance regarding department initiatives. They can also provide more nuanced, targeted technical assistance and professional development to individual LEAs and schools as needed.

The data services team provides professional development and routine technical assistance to LEAs on the use of data to inform instructional decision-making and the effective use of the statewide IEP data management system (EasyIEP). This team develops documentation and manuals for LEAs regarding inputting special education information into the statewide system and goes to great lengths to link the technology platform to the department initiatives to ensure streamlined communication to LEAs. Embedded in this IEP data management system are many resources addressing crucial initiatives produced by the department to ensure such information can be readily accessed by users when creating special education documents.

Identifying LEAs for Technical Assistance/Professional Development

While some of the technical assistance and professional development the department provides is predicated on LEA requests for support, the department also uses data to determine whether LEAs require technical assistance or professional development. In particular, the division of special populations uses the APR local determinations as a barometer of whether LEAs are successfully improving the outcomes of students with disabilities and are compliant with federal and state regulations. While those LEAs in the determination category of "meets requirements" may receive technical assistance or professional development if requested, the department focuses much of its resources and efforts on providing support to those LEAs in "needs assistance" and "needs intervention" determination categories.

As is detailed in the "General Supervision" section, "needs intervention" LEAs are subject to site visits in which division of special populations and student support staff visit identified LEAs and meet with central office staff and administrators to discuss indicators flagged in the determinations process. Data gathered through the LEA-submitted improvement plan, the data from the APR period in question, and the most current data are discussed at the site visit to ensure accountability for past data while focusing on current data and how to improve future data. During these visits, department staff conduct needs assessments and support LEAs.

Based on the site visit, LEAs are provided department staff notes and an improvement plan that pulls information gleaned from the visit. This improvement plan has both recommended and required activities that address each of the flagged indicators outlined in the determinations and such information must be entered into the monitoring tool used to capture LEA plans. Many of these activities entail having technical assistance and professional development training for LEA staff. Using the determinations as a system by which the department can identify those LEAs requiring the most intensive technical assistance and professional development has been beneficial for both LEAs and the department. The indicators in the APR help staff in LEAs pinpoint areas of deficit or concern and allow the department to focus on and localize supports in the areas of greatest need within these LEAs.

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.

Information combined in the "Technical Assistance System" section above.

Stakeholder Involvement

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

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

Starting in the 2017-18 school year, the department developed a Collaborative for Student Success, comprised of several members from the Council, district representatives, parent representatives, advocacy agencies, and student representatives. This collaborative is intended to provide feedback on large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

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

YES

Reporting to the Public

How and where the State reported to the public on the FFY17 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 2017 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 2017 APR in 2019, is available.

The department reports annually to the public on the performance of the state and each LEA through the state website: <https://www.tn.gov/education/student-support/special-education/special-education-data-services-reports.html>. Reports provided on this site include the full SPPs and APRs for the past six years, a spreadsheet with detailed data for each LEA on every indicator as compared to state averages and targets for the SPP/APR (a copy of this spreadsheet from the FFY 2017 APR can be found here: https://www.tn.gov/content/dam/tn/education/special-education/data/lea_apr_indicator_summary_2017-18.xlsx), and OSEP's letter of determination for the state for the most recent APR. Specific data from individual indicators (such as Indicator 3) can be found on the website provided above and the Tennessee state report card at: <https://www.tn.gov/education/data/report-card.html>.

Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2018 and 2019 is Needs Assistance. In the State's 2019 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will

focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2018 SPP/APR submission, due February 3, 2020, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. In the FFY 2018 SPP/APR, the State must report FFY 2018 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year 4; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2019); (3) a summary of the SSIP's coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short- and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities are impacting the State's capacity to improve its SiMR data.

Response to actions required in FFY 2017 SPP/APR

As a result of Tennessee's 2018 and 2019 state determination of Needs Assistance, the department has engaged with the following technical assistance centers:

IDEA Data Center (IDC): The department has worked with IDC to seek feedback and technical assistance related to its SSIP and SPP/APR. This technical assistance informed revisions and led to improved processes related to stakeholder engagement. In addition, the technical assistance provided by IDC continues to inform the development of process documents for each of the SPP/APR indicators.

National Center for Systemic Improvement (NCSI): Department staff have worked with NCSI to refine the use of its IDEA discretionary funds to best leverage practices that will lead to systemic change. As a result of this assistance, the department revised the provision of LEA grants by aligning the use of funds to needs identified through a root cause analysis. The grants are intended to fund activities that will lead to systemic changes that measurably improve outcomes for students with disabilities. In addition, the assistance continues to inform the development of a technical assistance network to address the most pressing priorities identified by districts through a comprehensive data review. Finally, the department has been engaged in several collaboratives including the Results Based Accountability (RBA) and State Education Agency Leaders (SEAL). This participation led collaborative discussions with other states and the curation of resources to inform department guidance.

National Technical Assistance Center on Transition (NTACT): The department engaged with NTACT to explore changes to the data collection relative to Indicator 14. In addition, the department engaged with NTACT staff regarding a checklist used to develop high quality transition plans (Indicator 13). As a result, the department refined its monitoring instrument and conducted training for internal staff on the consistent monitoring of transition plans. Additional activities and ongoing engagement with NTACT are planned.

Early Childhood Technical Assistance Center (ECTA): The department has engaged with ECTA to explore and evaluate its monitoring and accountability systems related to Early Childhood Environments (Indicator 6). As a result of this involvement, the department issued a letter to all directors of schools in districts that failed to meet the state target for Indicator 6. In addition, staff involvement in the early childhood inclusion cohort through ECTA informed the department's work related to the State Personnel Development Grant (SPDG). Through this work, LEAs have partnered with the department to improve access to high quality early childhood programs for children ages 3-5 with disabilities.

Intro - OSEP Response

States were instructed to submit Phase III, Year Four, of the State Systemic Improvement Plan (SSIP), indicator B-17, by April 1, 2020. The State provided the required information. The State provided a target for FFY 2019 for this indicator, and OSEP accepts the target.

Intro - Required Actions

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

The State's IDEA Part B determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

Same data as used for reporting to the Department of Education (Department) under Title I of the Elementary and Secondary Education Act (ESEA).

Measurement

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

Instructions

Sampling is not allowed.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2018 SPP/APR, use data from 2017-2018), and compare the results to the target. Provide the actual numbers used in the calculation.

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

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

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

1 - Indicator Data

Historical Data

Baseline	2011	67.40%			
FFY	2013	2014	2015	2016	2017
Target >=	69.30%	69.37%	70.96%	71.87%	73.55%
Data	67.33%	69.02%	69.99%	71.79%	72.72%

Targets

FFY	2018	2019
Target >=	74.43%	74.73%

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

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Prepopulated Data

Source	Date	Description	Data
SY 2017-18 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696)	10/02/2019	Number of youth with IEPs graduating with a regular diploma	6,622
SY 2017-18 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696)	10/02/2019	Number of youth with IEPs eligible to graduate	9,066
SY 2017-18 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec FS150; Data group 695)	10/02/2019	Regulatory four-year adjusted-cohort graduation rate table	73.04%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
6,622	9,066	72.72%	74.43%	73.04%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

XXX

Graduation Conditions

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

4-year ACGR

If extended, provide the number of years

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

The Tennessee Department of Education has raised standards and aligned graduation requirements to best prepare students for college and the workforce. All students must meet these criteria and conditions to graduate with a regular high school diploma, regardless of their disability status.

Following the implementation of the Tennessee Diploma Project in 2009, high school students must complete 22 credits to graduate. They also will be tested in core subject areas with End of Course exams, part of the Tennessee Comprehensive Assessment Program, or TCAP. Their performance on these exams will factor into their semester grade for the course.

To receive a regular high school diploma, all students enrolled in a Tennessee public school during their eleventh (11th) grade year must take either the ACT or SAT. View the FAQ on the policy here.

Total Required Credits: 22

- Math: 4 credits, including Algebra I, II, Geometry and a fourth higher level math course (Students must be enrolled in a mathematics course each school year)
- English: 4 credits
- Science: 3 credits, including Biology, Chemistry or Physics, and a third lab course
- Social Studies: 3 credits, including U.S. History and Geography, World History and Geography, U.S. Government and Civics, and Economics
- Physical Education and Wellness: 1.5 credits
- Personal Finance: 0.5 credits (Three years of JROTC may be substituted for one-half unit of Personal Finance if the JROTC instructor attends the Personal Finance training.)
- Foreign Language: 2 credits (May be waived by the LEA for students, under certain circumstances, to expand and enhance the elective focus)
- Fine Arts: 1 credit (may be waived by the local school district for students, under certain circumstances, to expand and enhance the elective focus)
- Elective Focus: 3 credits consisting of Math and Science, Career and Technical Education, Fine Arts, Humanities, Advanced Placement (AP) or International Baccalaureate (IB)

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

NO

If yes, explain the difference in conditions that youth with IEPs must meet.

Provide additional information about this indicator (optional)

The target for FFY 2018 is the target graduation percentage for the SWDs subgroup, as per Tennessee's Every Student Succeeds Act (ESSA) plan. Because the plan's calculation for graduation targets is predicated of previous year's data, the targets for subsequent years will have to be updated annually to reflect new targets in place. In FFY 2018, graduation targets were set using the following calculation:

$$\text{Graduation Target} = \text{Graduation Rate for Previous Year} + \text{Graduation Rate Growth Goal}$$

The Graduation Rate Growth Goal is determined via the following calculation:
Graduation Rate Growth Goal = $(100 - \text{Graduation Rate for Previous Year}) / 16$

The following calculation for graduation target is based on actual data for FFY 2018:
Graduation Rate Growth Goal: $(100\% - 72.72\%) / 16 = 1.71$
Graduation Target: $72.72\% + 1.71\% = 74.43\%$

The target for FFY 2019 was entered using this same process and FFY 2018 data.

1 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

1 - OSEP Response

The State revised the target for FFY 2018, and provided the target for FFY 2019 for this indicator. OSEP accepts those targets.

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

OPTION 1:

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification C009.

OPTION 2:

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

Measurement

OPTION 1:

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

OPTION 2:

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

Instructions

Sampling is not allowed.

OPTION 1:

Use 618 exiting data for the year before the reporting year (e.g., for the FFY 2018 SPP/APR, use data from 2017-2018). Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) received a certificate; (c) reached maximum age; (d) dropped out; or (e) died.

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

OPTION 2:

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

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

Options 1 and 2:

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2018 SPP/APR, use data from 2017-2018), and compare the results to the target.

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

2 - Indicator Data

Historical Data

Baseline	2011	9.60%			
FFY	2013	2014	2015	2016	2017
Target <=	3.42%	3.37%	3.32%	3.27%	3.22%
Data	3.36%	3.62%	5.26%	2.46%	2.81%

Targets

FFY	2018	2019
Target <=	3.20%	3.18%

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

Starting in the 2017-18 school year, the department developed a Collaborative for Student Success, comprised of several members from the Council, district representatives, parent representatives, advocacy agencies, and student representatives. This collaborative is intended to provide feedback on large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

Please indicate the reporting option used on this indicator

Option 2

Prepopulated Data

Source	Date	Description	Data
SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	5,452
SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (b)	917
SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (c)	104
SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (d)	692
SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education as a result of death (e)	30

FFY 2018 SPP/APR Data

Number of youth with IEPs who exited special education due to dropping out	Total number of High School Students with IEPs by Cohort	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
XXX	XXX	XXX	XXX	XXX	XXX	XXX

Has your State made or proposes to make changes to the data source under Option 2, when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012? (yes/no)

NO

If yes, provide justification for the changes below.

Use a different calculation methodology (yes/no)

YES

Change numerator description in data table (yes/no)

YES

Change denominator description in data table (yes/no)

YES

If use a different calculation methodology is yes, provide an explanation of the different calculation methodology

The data used to calculate the dropout rate provided above did not come from data in the EdFacts file C009 but instead was based on data submitted for LEA level EdFacts file C032. The latter report comes from the statewide student information system which the department uses as the system of record when calculating reports such as graduation rates, dropout rates, and membership counts. To align with these reports, the data in the LEA level EdFacts file C032 has been used consistently by the department to calculate Indicator 2. The calculation is based on the annual event dropout rate for students leaving an LEA in a single year determined in accordance with the National Center for Education Statistic's Common Core of Data. In the numerator of this dropout calculation is the number of students meeting the criteria established for dropouts as per the LEA level EdFacts file C032:

"The unduplicated number of dropouts [students who were enrolled in school at some time during the school year, yet were not enrolled the following school year, but were expected to be in membership (i.e., were not reported as dropouts the year before); did not graduate from high school (graduates include students who received a GED without dropping out of school) or complete a state or LEA-approved educational program; and who did not meet any of the following exclusionary conditions: (1) transfer to another public school LEA, private school, or state- or LEA approved educational program, (2) temporary school-recognized absence due to suspension or illness, or (3) death]."

The grade parameters established for Indicator 2 (only including the students with disabilities in grades 9-12 who were classified as dropouts) were applied to the data in the LEA level EdFacts file C032 for the 2017-18 school year. The denominator of this dropout calculation is the number of students with disabilities in grades 9-12 enrolled during the 2017-18 SY as based on the census information collected in the LEA level EdFacts file C002. Thus, the calculation of dropouts for FFY 2017 is as follows:

Count of students with disabilities who dropped out as per the LEA level EdFacts file C032 and were in grades 9-12 = 989
 Count of students with disabilities enrolled in grades 9-12 as per the LEA level EdFacts file C002 = 35,587

$989 / 35,587 = 2.78\%$

FFY 2018 SPP/APR Data

Number of youth with IEPs who exited special education due to dropping out	Total number of High School Students with IEPs by Cohort	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
989	35,587	2.81%	3.20%	2.78%	Met Target	No Slippage

Provide reasons for slippage, if applicable

XXX

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

As enumerated above, students are considered dropouts if they meet the criteria outlined in EdFacts file C032. Students in Tennessee are considered dropouts if they meet any of the following criteria:

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

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

NO

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

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

2 - OSEP Response

The State revised the target for FFY 2018, and provided the target for FFY 2019 for this indicator. OSEP accepts those targets.

2 - Required Actions

Indicator 3B: Participation for Students with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

- A. Indicator 3A – Reserved
- B. Participation rate for children with IEPs
- C. Proficiency rate for children with IEPs against grade level and alternate academic achievement standards.

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

Data Source

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

Measurement

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

Instructions

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

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

Indicator 3B: Provide separate reading/language arts and mathematics participation rates, inclusive of all ESEA grades assessed (3-8 and high school), for children with IEPs. Account for ALL children with IEPs, in all grades assessed, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3B - Indicator Data

Reporting Group Selection

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

Group	Group Name	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	HS
A	Overall I	X	X	X	X	X	X	X	X	X	X	X
B												
C												
D												
E												
F												
G												
H												
I												
J												
K												
L												

Historical Data: Reading

Group	Group Name	Baseline	FFY	2013	2014	2015	2016	2017
A	Overall	2016	Target >=	95.00%	95.00%	95.00%	95.00%	95.00%
A	Overall	97.68%	Actual	98.95%	99.02%		97.68%	96.23%
B			Target >=					
B			Actual					
C			Target >=					

C			Actual					
D			Target >=					
D			Actual					
E			Target >=					
E			Actual					
F			Target >=					
F			Actual					
G			Target >=					
G			Actual					
H			Target >=					
H			Actual					
I			Target >=					
I			Actual					
J			Target >=					
J			Actual					
K			Target >=					
K			Actual					
L			Target >=					
L			Actual					

Historical Data: Math

Group	Group Name	Baseline	FFY	2013	2014	2015	2016	2017
A	Overall	2016	Target >=	95.00%	95.00%	95.00%	95.00%	95.00%
A	Overall	97.99%	Actual	98.91%	98.99%		97.99%	97.08%
B			Target >=					
B			Actual					
C			Target >=					
C			Actual					
D			Target >=					
D			Actual					
E			Target >=					
E			Actual					
F			Target >=					
F			Actual					
G			Target >=					
G			Actual					
H			Target >=					
H			Actual					
I			Target >=					
I			Actual					
J			Target >=					
J			Actual					
K			Target >=					
K			Actual					

L			Target >=					
L			Actual					

Targets

	Group	Group Name	2018	2019
Reading	A >=	Overall	95.00%	95.00%
Reading	B >=			
Reading	C >=			
Reading	D >=			
Reading	E >=			
Reading	F >=			
Reading	G >=			
Reading	H >=			
Reading	I >=			
Reading	J >=			
Reading	K >=			
Reading	L >=			
Math	A >=	Overall	95.00%	95.00%
Math	B >=			
Math	C >=			
Math	D >=			
Math	E >=			
Math	F >=			
Math	G >=			
Math	H >=			
Math	I >=			
Math	J >=			
Math	K >=			
Math	L >=			

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor’s Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, it’s relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

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FFY 2018 Data Disaggregation from EDFacts

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

NO

Data Source:

SY 2018-19 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

04/08/2020

Reading Assessment Participation Data by Grade

Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs	9,708	9,643	9,592	9,257	9,040	8,834	211	6,995	1,317	75	
b. IEPs in regular assessment with no accommodations	2,934	2,223	1,661	1,335	1,349	1,251	58	2,688	100	31	
c. IEPs in regular assessment with accommodations	5,638	6,255	6,663	6,563	6,321	6,226	144	4,122	129	39	
f. IEPs in alternate assessment against alternate standards	978	1,019	1,110	1,136	1,180	1,164	0	0	993	0	

Data Source:

SY 2018-19 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

04/08/2020

Math Assessment Participation Data by Grade

Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs	9,697	9,640	9,583	9,251	9,021	8,823	4,500	3,305	1,281	84	
b. IEPs in regular assessment with no accommodations	3,261	2,450	1,818	1,539	1,487	1,466	1,791	1,187	83	36	
c. IEPs in regular assessment with accommodations	5,329	6,047	6,498	6,382	6,181	6,008	2,564	2,017	112	36	
f. IEPs in alternate assessment against alternate standards	978	1,017	1,111	1,137	1,180	1,163	0	0	987	0	

FFY 2018 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A	Overall	64,672	63,310	96.23%	95.00%	97.89%	Met Target	No Slippage
B							N/A	N/A
C							N/A	N/A

Group	Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
D							N/A	N/A
E							N/A	N/A
F							N/A	N/A
G							N/A	N/A
H							N/A	N/A
I							N/A	N/A
J							N/A	N/A
K							N/A	N/A
L							N/A	N/A

Group	Group Name	Reasons for slippage, if applicable
A	Overall	XXX
B		XXX
C		XXX
D		XXX
E		XXX
F		XXX
G		XXX
H		XXX
I		XXX
J		XXX
K		XXX
L		XXX

FFY 2018 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A	Overall	65,185	63,865	97.08%	95.00%	97.97%	Met Target	No Slippage
B							N/A	N/A
C							N/A	N/A
D							N/A	N/A
E							N/A	N/A
F							N/A	N/A
G							N/A	N/A
H							N/A	N/A
I							N/A	N/A
J							N/A	N/A
K							N/A	N/A
L							N/A	N/A

Group	Group Name	Reasons for slippage, if applicable
A	Overall	XXX
B		XXX
C		XXX
D		XXX
E		XXX
F		XXX
G		XXX
H		XXX
I		XXX
J		XXX
K		XXX
L		XXX

Regulatory Information

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

Public Reporting Information

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

Assessment information for all students, including students with disabilities, can be found on Tennessee's State Report Card at: <https://www.tn.gov/education/data/report-card.html>. The data for the 2018-19 school year assessments is currently available on this site. Further assessment data, including participation and achievement data for SWDs on assessments, can be found at the following site: <https://www.tn.gov/education/student-support/special-education/special-education-data-services-reports.html>.

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

3B - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

3B - Required Actions

Indicator 3C: Proficiency for Students with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

- A. Indicator 3A – Reserved
- B. Participation rate for children with IEPs
- C. Proficiency rate for children with IEPs against grade level and alternate academic achievement standards.

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

Data Source

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

Measurement

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

Instructions

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

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

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

3C - Indicator Data

Reporting Group Selection

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

Group	Group Name	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	HS
A	Overall	X	X	X	X	X	X	X	X	X	X	X
B												
C												
D												
E												
F												
G												
H												
I												
J												
K												
L												

Historical Data: Reading

Group	Group Name	Baseline	FFY	2013	2014	2015	2016	2017
A	Overall	2016	Target >=	34.80%	32.08%	35.08%		13.90%
A	Overall	10.90%	Actual	29.08%	21.05%	NVR	10.90%	12.51%
B			Target >=					
B			Actual					
C			Target >=					

C			Actual					
D			Target >=					
D			Actual					
E			Target >=					
E			Actual					
F			Target >=					
F			Actual					
G			Target >=					
G			Actual					
H			Target >=					
H			Actual					
I			Target >=					
I			Actual					
J			Target >=					
J			Actual					
K			Target >=					
K			Actual					
L			Target >=					
L			Actual					

Historical Data: Math

Group	Group Name	Baseline	FFY	2013	2014	2015	2016	2017
A	Overall	2016	Target >=	31.30%	33.33%	36.33%		16.33%
A	Overall	13.33%	Actual	30.33%	27.50%	NVR	13.33%	13.85%
B			Target >=					
B			Actual					
C			Target >=					
C			Actual					
D			Target >=					
D			Actual					
E			Target >=					
E			Actual					
F			Target >=					
F			Actual					
G			Target >=					
G			Actual					
H			Target >=					

H			Actual					
I			Target >=					
I			Actual					
J			Target >=					
J			Actual					
K			Target >=					
K			Actual					
L			Target >=					
L			Actual					

Targets

	Group	Group Name	2018	2019
Reading	A >=	Overall	15.51%	15.29%
Reading	B >=			
Reading	C >=			
Reading	D >=			
Reading	E >=			
Reading	F >=			
Reading	G >=			
Reading	H >=			
Reading	I >=			
Reading	J >=			
Reading	K >=			
Reading	L >=			
Math	A >=	Overall	16.85%	18.16%
Math	B >=			
Math	C >=			
Math	D >=			
Math	E >=			
Math	F >=			
Math	G >=			
Math	H >=			
Math	I >=			
Math	J >=			
Math	K >=			
Math	L >=			

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor’s Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, it’s relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

Starting in the 2017-18 school year, the department developed a Collaborative for Student Success, comprised of several members from the Council, district representatives, parent representatives, advocacy agencies, and student representatives. This collaborative is intended to provide feedback on large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

FFY 2018 Data Disaggregation from EDFacts

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

NO

Data Source:

SY 2018-19 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/08/2020

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	9,550	9,497	9,434	9,034	8,850	8,641	202	6,810	1,222	70	
b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level	790	514	351	221	193	99	2	230	1	0	
c. IEPs in regular assessment with accommodations scored at or above proficient against grade level	271	288	286	190	250	133	1	227	0	1	
f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level	466	424	477	619	638	557			551		

Data Source:

SY 2018-19 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/08/2020

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	9,568	9,514	9,427	9,058	8,848	8,637	4,355	3,204	1,182	72	
b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,108	851	518	313	189	175	79	2	0	1	

Grade	3	4	5	6	7	8	9	10	11	12	HS
c. IEPs in regular assessment with accommodations scored at or above proficient against grade level	412	538	611	378	232	326	77	6	0	0	
f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level	427	539	532	587	595	656			532		

FFY 2018 SPP/APR Data: Reading Assessment

Group	Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A	Overall	63,310	7,780	12.51%	15.51%	12.29%	Did Not Meet Target	No Slippage
B							N/A	N/A
C							N/A	N/A
D							N/A	N/A
E							N/A	N/A
F							N/A	N/A
G							N/A	N/A
H							N/A	N/A
I							N/A	N/A
J							N/A	N/A
K							N/A	N/A
L							N/A	N/A

Group	Group Name	Reasons for slippage, if applicable
A	Overall	XXX
B		XXX
C		XXX
D		XXX
E		XXX
F		
G		XXX
H		XXX
I		XXX
J		XXX
K		XXX
L		XXX

FFY 2018 SPP/APR Data: Math Assessment

Group	Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A	Overall	63,865	9,684	13.85%	16.85%	15.16%	Did Not Meet Target	No Slippage
B							N/A	N/A
C							N/A	N/A
D							N/A	N/A
E							N/A	N/A
F							N/A	N/A
G							N/A	N/A
H							N/A	N/A
I							N/A	N/A
J							N/A	N/A
K							N/A	N/A
L							N/A	N/A

Group	Group Name	Reasons for slippage, if applicable
A	Overall	XXX
B		XXX
C		XXX
D		XXX
E		XXX
F		XXX
G		XXX
H		XXX
I		XXX
J		XXX
K		XXX
L		XXX

Regulatory Information

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

Public Reporting Information

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

Assessment information for all students, including students with disabilities, can be found on Tennessee's State Report Card at: <https://www.tn.gov/education/data/report-card.html>. The data for the 2018-19 school year assessments is currently available on this site. Further assessment data, including participation and achievement data for SWDs on assessments, can be found at the following site: <https://www.tn.gov/education/student-support/special-education/special-education-data-services-reports.html>.

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

None

3C - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

3C - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

Percent = $\left[\frac{\text{[# of districts that meet the State-established n size (if applicable) that have a significant discrepancy in the rates of suspensions and expulsions for greater than 10 days in a school year of children with IEPs]}}{\text{[# of districts in the State that meet the State-established n size (if applicable)]}} \right] \times 100$.

Include State's definition of "significant discrepancy."

Instructions

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

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2018 SPP/APR, use data from 2017-2018), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for 2017-2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

4A - Indicator Data

Historical Data

Baseline	2017	20.00%			
FFY	2013	2014	2015	2016	2017
Target <=	2.60%	2.40%	2.20%	2.00%	1.80%
Data	7.41%	17.39%	22.22%	8.00%	20.00%

Targets

FFY	2018	2019
Target <=	8.00%	8.00%

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for

indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

Starting in the 2017-18 school year, the department developed a Collaborative for Student Success, comprised of several members from the Council, district representatives, parent representatives, advocacy agencies, and student representatives. This collaborative is intended to provide feedback on large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

FFY 2018 SPP/APR Data

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

YES

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

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Number of districts that have a significant discrepancy	Number of districts that met the State's minimum n size	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
5	19	20.00%	8.00%	26.32%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

There are multiple factors that may have contributed to the slippage in this category. First, the overall number of LEAs meeting the minimum "n" size decreased. Because this number is so small, it can lead to more notable increases and decreases in percentages and greater volatility in the data as more or fewer LEAs meet the "n" size criteria. Second, as a result of actions required in the FFY 2017 APR, the LEA self-assessment tool previously used to help determine findings was deemed inappropriate and required revisions. It was revised with feedback obtained from technical centers and the final version was reviewed and approved by the Office of Special Education Program state lead, education program specialist. The revised tool (see attached "Indicator 4_District Self Assessment_TN_1") required LEAs to include information related to the LEA's policies, procedures, and practices and to conduct file reviews to help identify any areas of non-compliance. This addition of file reviews to the process utilized to identify non-compliance provided the SEA with any problematic patterns of practice and violation of procedural safeguards that may have lead to discrepant rates of suspension and expulsions.

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

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

State's definition of "significant discrepancy" and methodology

In the 2017-18 school year, the department revised the calculations for Indicator 4A. Previously, this indicator was calculated by dividing the number of SWDs suspended/expelled for greater than 10 days within an LEA by the total number of SWDs within that LEA. If this percentage yielded exceeded 2.5%, an LEA was flagged for significant discrepancy. This has since been revised to use a risk ratio model that compares LEA data to statewide data. The major impetus for this change was to better align this indicator to recent changes the department made to calculations of significant disproportionality, as this indicator will better serve as a warning to LEAs meeting criteria for significant disproportionality that they may be eventually identified for significant disproportionality if practices do not change. As well, this adjusted calculation better aligns with the calculation used for Indicator 4B.

Under the revised calculations for Indicator 4A, the department calculates an LEA rate of SWDs suspended/expelled for more than 10 days by dividing the count of SWDs in an LEA suspended/expelled for more than 10 days by the total count of all SWDs in the LEA. This LEA rate is then divided by the state rate, which is calculated by dividing the count of SWDs in the state suspended/expelled for more than 10 days by the total count of all SWDs in the state. A risk ratio threshold of 2.0 must be met or exceeded for an LEA to be flagged for significant discrepancy. This threshold mirrors the risk ratio threshold utilized in the state's revised calculations and thresholds for significant disproportionality related to the area of discipline of students with disabilities.

While the calculation for this indicator has been updated, the same "n" size requirements are in place. There must be a minimum "n" size of 5 or more students suspended/expelled to mitigate situations in which false positives might lead to over-identification of LEAs due to small numbers of students.

Provide additional information about this indicator (optional)

As a result of actions required in the FFY 2017 APR, the LEA self-assessment tool previously used to help determine findings was deemed inappropriate and required revisions. It was revised with feedback obtained from technical centers and the final version was reviewed and approved by the Office of Special Education Program state lead, education program specialist. The revised tool (see attached "Indicator 4_District Self Assessment_TN_1") required LEAs to include information related to the LEA's policies, procedures, and practices and to conduct file reviews to help identify any areas of

non-compliance. This addition of file reviews to the process utilized to identify non-compliance provided the SEA with any problematic patterns of practice and violation of procedural safeguards that may have lead to discrepant rates of suspension and expulsions.

Review of Policies, Procedures, and Practices (completed in FFY 2018 using FFY17- FFY18 data)

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

Once the department compares the discrepancy rates of all LEAs, those identified as significantly discrepant (have a risk ratio threshold of 2.0 or greater AND have an "n" size of 5 or more SWDs suspended/expelled for greater than 10 days) are required to review their policies, procedures, and practices via a self-assessment. The purpose of the review is to determine if any policy, procedure, or practice is contributing to the identified significant discrepancy. The review includes LEA policies, education information system data entry verification, general procedures for disciplinary removals, analysis of suspension data by special education status or race/ ethnicity, IEP reviews, positive behavior supports and interventions implemented district and school wide, student specific behavior intervention considerations and implementation, and manifestation determination reviews. The LEA was required to provide a description of their LEA practices and attach supportive documents as evidence. Examples of items required included a description of the LEA plan for creating positive school climate, staff training, their process for preventing and/or reducing inappropriate behavior in schools, their process for determining when and how to develop individual behavior intervention plans, and LEA in school and out of school suspension policies. Individual student file reviews also were conducted to track removal from classrooms, whether the LEA policies were appropriately followed, whether manifestation determination reviews occurred if appropriate, and if required functional behavior assessments were completed.

The information provided by each LEA identified with a significant discrepancy was reviewed by the SEA. LEAs that did not have adequate policies, procedures, or practices in place were found to be non-compliant and were required to revise these policies, procedures, or practices to ensure the appropriate development and implementation of IEPs, the use of positive behavioral interventions and supports, and adherence to procedural safeguards.

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

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.

The State must report on the correction of noncompliance in next year's SPP/APR consistent with requirements in the Measurement Table and OSEP Memorandum 09-02, dated October 17, 2008. Please explain why the State did not ensure that policies, procedures, and practices were revised to comply with applicable requirements.

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

LEAs were notified of noncompliance in writing with their local determinations. The SEA will conduct phone conferences and site visits to assist with the development of LEA plans and ensure that necessary revisions to LEA policies, procedures, and practices are completed within one calendar year of notification.

Correction of Findings of Noncompliance Identified in FFY 2017

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

FFY 2017 Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of PFFY01 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

4A - Prior FFY Required Actions

The failure to conduct the review required in 34 CFR §300.170(b) is noncompliance. In the FFY 2018 SPP/APR, the State must report correction of this noncompliance by describing the review and, if appropriate, revision of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA, for districts identified with significant discrepancies in FFY 2017 based upon FFY 2016 discipline data, as required in 34 CFR §300.170(b).

Response to actions required in FFY 2017 SPP/APR

As a result of actions required in the FFY 2017 APR, the LEA self-assessment tool previously used to help determine findings was deemed inappropriate and required revisions. It was revised with feedback obtained from technical centers and the final version was reviewed and approved by the Office of Special Education Program state lead, education program specialist. The revised tool (see attached "Indicator 4_District Self Assessment_TN_1") required LEAs to include information related to the LEA's policies, procedures, and practices and to conduct file reviews to help identify any areas of non-compliance. This addition of file reviews to the process utilized to identify non-compliance provided the SEA with any problematic patterns of practice and violation of procedural safeguards that may have lead to discrepant rates of suspension and expulsions.

FFY 2017 SPP/APR (2016-2017 data) findings

The SEA conducted reviews of the four districts whose 2016-2017 data indicated discrepant disciplinary rates. All districts indicated the use of positive behavior supports interventions and supports, have procedural safeguards in place, and appropriate district policies regarding discipline. Three districts were found to have problematic practices associated with the implementation of procedures. They are required to correct areas of noncompliance. Corrections will be monitored to ensure systemic change. LEAs were notified of noncompliance. The SEA will conduct phone conferences and site visits to assist with the development of LEA plans and ensure that necessary revisions to LEA policies, procedures, and practices are completed within one calendar year of notification.

4A - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

OSEP's response to the State's FFY 2017 SPP/APR required the State to report in the FFY 2018 SPP/APR correction of noncompliance by describing the review and, if appropriate, revision of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA, for districts identified with significant discrepancies in FFY 2017 based upon FFY 2016 discipline data, as required in 34 CFR §300.170(b). The State provided the required information.

The State must report, in the FFY 2019 SPP/APR, on the correction of noncompliance that the State identified as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) in FFY 2018 (based on discipline data from both FFY 2018 and FFY 2017). When reporting on the correction of this noncompliance, the State must report that it has verified that the three districts with noncompliance identified based on FFY 2017 data, and each of the districts with noncompliance identified based on FFY 2018 data: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100%

compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

4A - Required Actions

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2018 SPP/APR, use data from 2017-2018), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for 2017-2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Provide an explanation of why it is not applicable below:

Historical Data

Baseline	2009	0.00%			
FFY	2013	2014	2015	2016	2017
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	NVR

Targets

FFY	2018	2019
Target	0%	0%

FFY 2018 SPP/APR Data

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

YES

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

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Number of districts that have a significant discrepancy, by race or ethnicity	Number of those districts that have policies procedure, or practices that contribute to the significant discrepancy and do not comply with requirements	Number of districts that met the State's minimum n size	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
10	4	17	NVR	0%	23.53%	Did Not Meet Target	N/A

Provide reasons for slippage, if not applicable

XXX

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

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

Provide additional information about this indicator (optional)

As a result of actions required in the FFY 2017 APR, the LEA self-assessment tool previously used to help determine findings was deemed inappropriate and required revisions. It was revised with feedback obtained from technical centers and the final version was reviewed and approved by the Office of Special Education Program state lead, education program specialist. The revised tool (see attached "Indicator 4_District Self Assessment_TN_1") required LEAs to include information related to the LEA's policies, procedures, and practices and to conduct file reviews to help identify any areas of non-compliance. This addition of file reviews to the process utilized to identify non-compliance provided the SEA with any problematic patterns of practice and violation of procedural safeguards that may have lead to discrepant rates of suspension and expulsions.

Review of Policies, Procedures, and Practices (completed in FFY 2018 using 2017-2018 data)

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

Once the department compares the discrepancy rates of all LEAs, those identified as significantly discrepant (have a risk ratio threshold of 2.0 or greater AND have an "n" size of 5 or more SWDs suspended/expelled for greater than 10 days) are required to review their policies, procedures, and practices via a self-assessment. The purpose of the review is to determine if any policy, procedure, or practice is contributing to the identified significant discrepancy. The review includes LEA policies, education information system data entry verification, general procedures for disciplinary removals, analysis of suspension data by special education status or race/ ethnicity, IEP reviews, positive behavior supports and interventions implemented district and school wide, student specific behavior intervention considerations and implementation, and manifestation determination reviews. The LEA was required to provide a description of their LEA practices and attach supportive documents as evidence. Examples of items required included a description of the LEA plan for creating positive school climate, staff training, their process for preventing and/or reducing inappropriate behavior in schools, their process for determining when and how to develop individual behavior intervention plans, and LEA in school and out of school suspension policies. Individual student file reviews also were conducted to track removal from classrooms, whether the LEA policies were appropriately followed, whether manifestation determination reviews occurred if appropriate, and if required functional behavior assessments were completed.

The information provided by each LEA identified with a significant discrepancy was reviewed by the SEA. LEAs that did not have adequate policies, procedures, or practices in place were found to be non-compliant and were required to revise these policies, procedures, or practices to ensure the appropriate development and implementation of IEPs, the use of positive behavioral interventions and supports, and adherence to procedural safeguards.

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

If YES, select one of the following:

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

The State must report on the correction of noncompliance in next year's SPP/APR consistent with requirements in the Measurement Table and OSEP Memorandum 09-02, dated October 17, 2008. Please explain why the State did not ensure that policies, procedures, and practices were revised to comply with applicable requirements.

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

LEAs were notified of noncompliance in writing with their local determinations. The SEA will conduct phone conferences and site visits to assist with the development of LEA plans and ensure that necessary revisions to LEA policies, procedures, and practices are completed within one calendar year of notification.

Correction of Findings of Noncompliance Identified in FFY 2017

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

FFY 2017 Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of PFFY01 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

4B - Prior FFY Required Actions

For the districts identified in FFY 2017, based upon FFY 2016 discipline data, as having a significant discrepancy, the State did not conduct the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that these policies, procedures, and practices comply with the IDEA, as required in 34 CFR §300.170(b). The failure to conduct the review required in 34 CFR §300.170(b) is noncompliance. In the FFY 2018 SPP/APR, the State must report on the correction of this noncompliance by describing the review, and, if appropriate, revision of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA, for districts identified with significant discrepancies in FFY 2017, based upon FFY 2016 discipline data, as required in 34 CFR §300.170(b). Further, in the FFY 2018 SPP/APR, the State must provide the required data for FFY 2018 (using 2017-2018 discipline data) for this indicator.

Response to actions required in FFY 2017 SPP/APR

As a result of actions required in the FFY 2017 APR, the LEA self-assessment tool previously used to help determine findings was deemed inappropriate and required revisions. It was revised with feedback obtained from technical centers and the final version was reviewed and approved by the Office of Special Education Program state lead, education program specialist. The revised tool (see attached "Indicator 4_District Self Assessment_TN_1") required LEAs to include information related to the LEA's policies, procedures, and practices and to conduct file reviews to help identify any areas of non-compliance. This addition of file reviews to the process utilized to identify non-compliance provided the SEA with any problematic patterns of practice and violation of procedural safeguards that may have lead to discrepant rates of suspension and expulsions.

FFY 2017 SPP/APR (2016-2017 data) findings

The SEA conducted reviews of policies, procedures, and practices for LEAs with discrepant data. All reviews were conducted to ensure the use of positive behavior supports interventions and supports, procedural safeguards in place, and appropriate district policy regarding discipline. Four districts were identified with practices contributing to areas of noncompliance. LEAs were notified of noncompliance. The SEA will conduct phone conferences and site visits to assist with the development of LEA plans and ensure that necessary revisions to LEA policies, procedures, and practices are completed within one calendar year of notification.

4B - OSEP Response

OSEP's response to the State's FFY 2017 SPP/APR required the State to report in the FFY 2018 SPP/APR correction of noncompliance by describing the review and, if appropriate, revision of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA, for districts identified with significant discrepancies in FFY 2017 based upon FFY 2016 discipline data, as required in 34 CFR §300.170(b). The State provided the required information.

The State must report, in the FFY 2019 SPP/APR, on the correction of noncompliance that the State identified as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) in FFY 2018 (based on discipline data from both FFY 2018 and FFY 2017). When reporting on the correction of this noncompliance, the State must report that it has verified that the three districts with noncompliance identified based on FFY 2017 data, and each of the districts with noncompliance identified based on FFY 2018 data: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

4B- Required Actions

Indicator 5: Education Environments (children 6-21)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

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

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

5 - Indicator Data

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A	2005	Target >=	65.50%	67.50%	69.50%	71.50%	73.50%
A	53.48%	Data	66.07%	70.06%	70.46%	70.16%	69.69%
B	2005	Target <=	11.50%	11.40%	11.30%	11.20%	11.10%
B	14.69%	Data	11.27%	10.74%	11.11%	11.48%	11.49%
C	2005	Target <=	1.70%	1.60%	1.50%	1.40%	1.30%
C	1.89%	Data	1.76%	1.79%	1.78%	1.79%	1.81%

Targets

FFY	2018	2019
Target A >=	70.00%	70.00%
Target B <=	10.85%	10.85%
Target C <=	1.77%	1.77%

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

Starting in the 2017-18 school year, the department developed a Collaborative for Student Success, comprised of several members from the Council, district representatives, parent representatives, advocacy agencies, and student representatives. This collaborative is intended to provide feedback on large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	Total number of children with IEPs aged 6 through 21	115,637
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	81,958
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	13,161
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	c1. Number of children with IEPs aged 6 through 21 in separate schools	869
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	c2. Number of children with IEPs aged 6 through 21 in residential facilities	305
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements	688

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

NO

Provide an explanation below

FFY 2018 SPP/APR Data

	Number of children with IEPs aged 6 through 21 served	Total number of children with IEPs aged 6 through 21	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	81,958	115,637	69.69%	70.00%	70.88%	Met Target	No Slippage
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	13,161	115,637	11.49%	10.85%	11.38%	Did Not Meet Target	No Slippage
C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	1,862	115,637	1.81%	1.77%	1.61%	Met Target	No Slippage

	Number of children with IEPs aged 6 through 21 served	Total number of children with IEPs aged 6 through 21	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	XXX	XXX	XXX	XXX	XXX	XXX	XXX
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	XXX	XXX	XXX	XXX	XXX	XXX	XXX
C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Use a different calculation methodology (yes/no)

NO

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

Part	Reasons for slippage, if applicable
A	XXX
B	XXX
C	XXX

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

5 - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Provide an explanation of why it is not applicable below.

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A	2014	Target >=		28.50%	30.00%	32.00%	34.00%
A	26.53%	Data		26.53%	24.09%	24.17%	24.27%
B	2014	Target <=		39.20%	34.00%	29.00%	24.00%
B	35.62%	Data		35.62%	35.71%	34.14%	33.73%

Targets

FFY	2018	2019
Target A >=	38.00%	42.00%
Target B <=	29.00%	28.00%

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights

Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

Starting in the 2017-18 school year, the department developed a Collaborative for Student Success, comprised of several members from the Council, district representatives, parent representatives, advocacy agencies, and student representatives. This collaborative is intended to provide feedback on large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/11/2019	Total number of children with IEPs aged 3 through 5	14,592
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/11/2019	a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	3,878
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/11/2019	b1. Number of children attending separate special education class	4,617
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/11/2019	b2. Number of children attending separate school	111
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/11/2019	b3. Number of children attending residential facility	2

FFY 2018 SPP/APR Data

	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	3,878	14,592	24.27%	38.00%	26.58%	Did Not Meet Target	No Slippage
B. Separate special education class, separate school or residential facility	4,730	14,592	33.73%	29.00%	32.42%	Did Not Meet Target	No Slippage

Use a different calculation methodology (yes/no)

NO

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

Provide reasons for slippage for A

Part	Reasons for slippage, if applicable
A	XXX
B	XXX

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

6 - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

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

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

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

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

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

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

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Provide an explanation of why it is not applicable below.

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A1	2009	Target >=	92.70%	92.76%	92.82%	92.88%	92.94%
A1	91.70%	Data	90.17%	90.52%	90.29%	89.09%	90.10%
A2	2009	Target >=	58.00%	58.60%	59.20%	59.80%	60.40%
A2	57.40%	Data	57.84%	59.21%	59.61%	58.07%	58.55%
B1	2009	Target >=	90.50%	90.56%	90.62%	90.68%	90.74%
B1	89.50%	Data	89.21%	89.51%	88.81%	88.75%	88.32%
B2	2009	Target >=	57.00%	57.60%	58.20%	58.80%	59.40%
B2	55.70%	Data	55.60%	57.59%	57.33%	56.24%	55.49%
C1	2009	Target >=	93.60%	93.66%	93.72%	93.70%	93.80%
C1	92.60%	Data	90.63%	91.33%	90.14%	91.14%	90.27%
C2	2009	Target >=	69.00%	69.40%	69.80%	70.20%	70.60%
C2	68.00%	Data	68.13%	69.40%	68.74%	69.40%	68.80%

Targets

FFY	2018	2019
Target A1 >=	93.00%	93.06%
Target A2 >=	60.00%	60.30%
Target B1 >=	89.50%	89.80%
Target B2 >=	57.00%	57.30%
Target C1 >=	93.90%	94.00%
Target C2 >=	69.00%	69.30%

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

Starting in the 2017-18 school year, the department developed a Collaborative for Student Success, comprised of several members from the Council, district representatives, parent representatives, advocacy agencies, and student representatives. This collaborative is intended to provide feedback on large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

FFY 2018 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

6,313

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

	Number of children	Percentage of Children
a. Preschool children who did not improve functioning	50	0.79%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	512	8.09%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,126	33.61%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,528	39.97%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,109	17.53%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	4,654	5,216	90.10%	93.00%	89.23%	Did Not Meet Target	No Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	3,637	6,325	58.55%	60.00%	57.50%	Did Not Meet Target	Slippage

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

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	46	0.73%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	514	8.15%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,295	36.37%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,462	39.02%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	993	15.74%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	4,757	5,317	88.32%	89.50%	89.47%	Did Not Meet Target	No Slippage

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	3,455	6,310	55.49%	57.00%	54.75%	Did Not Meet Target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	51	0.81%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	422	6.69%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,656	26.26%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,668	42.32%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,508	23.92%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.	4,324	4,797	90.27%	93.90%	90.14%	Did Not Meet Target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.	4,176	6,305	68.80%	69.00%	66.23%	Did Not Meet Target	Slippage

Part	Reasons for slippage, if applicable
A1	XXX
A2	Historically, Tennessee A2 data have been in line with the national average. The current data reflects a minimal drop. Training is regularly provided throughout the year to ensure data quality and some fluctuation is expected. As utilization of ECO ratings improves with training, there could be an impact on LEA data as they are perhaps more accurately reflecting the ECO ratings.
B1	XXX
B2	XXX
C1	XXX
C2	Historically, Tennessee C2 data have been in line with the national average. The current data reflects a minimal drop. Training is regularly provided throughout the year to ensure data quality and some fluctuation is expected. As utilization of ECO ratings improves with training, there could be an impact on LEA data as they are perhaps more accurately reflecting the ECO ratings.

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

YES

Please explain why the State did not include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years.

	Yes / No
Was sampling used?	NO
If yes, has your previously-approved sampling plan changed?	
If the plan has changed, please provide sampling plan	

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

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

YES

If no, provide the criteria for defining “comparable to same-aged peers.”

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

To gather the initial data informing the results of this indicator, LEAs use the Child Outcomes Summary Form (COSF) to address performance in each of the three outcomes areas (social-emotional skills, acquisition of knowledge and skills, and use of appropriate behaviors). This form is augmented and supplemented with the use of qualitative data, including information from families and IFSP/IEP team input and/or observations. Quantitative data is also collected to inform the data in this indicator, including data from one or more assessment tool(s) that are norm-referenced, curriculum-based, and criterion-referenced. The department provides support to LEAs regarding the use of these tools and appropriate data collection processes.

Once this information is complete and a rating is selected for one of the three areas assessed in this indicator, LEAs are responsible for inputting the ratings into the statewide IEP data management system (EasyIEP) so that the information can be pulled in various reports for analysis. It is from this data source that the ratings for students are gathered and processed for this indicator. The aggregate level data for all LEAs are input into a state-developed tool that employs various logic checks to clean the data. Logic checks include ensuring that outcomes data is listed for all three areas, that entrance and exit data are tracked, etc. The tool employs the ratings outlined in the COSF to determine growth.

Provide additional information about this indicator (optional)

7 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

7 - OSEP Response

The State revised its targets for FFY 2019 for this indicator, and OSEP accepts the targets.

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

Starting in the 2017-18 school year, the department developed a Collaborative for Student Success, comprised of several members from the Council, district representatives, parent representatives, advocacy agencies, and student representatives. This collaborative is intended to provide feedback on large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

Historical Data

Baseline	2005	92.00%

FFY	2013	2014	2015	2016	2017
Target >=	92.75%	93.00%	93.25%	93.50%	93.75%
Data	90.40%	90.87%	91.00%	90.60%	89.48%

Targets

FFY	2018	2019
Target >=	94.00%	94.25%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
4,277	4,683	89.48%	94.00%	91.33%	Did Not Meet Target	No Slippage

The number of parents to whom the surveys were distributed.

30,936

Percentage of respondent parents

15.14%

Provide reasons for slippage, if applicable

XXX

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

The surveys disseminated for pre-K students are identical to those disseminated to school age students. As well, the surveys collected for pre-K students are analyzed and collated under the same methodology employed for school age students. Thus, the validity and reliability for those in pre-K is identical to those who are school age and allows for continuity across all grade bands to ensure all the information collected is valid, reliable, and cohesive. For this reporting period, survey data was disaggregated by grade level and it was found that surveys were disseminated to: 740 P3 (three year old students in pre-K) students with 161 responses from the family and 1,520 P4 (four year old students in pre-K) students with 337 responses from the family.

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
Preschool	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
Preschool	XXX	Data	XXX	XXX	XXX	XXX	XXX
School age	XXX	Target >=	XXX	XXX	XXX	XXX	XXX
School age	XXX	Data	XXX	XXX	XXX	XXX	XXX

Targets

FFY	2018	2019
Target A >=	XXX	XXX
Target B >=	XXX	XXX

FFY 2018 SPP/APR Data: Preschool Children Reported Separately

	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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
Preschool	XXX	XXX	XXX	XXX	XXX	XXX	XXX
School age	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for slippage, if applicable

XXX

The number of School-Age parents to whom the surveys were distributed.

XXX

Percentage of respondent School-Age parents

XXX

	Yes / No
Was sampling used?	YES
If yes, has your previously-approved sampling plan changed?	NO
If yes, provide sampling plan.	XXX

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

LEAs are sampled based on their locations in the state so that all regions are represented and it is ensured that every four years an LEA will complete the survey. This sampling is done via the National Post-School Outcomes Center (NPSO) Sampling Calculator on a four year sampling cycle. For the three LEAs with 50,000 or more students enrolled, a sampling method is utilized so that the LEA is surveyed each year, but that different schools within the LEA are selected every four years (similar to the process used for sampling smaller LEAs). To sample these three large LEAs, percentages of high schools, middle schools, and elementary schools are determined for each LEA. Then the number of schools in each school level are divided by four (for the four year cycle). Each school is given a unique code to randomize them for selection to remove bias. Once randomized, the number of high schools, middle schools, and elementary schools to be surveyed each year are predicated on the previously determined percentages (or weights) of the aforementioned school types in the LEA.

This sampling methodology ensures that LEAs selected for the survey are representative of the state and the application of the same survey collection process and same question regarding parent involvement certifies that the results of the survey are comparable and will yield valid and reliable estimates across school years. By including all students with disabilities in the sampled LEAs for surveying, there is no opportunity for bias in the students selected for the survey and it can be certain that the makeup of the students with disabilities population is being wholly reflected.

	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	NO
If yes, provide a copy of the survey.	XXX
The demographics of the parents responding are representative of the demographics of children receiving special education services.	NO

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

The department will continue working in the 2019-20 school year to ensure that the population of those surveyed is representative of the population of children receiving special education services in Tennessee. Efforts from the 2018-19 school year to remedy some of the noteworthy over/underrepresentation manifested in the decrease in underrepresentation of responses from families of students with specific learning disabilities (improvement of 0.24% in representativeness) and a reduction of overrepresentation of responses from families with female students (decrease of 1.84% in overrepresentation).

There will be continued efforts to more consistently notify and subsequently remind LEAs selected to disseminate the survey to continue eliciting responses from parents. This will come in the form of emails from ETSU to LEA staff directly. Participating LEAs have also been given suggestions to improve response rate, such as providing the survey at IEP meetings for students to ensure the parents are able to get the survey and respond while in the LEA. In addition, the department is currently working with a contracted parent organization to consider other ways/methods to communicate with families regarding this survey and identify opportunities that may increase responses and participation.

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

During FFY 2018 school year, the Parent Survey (please see the attached "Indicator 8_Parent Survey_TN_1") was administered to all parents of SWDs ages 3 through 21 in 40 LEAs selected through the OSEP-approved sampling process. Tennessee's three largest LEAs participate in this survey each year with different schools, representative of the LEA as a whole, sampled every year. In FFY 2018, a total of 30,936 surveys were distributed to parents. There were 4,779 survey responses with usable data for a response rate of 15.4% (please see the attached "Indicator 8_Response Rates_TN_2" for historical response rate data). Note that this response rate is different from the one in the above data table (response rate calculated was 15.14%). This disparity is due to differences in responses to each question in the survey. Tennessee employs a 21 question survey, and sometimes respondents do not answer all the questions. While item one on the survey addresses parental involvement pertinent to this indicator, responses to this question are sometimes omitted by respondents. The data table above only captures the number of responses to this first question, divided by all the surveys disseminated to get the response rate of 15.14%; however, the response rate of 15.4% reflects the overall percentage of surveys received, including those with missing responses. Item one on the survey queried parents regarding the LEA's facilitation of parent involvement. Of the 4,683 parents responding to item one, 91.33% (4,277 / 4,683) agreed that the LEAs facilitated their involvement as a means of improving services and results for children with disabilities. The department's target of 94.00% was not met.

The department contracts with East Tennessee State University (ETSU) to administer the survey through two different methods. The methods of soliciting parent surveys are described below:

1. Direct email to parents - Parents who have email addresses are directly emailed and provided a URL to take the survey electronically. A letter from the department in both English and Spanish is attached explaining the survey. Alternatively, parents can choose to print, complete and return a hard copy of the survey to ETSU by USPS mail. An email is sent two additional times to remind parents to complete the survey.
2. Mailing of survey packets to special education directors - Special education directors are mailed quantities of paper surveys with the student name, LEA, school, and numeric identifier, with postage paid envelopes and letters to parents explaining the survey in English and Spanish. These are distributed to school principals, who are asked to disseminate the surveys to students to take home to parents. A letter attached to the survey provides parents a URL as an alternate means of survey completion if they do not want to complete the hard copy.

The attached table "Indicator 8_NPSO Representativeness_TN_3" provides summary representativeness data on all FFY 2018 Parent Survey respondents. The calculation, from the National Post-School Outcomes Center (NPSO), compares the respondent pool of parents against the targeted group of parents. This is done to determine whether the respondents represent the entire group of parents that could have responded to the survey. The difference row compares the two proportions (target proportion against respondent proportion) by selected attributes including: child disability, child gender, and child minority race/ethnicity. Cells in the difference row that are greater than +/- 3%, indicate that the respondent group over or underrepresents the entire group of targeted respondents. For this Parent Survey, parents of minority students were underrepresented in the respondent group (-9.89%) as were parents of children with specific learning disabilities (-6.45%). Parents of students from all other (non-listed) disability groups were overrepresented by the respondents (6.39%).

Provide additional information about this indicator (optional)

Although the attached survey example ("Indicator 8_Parent Survey_TN_1") reads "2017 Parent Survey," the questions are identical to those that were asked in Spring 2019.

8 - Prior FFY Required Actions

In the FFY 2018 SPP/APR, the State must report whether its FFY 2018 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

Response to actions required in FFY 2017 SPP/APR

The department will continue working in the 2019-20 school year to ensure that the population of those surveyed is representative of the population of children receiving special education services in Tennessee. Efforts from the 2018-19 school year to remedy some of the noteworthy over/underrepresentation manifested in the decrease in underrepresentation of responses from families of students with specific learning disabilities (improvement of 0.24% in representativeness) and a reduction of overrepresentation of responses from families with female students (decrease of 1.84% in overrepresentation).

The attached table "Indicator 8_NPSO Representativeness_TN_3" provides summary representativeness data on all FFY 2018 Parent Survey respondents. The calculation, from the National Post-School Outcomes Center (NPSO), compares the respondent pool of parents against the targeted group of parents. This is done to determine whether the respondents represent the entire group of parents that could have responded to the survey. The difference row compares the two proportions (target proportion against respondent proportion) by selected attributes including: child disability, child gender, and child minority race/ethnicity. Cells in the difference row that are greater than +/- 3%, indicate that the respondent group over or underrepresents the entire group of targeted respondents. For this Parent Survey, parents of minority students were underrepresented in the respondent group (-9.89%) as were parents of children with specific learning disabilities (-6.45%). Parents of students from all other (non-listed) disability groups were overrepresented by the respondents (6.39%).

8 - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

8 - Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the 618 data for FFY 2018, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2018 reporting period (i.e., after June 30, 2019).

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Provide an explanation of why it is not applicable below.

Historical Data

Baseline	2016	0.00%			
FFY	2013	2014	2015	2016	2017
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2018	2019
Target	0%	0%

FFY 2018 SPP/APR Data

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

YES

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

4

Number of districts with disproportionate representation of racial 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 and/or cell size	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
0	0	142	0.00%	0%	0.00%	Met Target	No Slippage

Provide reasons for slippage, if applicable

XXX

Were all races and ethnicities included in the review?

YES

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

Disproportionate representation is defined as the “extent to which membership in a given group affects the probability of being placed in a specific education category” (Oswald, et al. 1999). It is predicated on the comparison of a subgroup, such as racial/ethnic subgroups, within an LEA to the entire LEA population as a whole. Should an LEA be identifying students for special education services at a greater percentage than the rest of the students in the school population as a whole, and this is supported in their LEA policies, practices, and procedures, then there is disproportionate representation in the form of overrepresentation.

To determine disproportionate representation, the department uses the Westat spreadsheet for calculating both Relative Risk Ratio (RRR) and Weighted Risk Ratio (WRR) based on LEA racial/ethnic data. For FFY 2018, the methodology listed below was used to calculate and examine data to measure disproportionate representation (particularly overrepresentation) in special education.

Calculation Criteria

Each of the seven racial/ethnic student subgroups in every LEA were examined to determine if the LEA’s identification of students receiving special education and related services met all of the following criteria for disproportionate representation:

- a. Both a RRR and a WRR of 3.00 or greater. Note: both RRRs and WRRs were generated for all LEAs based on the number of students receiving special education and related services in each LEA within each of the seven racial/ethnic categories;
- b. Racial/ethnic subgroup enrollment meets the minimum “n” size of 50 students ; and,
- c. Count of students with disabilities meets the minimum “n” size of 45 students.
- d. Count of students with disabilities in a specific racial/ethnic group meets the minimum “n” size of 5 students.

Data Sources

The October 1, 2018 Membership data (from EdFacts file C052) and December 1, 2018 IDEA Child Count data (from the statewide IEP data management system, which populates EdFacts file C002) were used in the disproportionate representation calculations for each of Tennessee’s 146 LEAs.

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

All LEAs meeting the criteria outlined below, which are used to calculate disproportionate representation, are required to complete a self-assessment. A copy of this self-assessment (titled "Indicator 9_10_Self-Assessment_TN_1") has been attached to this page for reference. The director of school psychology services conducts a review of all self-assessments submitted by those LEAs meeting the below disproportionate representation criteria and determines whether LEA policies, procedures, and practices contribute to the disproportionate representation. As the expert in the realm of identification procedures, the director of school psychology services is best equipped to determine, based on data gleaned from LEAs, whether disproportionate overrepresentation was the result of inappropriate identification. Those LEAs that are identified as having inappropriate identification practices will be required to undergo a site visit in which student records will be pulled for review and interviews with key LEA staff will take place. Follow-up strategies to address problematic identification practices are developed as a result of this site visit, and the director of school psychology services maintains contact with identified LEAs throughout the school to monitor progress and improvement.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

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

FFY 2017 Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of PFFY01 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the 618 data for FFY 2018, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2018 reporting period (i.e., after June 30, 2019).

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Provide an explanation of why it is not applicable below

Historical Data

Baseline	2016	2.82%			
FFY	2013	2014	2015	2016	2017
Target	0%	0%	0%	0%	0%
Data	2.21%	2.76%	2.76%	2.82%	5.07%

Targets

FFY	2018	2019
Target	0%	0%

FFY 2018 SPP/APR Data

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

YES

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

8

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 and/or cell size	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
25	4	138	5.07%	0%	2.90%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

XXX

Were all races and ethnicities included in the review?

YES

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

Disproportionate representation is defined as the "extent to which membership in a given group affects the probability of being placed in a specific education category" (Oswald, et al. 1999). Disproportionate representation is predicated on the comparison of a subgroup, such as race/ethnicity, within an LEA to the entire LEA population as a whole. Should an LEA be identifying students for special education services in a subgroup at a greater percentage than the students in the school population as a whole, and this is supported in their LEA policies, practices, and procedures, then there is disproportionate representation in the form of overrepresentation.

To determine disproportionate representation, the department uses the Westat spreadsheet for calculating both Relative Risk Ratio (RRR) and Weighted Risk Ratio (WRR) based on LEA race/ethnicity data. For FFY 2018, the methodology listed below was used to calculate and examine data to measure disproportionate representation (particularly overrepresentation) in special education.

Calculation Criteria: Each of the seven race/ethnicity student subgroups in every LEA were examined to determine if the LEA's identification of students receiving special education and related services in six high-incidence disability categories met all of the following criteria for disproportionate representation:

- a. Both a RRR and a WRR of 3.00 or higher. Note: both RRRs and WRRs were generated for all LEAs based on the number of students receiving special education and related services in each LEA within each of the seven racial/ethnic categories; and,
- b. Racial/ethnic subgroup enrollment meets the minimum "n" size of 50 students; and,
- c. Count of students with disabilities in the specific disability category meets the minimum "n" size of 20 students; and,
- d. Count of students with disabilities in a specific racial/ethnic group meets the minimum "n" size of 5 students.

Data Sources

The October 1, 2018 Membership data (from EdFacts file C052) and December 1, 2018 IDEA Child Count data (from the statewide IEP data management system, which populates EdFacts file C002) were used in the disproportionate representation calculations for each of Tennessee's 146 LEAs. Those LEAs found disproportionate were required to complete a self-assessment and determine if policies, procedures, and or practices resulted in inappropriate identification.

Describe how the State made its annual determination as to whether the disproportionate overrepresentation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

All LEAs meeting the criteria outlined in the "definition" section, which are used to calculate disproportionate representation, are required to complete a self-assessment. A copy of this self-assessment (titled "Indicator 9_10_Self-Assessment_TN_1") has been attached to this page for reference. The director of school psychology services conducts a review of all self-assessments submitted by those LEAs meeting the below disproportionate representation criteria and determines whether LEA policies, procedures, and practices contribute to the disproportionate representation. As the expert in the realm of identification procedures, the director of school psychology services is best equipped to determine, based on data gleaned from LEAs, whether disproportionate overrepresentation was the result of inappropriate identification. Those LEAs that are identified as having inappropriate identification practices will be required to undergo a site visit in which student records will be pulled for review and interviews with key LEA staff will take place. Follow-up strategies to address problematic identification practices are developed as a result of this site visit, and the director of school psychology services maintains contact with identified LEAs throughout the school to monitor progress and improvement.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	7	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

Prong 2:

The seven LEAs identified with disproportionate representation, based on self-assessments submitted to the department in FFY 2017, were required to undergo site visits the subsequent school year. The director of school psychology services led these visits and conducted interviews with LEA administrative staff regarding the LEA's policies and procedures. Questions were asked about how LEA practices might relate to the identified disproportionate representation and based on the information gleaned from these discussions, the director of school psychology services identified areas in which practices should be improved to ensure the disproportionate representation identified was not a manifestation of inappropriate policies, procedures, and practices.

In addition to meetings with LEA administrative staff, schools were visited within the LEA and staff and documents were observed to see the policies, procedures, and practices in action. The director of school psychology services also pulled a sampling of student eligibility documents and IEPs to assess how they were written and determine if the documents reflected inappropriate policies, procedures, and practices employed in the LEA. This review process was used to get an overall perspective of persistent themes and concerns in the eligibility documentation.

All information gleaned from these site visits was provided to LEA staff via written communication subsequent to the site visits. The seven LEAs were required to develop action plans based on these site visits and had to periodically submit evidence of activities completed throughout the 2018-19 SY to address findings of potential contributing factors to disproportionate representation. Department staff continuously provided technical assistance as necessary to the seven LEAs, giving them priority at relevant trainings and offering professional development opportunities tailored to the LEAs. All LEAs also completed any required trainings with their district staff to ensure knowledge and understanding of compliant policies, practices, and procedures.

Of all the file reviews conducted and information collected through sight visits for the seven LEAs identified with disproportionate representation in FFY 2017, individual student file noncompliance with practices possibly leading to disproportionate identification was found in three of the LEAs (additional information about individual instances of noncompliance outlined below). For these three LEAs, the director of school psychology services and the corresponding regional IDEA specialist reviewed additional eligibility documents, subsequent to corrections of instances of noncompliance, for other students in the same identified areas, to confirm that the correct regulatory practices were being followed regarding appropriate identification of students with disabilities. The randomly sampled files reviewed after notifications and corrections of noncompliance in these three LEAs revealed that the identified areas of noncompliance in previous student files had been addressed and were in compliance. Additionally, the results of the 2019-2020 SY LEA self-monitoring process were reviewed by state monitors to assess outcomes for LEAs identified as noncompliant in FFY 2017. Findings indicated initial evaluation reports that were submitted for each of the seven districts met required standards for all evaluations reviewed; therefore, all districts demonstrated compliance in this area and no concerns were noted.

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

Prong 1:

As outlined in the section above, the director of school psychology services conducted site visits and student file reviews in the seven LEAs identified with disproportionate representation. As a result of these file reviews, three LEAs were identified as having noncompliant records that may have led to disproportionate representation. The first LEA had a limited assessment library which could have resulted in evaluation results that did not accurately represent the student's functioning (i.e., they did not have a nonverbal measure of cognitive ability to help mitigate communication deficits when evaluating for intellectual disability); therefore, it was unclear if student-specific evaluations had valid results. The second and third district had incomplete evaluations and did not include required assessment components.

Using the statewide IEP data management system employed by all LEAs in Tennessee and correspondence via email with these two LEAs, SEA staff were able to review the files with noncompliance. The first district was required to purchase a nonverbal assessment in order expand the assessment library for their assessment specialists. They reported the purchase in August 2019. IEP meetings were held to address the team concerns regarding current certification. One reevaluation was completed as a result. The second and third district were required to hold reevaluation meetings for students with missing evaluation components as part of the students' comprehensive evaluation. Updated evaluation reports were completed as part of reevaluations. It was confirmed by the SEA staff that the noncompliant files were addressed and corrected as appropriate.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of PFFY01 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

10 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

10 - OSEP Response

Because the State reported less than 100% compliance for FFY 2018 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. The State must demonstrate, in the FFY 2019 SPP/APR, that the four districts identified in FFY 2018 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification [is/are] in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2019 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 2018, although its FFY 2018 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

10 - Required Actions

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

11 - Indicator Data

Historical Data

Baseline	2005	89.00%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	94.60%	94.81%	95.16%	95.24%	94.28%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
31,100	29,508	94.28%	100%	94.88%	Did Not Meet Target	No Slippage

Provide reasons for slippage

XXX

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

1,592

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

In Tennessee, an LEA is considered to be compliant if the evaluation is completed within 60 calendar days from the date the LEA received written consent for an initial evaluation. TN uses a student's final eligibility determination, which is recorded in the statewide IEP data management system (EasyIEP), to mark the end of the evaluation process. Of the 31,100 students for whom parent consent to evaluate was granted in FFY 2018, 1,592 students did not have their evaluations completed within the 60 calendar day timeline. These 1,592 students did not have an approved timeline extension request OR they exceeded the timeline agreed upon in the timeline extension request OR they did not complete any timeline extension request and the evaluation exceeded the 60 calendar day timeline.

LEAs can request timeline extensions for three approved reasons, and this request is submitted through the statewide IEP data management system (EasyIEP). The director of school psychology services reviews and approves or denies these requests. If the requests are approved and evaluations are completed within the approved timeframe delineated in the extension request, these students are not considered out of compliance. However, in instances in which extension requests are approved and the evaluation not completed in the agreed upon timeframe, or the requests are denied by the director of school psychology services, these students are considered out of compliance. The three approved timeline extension reasons are:

1. More time is needed in order to collect adequate response to intervention (RTI) data for the purpose of determining the presence of a specific learning disability as referenced in 34 CFR 300.309(c). This requires a mutual written agreement between the child's parent and a group of qualified professionals (as described in 34 CFR 300.306(a)(1));
2. The parent repeatedly failed or refused to produce the child for the evaluation;
3. The child transferred from the district that obtained consent prior to a completed evaluation and the receiving district has made progress toward completing the evaluation.

In FFY 2018, 40 of the 1,592 students exited after the 60 calendar day timeline due to withdrawal of parental consent, transferring to general education (by virtue of not qualifying for special education), or graduating. The remaining 1,552 noncompliant students had evaluations completed outside of the 60 calendar timeline and did not have extension requests completed OR had extension requests approved but the evaluation was not completed within the agreed upon timeline. The number of days beyond the established timeline ranged from one to 300 days.

Three out of the 1,592 students whose evaluations were noncompliant still did not have evaluations completed as of January 2020. These students' LEAs will be contacted by the director of data services (Prong 1) to resolve outstanding evaluations.

When LEAs complete evaluations after the 60 calendar timeline, they are required in the EasyIEP system to provide a reason why. The list of reasons are:

1. Limited access to professional staff (e.g., staff shortages, staff illness, in-service trainings, vacancies, holiday schedules, etc.)
2. Student or family language caused delays in testing/meeting (including need for interpreter)
3. Student transferred to another district
4. Student transferred within district
5. Waiting on specialist(s) (reports, second assessment, observation data, review, medical data, etc.)
6. Excessive student absences resulted in rescheduling of assessment(s)
7. Parent did not show for scheduled meeting. Or parent cancelled scheduled meeting too late—no time to reschedule within 60 calendar days. Or parent requested to schedule meeting outside of timeline
8. Student/parent serious medical issues (e.g., hospitalization, surgery recuperation) required postponement and/or rescheduling.
9. Repeated attempts to contact parents failed (minimum 3 unsuccessful mailings plus repeated phone calls).
10. Other (not listed above)

*Rather than being excluded from the compliance calculations, those students with acceptable reasons for delay who had evaluations completed within the approved timeframe are included in both the numerator and denominator the compliance percentage calculation detailed above.

Indicate the evaluation timeline used:

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

What is the State's timeline for initial evaluations? If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in (b).

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

State database that includes data for the entire reporting year

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

The department collected data on initial consents for evaluations for all students with signed consent forms during FFY 2018 (July 1, 2018 – June 30, 2019). Data were collected through the statewide IEP data management system for all of Tennessee's 146 LEAs. FFY 2018 was the tenth year these student-level data were collected through this data management system. The student-level data obtained through EasyIEP include:

- Student name and basic demographics
- LEA information
- Date of initial consent for eligibility determination
- Date of eligibility determination
- Eligibility determination (eligible or ineligible)
- Days from date of initial parent consent to date of eligibility determination
- LEA in which initial consent was signed

Where applicable, the following were also collected:

- Number of days over the 60 calendar day timeline
- Reasons for the delay
- Whether timeline extension request and made and whether it was approved
- Eligible disability category
- Exit date and reason
- District where consent was received

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
1,705	1,694	11	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

Prong 2

For those LEAs with 1 or more of the 1,705 late student evaluations during FFY 2017, the department staff conducted data pulls of parental permissions signed in FFY 2017 to determine 100% compliance once the individual instances of previously identified noncompliance were corrected. To determine if these LEAs were correctly implementing the regulatory requirements, the department looked at additional initial referrals from each of these LEAs. For LEAs with less than 500 initial referrals for evaluation in FFY 2017, the department required them to demonstrate 100% compliance for initial evaluations for a minimum of 30 consecutive days in FFY 2018. For LEAs with more than 500 initial referrals for evaluation in FFY 2017, the department required them to demonstrate 100% compliance for initial evaluation determinations for a minimum of 10 consecutive days in FFY 2018. After the department verified that the LEA was 100% compliant for at least a 30 day or 10 day time period and that all student-level noncompliance from FFY 2017 had been corrected (Prong 1), the finding was closed.

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

Prong 1

The statewide IEP data management system (EasyIEP) is used to collect the data necessary to determine timely evaluation. This system was also used to follow-up on all instances of FFY 2017 student-level noncompliance instances when the evaluation exceeded established timelines. The department initially provided the LEAs with instances of noncompliance a listing of their FFY 2017 students for whom the initial evaluation was late and still open. These LEAs were required to research individual students and update EasyIEP if the evaluation had been completed (with the corresponding reason for delay). In the case of students whose evaluations were still pending, LEAs were required to complete the evaluation as soon as possible. By assessing all LEAs' instances of noncompliance on a case by case basis, the department was able to ensure that all noncompliance was addressed. The response from LEAs and their completion of requisite documentation afforded the department the opportunity to ascertain that LEAs with noncompliance were correctly implementing regulatory requirements. In all 1,705 instances, the evaluation or correction of other issues (e.g., mistakenly entered consent form, mistyping of date, etc.) was completed for children whose initial evaluation was not timely.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of PFFY01 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

11 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

11 - OSEP Response

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

11 - Required Actions

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

- # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
- # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
- # of those found eligible who have an IEP developed and implemented by their third birthdays.
- # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
- # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.
- # of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.

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

Percent = [(c) divided by (a - b - d - e - f)] times 100.

Instructions

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

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Provide an explanation of why it is not applicable below.

Historical Data

Baseline	2005	99.00%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	98.53%	97.53%	97.53%	99.06%	96.37%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	5,266
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	668
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,234

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.	1,867
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	425
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	2,234	2,306	96.37%	100%	96.88%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

XXX

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

72

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

There were 72 children who were served in Part C and referred to Part B for eligibility determination who did not have eligibility determined by their third birthdays or did not have an IEP developed and implemented by their third birthdays. Of the 72 children, 72 had documentation and/or eligibility information completed by Feb. 1, 2020. The range of days beyond the third birthday until eligibility was determined or an IEP was developed and implemented for these 72 children was one day to 89 days. Reasons for delays included: parent preferred schedules, inclement weather, late referrals from Part C, and school system staff training issues related to early childhood transition policies and procedures.

Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

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

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
81	81	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

Prong 2:

Training and technical assistance on the policies and procedures for early childhood transition were provided as a presentation to each LEA with a finding of noncompliance. Regional 619 preschool consultants provided training and submitted verification of LEA personnel attending the presentation to the 619 preschool coordinator. Sign-in sheets for LEA personnel taking part in the training were submitted to the 619 preschool coordinator.

In addition, the department conducted a subsequent review of additional data to determine that all LEAs with noncompliance for FFY 2017 were subsequently correctly implementing 34 CFR 300.124(b). Data were pulled routinely from the Part C TEIDS system and the Part B statewide IEP data management system and analyzed to see if identified LEAs showed any children who had untimely IEPs. Department staff found no noncompliance and it was determined these LEAs were correctly implementing regulatory requirements.

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

Prong 1:

The department verified that each LEA with noncompliance for FFY 2017 developed and implemented the IEP, although late, for all 81 children for whom implementation of the IEP was untimely. The data from the Part B EasyIEP system identified the date in which the IEP was developed or a noneligibility was determined. This information was reviewed and verified by the department's IDEA 619 coordinator and 619 consultants.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of PFFY01 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

12 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

12 - OSEP Response

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

12 - Required Actions

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

13 - Indicator Data

Historical Data

Baseline	2009	50.03%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	100.00%	73.68%	71.84%	72.52%	74.03%

Targets

FFY	2018	2019
Target	100%	100%

FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
56	86	74.03%	100%	65.12%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

For FFY 2018, 22 LEAs participated in a pilot of the IEP self-monitoring platform embedded in the statewide data management system (EasyIEP). Participation in the pilot was voluntary; therefore, the demographic composition of districts providing student IEP data as well as the number of students with secondary transition goals available for review may have varied from prior years. This change in the selection process (i.e., self-selection rather than the SEA selecting LEAs) may have contributed 8.91% decrease in IEPs that contain each of the required components for secondary transition.

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

State monitoring

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

For FFY 2018, staff from the office of federal programs and oversight (FPO) completed the monitoring requirements of this indicator. Analyses of student documents/records were done via an IEP self-monitoring platform embedded in the statewide IEP data management system (EasyIEP), where individual student documents can be reviewed for completion and accuracy. LEAs were required to complete thorough evaluations of their students' documents and evaluate the compliance elements for Indicator 13. Subsequent to this self-review done by LEAs, staff from FPO and the office of special populations completed a secondary review. Once department staff completed the reviews, LEAs were notified and required to address areas identified with noncompliance. Please see attached table "Indicator 13_Combpliance_TN_1" for a breakdown of the data.

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

If no, please explain

Tennessee State Board of Education rule 0520-01-09-.12 requires that prior to 9th grade or age 14, the Individualized Education Program (IEP) for students with disabilities must include information on an initial four-year plan of study and identify possible transition service needs. However, not all of the components required for Indicator 13 must be addressed at that time. Therefore, the data used for Indicator 13 is collected only for students age 16 or above who are required to have all of the components of Indicator 13 completed.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2017

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
20	20	0	0

FFY 2017 Findings of Noncompliance Verified as Corrected

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

Prong 2

The 20 findings of noncompliance outlined for Indicator 13 in FFY 2017 were corrected within the FFY 2018 school year. Corrective Action Plans (CAPs) were developed for each individual incidence of noncompliance, and LEAs were required to demonstrate corrected, compliant records (see information below in Prong 1 section). Upon completion of these corrections (required to be completed within 365 days), the department conducted a random sampling of student records with secondary transition plans in the LEAs with one or more findings of noncompliance to determine whether the specific areas of noncompliance identified in the original monitoring file reviews were evident in subsequently completed student documents. Upon completion of this second round of file reviews, it was found that all reviewed records randomly reviewed were in compliance, and the LEA was correctly implementing the appropriate regulatory requirements for this indicator.

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

Prong 1

The 20 findings of noncompliance outlined for Indicator 13 in FFY 2017 were corrected within the FFY 2018 school year. Corrective Action Plans (CAPs) were developed for each individual incidence of noncompliance, and the LEAs with one or more of the 20 instances of noncompliance were required to correct the records with noncompliance within 365 days. These corrected documents were subject to review by state monitors. It was confirmed through this subsequent monitoring of the updated records that the documents were now compliant and meeting monitoring criteria within the requisite 365 day timeline. Upon state verification and approval of these corrected records, LEAs with previous noncompliance again had records reviewed, as outlined above in the description of Prong 2.

FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Correction of Findings of Noncompliance Identified Prior to FFY 2017

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of PFFY01 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

Findings of Noncompliance Verified as Corrected

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

XXX

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

XXX

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

XXX

13 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

13 - OSEP Response

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

13 - Required Actions

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

Collect data by September 2019 on students who left school during 2017-2018, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2017-2018 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. Definitions

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

Competitive employment as used in measures B and C: States have two options to report data under “competitive employment” in the FFY 2018 SPP/APR, due February 2020:

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

Option 2: States report in alignment with the term “competitive integrated employment” and its definition, in section 7(5) of the Rehabilitation Act, as amended by Workforce Innovation and Opportunity Act (WIOA), and 34 CFR §361.5(c)(9). For the purpose of defining the rate of compensation for students working on a “part-time basis” under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

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

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

II. Data Reporting

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

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

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

III. Reporting on the Measures/Indicators

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

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

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

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

Include the State's analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States should consider categories such as race and ethnicity, disability category, and geographic location in the State.

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

14 - Indicator Data

Historical Data

	Baseline	FFY	2013	2014	2015	2016	2017
A	2009	Target >=	23.50%	23.75%	24.00%	24.25%	24.50%
A	22.00%	Data	21.27%	22.10%	33.93%	21.17%	26.11%
B	2009	Target >=	58.50%	59.00%	59.50%	60.00%	60.50%
B	57.00%	Data	55.59%	58.22%	64.43%	54.60%	61.08%
C	2009	Target >=	68.00%	68.75%	69.50%	70.25%	71.00%
C	65.00%	Data	67.70%	69.26%	73.32%	64.62%	71.13%

FFY 2018 Targets

FFY	2018	2019
Target A >=	26.00%	26.50%
Target B >=	61.00%	62.00%
Target C >=	71.00%	72.50%

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

Additional stakeholders are routinely engaged as well for input on the SPP/APR. Special education supervisors from LEAs across the state are asked for input and contributions at regional special education director conferences. At these conferences, data from the APR and how local determinations are made are annually shared and input is solicited. Based on recommendations, changes might be made to the way in which "n" sizes are determined for particular indicators, the way local determinations are made, the weighting and prioritization of indicators, and the targets set for the SPP/APR. Additionally, representatives of agencies serving individuals with disabilities and their families, such as legal and advocacy groups like Disability Rights Tennessee (DRT) and parent training and information centers like Support and Training for Exceptional Parents (TN STEP) are also engaged.

Starting in the 2017-18 school year, the department developed a Collaborative for Student Success, comprised of several members from the Council, district representatives, parent representatives, advocacy agencies, and student representatives. This collaborative is intended to provide feedback on large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

FFY 2018 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	946
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	208
2. Number of respondent youth who competitively employed within one year of leaving high school	107
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	98
4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	293

	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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A. Enrolled in higher education (1)	208	946	26.11%	26.00%	21.99%	Did Not Meet Target	Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	315	946	61.08%	61.00%	33.30%	Did Not Meet Target	Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	706	946	71.13%	71.00%	74.63%	Met Target	No Slippage

Part	Reasons for slippage, if applicable
A	Given the sampling methodology outlined below for this indicator, in which LEAs must conduct student surveys on a four year cycle, it is difficult to do a true comparison of data from year-to-year. While the department holds the same high standards for all LEAs with regard to this post-school outcomes data, the data from the FFY 2017 APR are not completely comparable to the FFY 2018 data, given that the LEAs and schools are different between the two years. In light of this, a more comparable data source would be the data reported from the FFY 2014 APR, which had the same LEAs and schools included as in the FFY 2018 reporting period. The same format for capturing this information was employed in both FFY 2014 and FFY 2018, which enhances the reliability of the data, and when comparing the FFY 2014 data to the FFY 2018 data, there was only a 0.11% decrease in students reporting that they were enrolled in higher education within one year of exiting high school. Thus, while there was slippage from FFY 2017 to FFY 2018, there was only a slight decrease in improvement in FFY 2018 based on the same cohort of LEAs and schools surveyed in FFY 2014.
B	As aforementioned in the rationale for slippage in part A, given the sampling methodology outlined below for this indicator, it is difficult to do a true comparison of data from year-to-year. While the department holds the same high standards for all LEAs with regard to this post-school outcomes data, the data from the FFY 2017 APR are not completely comparable to the FFY 2018 data, given that the LEAs and schools are different between the two years. In light of this, a more comparable data source would be the data reported from the FFY 2014 APR, which had the same LEAs and schools included as in the FFY 2014 reporting period. The same format for capturing this information was employed in both FFY 2014 and FFY 2018, which enhances the reliability of the data, and when comparing the FFY 2014 data to the FFY 2018 data, there was a 24.92% decrease (as opposed to a 27.78% decrease from FFY 2017 to FFY 2018) in students reporting that they were enrolled in higher education or were competitively employed within one year of exiting high school. Thus, while there was slippage from FFY 2017 to FFY 2018, it was slightly less drastic in FFY 2018 based on the same cohort of LEAs and schools surveyed in FFY 2014. The change in part B across the 4-year cohort represents a change in the type of engagement opportunities afforded to students with disabilities. While competitive employment decreased by 24.81% for this cohort, other postsecondary education and training/other

Part	Reasons for slippage, if applicable
	employment increased by 30.29%. As overall engagement increased by more than 5%, the shift in the type of engagement may be attributable to a marked increase in postsecondary training and education opportunities in Tennessee over time.
C	XXX

Please select the reporting option your State is using:

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

	Yes / No
Was sampling used?	YES
If yes, has your previously-approved sampling plan changed?	NO
If yes, provide sampling plan.	XXX

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

The LEAs are sampled based on their locations in the state so that all regions are represented and it is ensured that every four years an LEA will complete the survey. This sampling is done via the National Post-School Outcomes Center (NPSO) Sampling Calculator on a four year sampling cycle. To ensure there is no potential bias or misrepresentation that can sometimes arise from student sampling, all students with disabilities within each selected LEA who exited school by (a) graduating with a regular diploma, (b) graduating with a special education diploma/certificate, (c) aging out of high school, or (d) dropping out are surveyed. For the three LEAs with 50,000 or more students enrolled, a sampling method is utilized so that the LEA is surveyed each year, but that different schools within the LEA are selected every four years (similar to the process used for sampling smaller LEAs). To sample these three large LEAs, percentages of high schools and middle schools are determined for each LEA. Then the number of schools in each school type category is divided by four (for the four year cycle). Each school is given a unique code to randomize them for selection to remove bias. Once randomized, the number of high schools and middle schools to be surveyed each year are predicated on the previously determined percentages (or weights) of the aforementioned school types in the district.

This sampling methodology ensures that LEAs selected for the survey are representative of the state and the application of the same survey collection process and same questions regarding post-school outcomes certifies that the results of the survey are comparable and will yield valid and reliable estimates. By including all students in the sampled LEAs, there is no opportunity for bias in the students selected for the survey and it can be certain that the makeup of the SWDs population is being wholly reflected.

The department contracts with Eastern Tennessee State University (ETSU) to disseminate, collect, and collate survey results. To complete the survey LEA staff contact students who exited by telephone. The LEA staff use an online secure website to enter the data collected through the telephone surveys. The web survey data are housed at ETSU and data are automatically compiled for analysis and reporting by ETSU to the department.

	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	NO
If yes, attach a copy of the survey	XXX

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

The attached table ("Indicator 14_NPSO Representativeness_TN_1") provides a summary of representativeness data on all FFY 2018 post-school survey respondents. The calculation, from the National Post-School Outcomes Center (NPSO), compares the respondent pool of students against the targeted group of students. This is done to determine whether the respondents represent the entire group of exited students that could have responded to the survey. The difference row compares the two proportions (target proportion against respondent proportion) by selected attributes including: child disability, child gender, child minority race/ethnicity, English learner status, and whether the student was a dropout. Cells in the difference row that are greater than +/- 3%, indicate that the respondent group over or underrepresents the entire group of targeted respondents. For this post-school outcomes survey, the demographics were mostly representative; however, minority students were slightly underrepresented in the respondent group (-5.49%). See respondent disaggregated data in the attached table "Indicator 14_NPSO Representativeness_TN_1."

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

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

While most of the demographics of the survey respondents are representative of the overall cohort of students pulled in this sampling, there were two groups - students of minority racial/ethnic groups and students dropping out - who were not completely representative. The lack of representativeness in the responses can be contributed to numerous factors, one of the most notable being not having the most accurate and current contact information for students/families. Absent current contact information, LEAs are unable to make contact with exited students. The department has continued to encourage LEAs to update all contact information for students whenever received, even if they are exiting the LEA at some point in the duration of the school year. Contact information for both students and families can be captured in LEA student information systems. To streamline the availability of this data for special educators, the department has this student and family contact information transfer from student information systems into the statewide IEP data management system (EasyIEP) nightly. Once in the system, users can augment, delete, add, and update the contact information as appropriate, and this data will remain linked to the appropriate student record. Continued housing of the contact information in a central location that special education staff can access will ideally help keep contact information current. The department provides this service of importing contact information free of charge to LEAs and makes them aware of this process/service multiple times through written and verbal communication/trainings.

The work done by the department in recent years to have contact information readily available in the state EasyIEP system, as well as the diligent efforts

of the director of support services for school readiness to send updates, reminders, and suggested contact methods to LEAs required to participate in this indicator's survey (see attachment "Indicator 14_2019 Tennessee Postsecondary Survey_TN_2"), has and will continue to support higher response rates for this indicator. Improving the response rate for the indicator is yet another way to improve the representativeness of the respondents. The response rate for this indicator has steadily increased over the last three years, and although there was a slight dropoff from FFY 2017 to FFY 2018 (56.67% to 48.36%), Tennessee continues to focus on increasing this number. The department anticipates that as the response continues to climb, gaps in representation will continue to be attenuated.

Provide additional information about this indicator (optional)

14 - Prior FFY Required Actions

In the FFY 2018 SPP/APR, the State must report whether the FFY 2018 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Response to actions required in FFY 2017 SPP/APR

After an increase in underrepresentation for minority students (-2.18 from FFY 2017), the department will continue working in the 2019-20 school year to ensure that the population of those surveyed is representative of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

While most of the demographics of the survey respondents are representative of the overall cohort of students pulled in this sampling, there were two groups - students of minority racial/ethnic groups and students dropping out - who were not completely representative. The lack of representativeness in the responses can be contributed to numerous factors, one of the most notable being not having the most accurate and current contact information for students/families. Absent current contact information, LEAs are unable to make contact with exited students. The department has continued to encourage LEAs to update all contact information for students whenever received, even if they are exiting the LEA at some point in the duration of the school year. Contact information for both students and families can be captured in LEA student information systems. To streamline the availability of this data for special educators, the department has this student and family contact information transfer from student information systems into the statewide IEP data management system (EasyIEP) nightly. Once in the system, users can augment, delete, add, and update the contact information as appropriate, and this data will remain linked to the appropriate student record. Continued housing of the contact information in a central location that special education staff can access will ideally help keep contact information current. The department provides this service of importing contact information free of charge to LEAs and makes them aware of this process/service multiple times through written and verbal communication/trainings.

14 - OSEP Response

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

14 - Required Actions

In the FFY 2019 SPP/APR, the State must report whether the FFY 2019 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results Indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. (20 U.S.C. 1416(a)(3)(B))

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the ED Facts Metadata and Process System (EMAPS)).

Measurement

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

Instructions

Sampling is not allowed.

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

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline, targets and improvement activities, and report on them in the corresponding SPP/APR. States may express their targets in a range (e.g., 75-85%).

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

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

15 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1 Number of resolution sessions	55
SY 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1(a) Number resolution sessions resolved through settlement agreements	26

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

NO

Provide an explanation below.

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

The Council is also presented information on the targets set for specified indicators in the SPP/APR whenever they are changed or updated (except for indicators that are calculated through accountability processes and compliance indicators). When targets were required to be set for FFY 2018 - FFY 2024, feedback from the Council was solicited during a dedicated presentation. Information on the tentative targets was shared with Council members with rationale of how the data was gathered, why it was chosen, and whether they thought there might be more viable data to consider. Information gleaned from this session was then used when setting the final targets. Tennessee works to ensure that the Council is as informed as possible about anything relative to the SPP/APR as they capture a powerful and crucial snapshot of the stakeholder community.

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topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

Historical Data

Baseline	2005	50.00%			
FFY	2013	2014	2015	2016	2017
Target >=	9.00%	10.00%	11.00%	12.00%	13.00%
Data	75.00%	54.17%	65.12%	69.23%	66.67%

Targets

FFY	2018	2019
Target >=	14.00%	15.00%

FFY 2018 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
26	55	66.67%	14.00%	47.27%	Met Target	No Slippage

Targets

FFY	2018 (low)	2018 (high)	2019 (low)	2019 (high)
Target	XXX	XXX	XXX	XXX

FFY 2018 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2017 Data	FFY 2018 Target (low)	FFY 2018 Target (high)	FFY 2018 Data	Status	Slippage
XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for slippage, if applicable

XXX

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

15 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the ED Facts Metadata and Process System (EMAPS)).

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

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

16 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1 Mediations held	17
SY 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.a.i Mediations agreements related to due process complaints	9
SY 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.b.i Mediations agreements not related to due process complaints	3

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

NO

Provide an explanation below

Targets: Description of Stakeholder Input

In developing the SPP/APR, the department solicits input from the governor's Students with Disabilities Advisory Council through quarterly meetings, presentations of data, and guided question and answer sessions. Stakeholders represented via the Council include: individuals with disabilities; parents of children with disabilities; representatives of LEAs; and representatives of institutes of higher education, correctional facilities, charter schools, and private agencies. In addition to Council members, there are several advocacy agencies that attend the meetings and provide input and feedback. The department routinely presents at quarterly Council meetings on the APR and local determinations processes. Such presentations offer stakeholders the opportunity to learn more about the data collected in the APR, its relevance to performance of SWDs, and how the information in the APR is disseminated to LEAs. Additionally, there is an opportunity for feedback on how the data is shared and communicated.

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large-scale proposed updates, changes, regulations, and so forth, with meetings taking place three to four times throughout a school year, based on topics. This collaborative is yet another vehicle by which to solicit invaluable stakeholder feedback and further augment the information provided by all the other aforementioned stakeholders.

Historical Data

Baseline	2005	56.00%			
FFY	2013	2014	2015	2016	2017
Target >=	70.00%	71.00%	72.00%	73.00%	74.00%
Data	87.50%	82.35%	77.27%	31.25%	53.85%

Targets

FFY	2018	2019
Target >=	75.00%	76.00%

FFY 2018 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
9	3	17	53.85%	75.00%	70.59%	Did Not Meet Target	No Slippage

Targets

FFY	2018 (low)	2018 (high)	2019 (low)	2019 (high)
Target	XXX	XXX	XXX	XXX

FFY 2018 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2017 Data	FFY 2018 Target (low)	FFY 2018 Target (high)	FFY 2018 Data	Status	Slippage
XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for slippage, if applicable

XXX

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

Response to actions required in FFY 2017 SPP/APR

16 - OSEP Response

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

16 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role:

Designated by the Chief State School Officer to certify

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

Name:

Zachary Stone

Title:

Director of Data Services, Division of Special Populations

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(615) 532-9702

Submitted on: