

TN Part B

FFY2016 State Performance Plan / Annual Performance Report

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Introduction to the State Performance Plan (SPP)/Annual Performance Report (APR)

The State Performance Plan (SPP)/Annual Performance Report (APR) documents and evaluates state implementation of special education on an annual basis. Every state is required to develop a plan describing how improvements will be made to special education programs, how special education programs will be assessed, and the targets for the 17 indicators of performance. These indicators focus on information specific to students with disabilities (SWDs) and can be either compliance-based or results-based. A summary of each indicator, the results from FFY 2015, the results for FFY 2016, and the targets set for FFY 2016 have been provided in the table below.

Indicators	FFY 2015 Data	FFY 2016 Data	FFY 2016 Target	Target Met?
Indicator 1: Graduation Rate for SWDs	69.99%	71.79%	71.87%	N
Indicator 2: Dropout Rate for SWDs	5.26%	2.46%	3.27%	Y
Indicator 3B: Assessments: Participation for SWDs	*NA	Reading: 97.68% Math: 97.99%	Reading: 95.00% Math: 95.00%	Reading: Y Math: Y
Indicator 3C: Assessments: Proficiency for SWDs	*NA	Reading: 10.90% Math: 13.33%	Reading: **NA Math: **NA	Reading: **NA Math: **NA
Indicator 4A: Suspension/Expulsion Rate for SWDs (% of LEAs with significant discrepancy)	22.22%	8.00%	2.00%	N
Indicator 4B: Suspension/Expulsion Rate for SWDs by Race/Ethnicity (% of LEAs with significant discrepancy)	0%	0%	0%	Y
Indicator 5: Educational Environments (Ages 6-21)	Sections: A: 70.46% B: 11.11% C: 1.78%	Sections: A: 70.16% B: 11.48% C: 1.79%	Sections: A: 71.50% B: 11.20% C: 1.40%	Sections: A: N B: N C: N
Indicator 6: Educational Environments (Ages 3-5)	Sections: A: 24.09% B: 35.71%	Sections: A: 24.17% B: 34.14%	Sections: A: 32.00% B: 29.00%	Sections: A: N B: N
Indicator 7: Early Childhood Outcomes (Ages 3-5)	Sections: A1: 90.29% A2: 59.61% B1: 88.81% B2: 57.33% C1: 90.14% C2: 68.74%	Sections: A1: 89.09% A2: 58.07% B1: 88.75% B2: 56.24% C1: 91.14% C2: 69.40%	Sections: A1: 92.88% A2: 59.80% B1: 90.68% B2: 58.80% C1: 93.70% C2: 70.20%	Sections: A1: N A2: N B1: N B2: N C1: N C2: N

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Indicator 8: Parent Involvement	91.00%	90.60%	93.50%	N
Indicator 9: Disproportionate Representation (all disabilities)	0%	0%	0%	Y
Indicator 10: Disproportionate Representation (high-incidence disabilities)	2.76%	2.76%	0%	N
Indicator 11: Child Find	95.16%	95.24%	100%	N
Indicator 12: Early Childhood Transition	97.53%	99.06%	100%	N
Indicator 13: Secondary Transition	71.84%	72.52%	100%	N
Indicator 14: Post-School Outcomes	Sections: A: 33.93% B: 64.43% C: 73.32%	Sections: A: 21.17% B: 54.60% C: 64.62	Sections: A: 24.25% B: 60.00% C: 70.25%	Sections: A: N B: N C: N
Indicator 15: Resolution Sessions	65.12%	69.23%	12.00%	Y
Indicator 16: Mediation	77.27%	31.25%	73.00%	N
Indicator 17: State Systemic Improvement Plan	*NA	**NA	*NA	**NA

* = No data reported, as assessments for students grades 3-8 were not administered in the 2015-16 school year.

** = No data reported, as this measure looks at growth and assessment data for the 2015-16 school year is not available to compare to the 2016-17 school year data.

Attachments			
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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

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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. Further details about each of the systems are delineated below.

Monitoring System

Over the last four years there has been a shift in responsibility of monitoring IDEA Part B within the department. While the division of special populations and student support still monitors specific indicators from the SPP/APR (4A, 4B, 9, and 10) through reviews of policies, procedures, and practices, all other monitoring is completed by the office of consolidated planning and monitoring (CPM). The monitoring system developed by CPM for IDEA Part B utilizes a two-step process that included all LEAs in the state in the 2016-17 school year.

In the first step of this monitoring system, LEAs are given 10 randomly selected student records. These 10 records are representative of the disability category makeup of each individual LEA for viable sampling. The LEAs must assess these 10 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 "IEP Review Protocol_16-17," has been attached to this page. The results of this review are captured in the monitoring platform and made available to state monitors and members of the division of special populations and student support staff.

The second step entails state monitors assessing these same 10 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. Experts within the division of special populations and student support also analyze some of the 10 student records for quality of transition plans and evaluations, as their expertise is invaluable in the monitoring process.

This monitoring system is a stark contrast to the previous cyclical model of monitoring in which LEAs were only monitored either on-site or through desktop auditing every four years. Under this new system, monitoring has evolved from being primarily compliance-driven to include results and student performance in the process. In light of this shift, the department has had richer conversations with LEAs that have gone beyond legal requirements and have included analysis of the quality and integrity of education to improve outcomes for students in Tennessee. In response to this new focus on performance, CPM developed a results-based monitoring process which provides a framework for best practices and can be used as a self-assessment instrument for any LEA or school.

This results-based monitoring process is intended for those LEAs of greatest need and CPM assesses various indicators of risk to identify LEAs where such results-based monitoring will need to be conducted. Determining whether LEAs require this further monitoring involves various steps, including:

- Gathering assessment and growth data on LEAs and their schools by proficiency levels, subjects, and subgroups.
- Reviewing LEAs' consolidated applications and budgets for IDEA and ESEA; reviewing LEAs' strategic plans.
- Developing a measurement/assessment of risk for LEAs based on identified indicators (not referring solely to SPP/APR indicators). Such indicators might be tied to (but are certainly not limited to) finance, teacher results, rates of graduation, and subgroup performance. It is important to note that the indicators selected to measure risk are developed by CPM in conjunction with the division of special populations and student support and other divisions across the department. This ensures that the priorities of the division of special populations and student support are clearly aligned with these risk indicators and that a common message is being delivered to LEAs from all divisions within the department

Once LEAs are selected for results-based monitoring predicated on the aforementioned criteria, they are subject to more intensive monitoring in various areas, including IDEA Part B. On-site monitoring of IEPs and thorough file reviews are required for these flagged LEAs and at least two schools will be visited for a minimum of two hours. A proportionate number of IEPs are pulled for monitoring for every identified LEA based on the demographics of SWDs in LEAs, including students' disability categories, students' age/grade, the number of students with transition plans in place, and other factors as specified. The IEPs reviewed are intended to reflect the actual makeup of SWDs within LEAs.

These IEPs are not just evaluated for compliance (e.g., documents were completed within an appropriate timeframe, paperwork was provided to family, and meetings were held with necessary parties in attendance) but also for the quality of the plan. The instructional programming team within the division of special populations and student support assesses narratives, present levels, and goals in the IEPs to ensure that they are thorough, supported by current data, and measurable, respectively. This careful analysis of the quality of the IEPs is intended to ensure that SWDs are receiving instructionally appropriate services that address their specific areas of deficit.

The fiscal monitoring of IDEA Part B funds and grants is also completed by CPM in conjunction with the office of finance. This monitoring entails ensuring that LEAs are appropriately spending and allocating IDEA Part B funds district-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

While local determinations in many ways serve as an aspect of monitoring, the recent shift to a more robust determinations process in Tennessee warrants a dedicated section. Since the FFY 2011 APR, the department has employed a local determinations process focused not only on compliance indicators but also on results. Considering both types of indicators in the determinations process allows for a more holistic view of LEA performance on the APR. As well, 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-

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 1, 3, 5A, 6A, and 14A-C. Other indicators that are solely compliance focused and/or predicated on less reliable data (e.g., survey results) might have a lesser weight, however, the fluidity of this determinations process allows the weights to be shifted year to year rather than remain static.

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 growth metric to assess improvement in district performance for each results-based indicator from year-to-year, when possible. Each LEA is provided a detailed table listing their actual data for each indicator included in the determinations process, how they 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, those LEAs with "needs assistance" and "needs intervention" determination assignments must develop an improvement plan that addresses flagged indicators. These plans are to be submitted through the LEA consolidated applications and plans (ePlan) system. This reduces the paperwork burden for LEAs, creates a continuum of communication throughout the entire department, and ensures that improvement strategies and efforts for SWDs are included in the overall LEA improvement plan rather than being disparate and disconnected.

For those LEAs found in "needs intervention," a site visit to conduct a needs assessment is required. Staff from the division of special populations and student support visit LEAs to address those indicators flagged in the determinations process. Using a uniform protocol (see attached "Needs Assessment Protocol"), relevant LEA staff are asked about district-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 and student support 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).

Attachments				
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iep review protocol_16-17.xlsx	Rachel Wilkinson		R e m o v e	
needs assessment protocol.pdf	Rachel Wilkinson		R e m o v e	

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

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In recent years, the department has gone to great lengths to address student performance in LEAs across the state. New initiatives and policies in effect, like college and career ready standards, Response to Intervention and Instruction (RTI²), and writing of Instructionally Appropriate IEPs were informed by data like results on statewide assessment and NAEP exams, graduation rates, and post-school outcomes for all students and subgroups. The dearth of students being appropriately prepared for the rigors of college, the number of students relegated to IEPs before actual supports and intervention are provided to address areas of need, and the writing of weak IEPs that don't address SWDs' areas of deficit all have contributed to the development of such initiatives. By using data to drive these initiatives, the department has accurately pinpointed areas of concern and will continue to measure their success and viability. As well, the department has sought the input of stakeholders by developing task-forces throughout the state to weigh in on initiatives and contribute to their development.

The department also expanded initiatives in the 2016-17 school year with a renewed focus on effective transition planning for SWDs to ensure they are prepared for life beyond high school. Statewide training on transition planning and implementation was deployed regionally and in LEAs specifically requesting support. In addition, content and manuals were developed to support LEA staff and are available through a state website, transitiontn.org, so that all educators can access the valuable tools and information. On this site, which is a partnership between the Tennessee Department of Education, Vanderbilt University, and TennesseeWorks, LEAs can participate in courses on vital topics related to transition and create their own unique account that will allow them to develop a course schedule relevant to their specific interests or needs.

In conjunction with this focus on transition planning practices, the department has utilized some of the information developed through the State Personnel Development Grant (SPDG) and outlined in the State Systemic Improvement Plan (SSIP) to provide support to LEA's with regard to differentiated instruction for all students. This has included a focus on increasing access to core instruction for students with disabilities and ensuring that when students are receiving special education services, they are the most intensive services that are directed specifically at areas of need for each individual student.

As well, 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 is identifying leveraging points and resources to improve this measure and develop guidance on how special education services might be provided in the regular early childhood program to the maximum extent possible.

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 developed a 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 (see attached "Strategic Plan" document for further information). 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 support services for student readiness team within the division of special populations and student support 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 office of the chief academic officer regarding training and support relative to RTI². Each member of the student readiness team has a particular area of expertise, ranging from behavioral 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.

In the 2016-17 school year, the division of special populations and student support developed a targeted support team. The members of this team serve as regional supports 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 requested professional development. They also work with the student readiness team to develop trainings and disseminate them in an effective manner.

As well, 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 system 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 and student support uses the APR local determinations as a barometer of whether LEAs are successfully improving the outcomes of SWDs and are compliant with federal and state regulations. While those LEAs in the determination category of "meets requirements" are welcome to 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

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intervention" determination categories. Those "needs assistance" LEAs are required to develop an improvement plan that may include some department staff providing direct training regarding areas of need.

As is detailed in the "General Supervision" section, "needs intervention" LEAs are required to complete a cursory improvement plan in the statewide ePlan system. Subsequently, site visits are scheduled 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 rather than focusing on monitoring.

Based on the site visit, LEAs are provided department staff notes and an improvement plan that pulls information from the LEA-submitted plan and the 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.

In the 2015-16 SY, Tennessee was awarded the State Personnel Development Grant (SPDG), and funds have been allocated through the SPDG to provide support and trainings relative to the goals identified in the department's State Systemic Improvement Plan (SSIP). In the spring of 2016, LEAs had the opportunity to apply for participation in grant-related activities; such activities to date have focused on the first two strands of the SPDG - access to core instruction and ensuring special education is the most intensive intervention - and these activities have been provided by both department and SPDG-funded staff.

In conjunction with the work being done relative to the SPDG strands and SSIP coherent improvement strategies, the 30 districts selected for participation have priority to receive training and technical support in areas either identified by the division of special populations and student support or by the LEAs. This additional piece of training is intended to help foster a successful infrastructure in each of the participating LEAs to ensure that the work relative to the SPDG/SSIP is able to yield viable results.

Attachments				
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strategic plan.pdf	Rachel Wilkinson		<div style="border: 1px solid black; padding: 2px; display: inline-block;">R</div> e m o v e	

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.

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Stakeholder Involvement: apply this to all Part B results indicators

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

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

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required to be set for FFY 2013 - FFY 2018, 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.

Attachments

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Reporting to the Public:

How and where the State reported to the public on the FFY 2015 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 2015 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 2015 APR in 2017, 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 the each LEA on every indicator as compared to state averages and targets the SPP/APR (a copy of this spreadsheet from the FFY 2015 APR has been attached for reference, entitled "2015-16 LEA APR Indicator Summary"), 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 Tennessee state report card at: <https://www.tn.gov/education/data/report-card.html>.

Attachments

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2015-16 lea apr indicator summary.xlsx	Rachel Wilkinson		<input type="button" value="R"/> e m o v e

Actions required in FFY 2015 response

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 1: Graduation**

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))

Historical Data

Baseline Data: 2011

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			49.20%	56.90%	60.90%	64.70%	69.40%	86.70%	68.90%	69.30%	69.37%
Data		47.70%	55.40%	59.40%	63.20%	67.90%	85.20%	67.40%	72.80%	67.33%	69.02%

FFY	2015
Target ≥	70.96%
Data	69.99%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≥	71.87%	71.87%	71.87%

Key:

Explanation of Changes

The target for FFY 2016 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 the meantime, the target for FFY 2016 was entered for FFY 2016 - FFY 2018. In FFY 2016, graduation targets were set by the following calculation:

Graduation Target = Graduation Rate for Previous Year + Graduation Rate Growth Goal

The Graduation Rate Growth Goal is determined via the following calculation:

Graduation Rate Growth Goal = (100-Graduation Rate for Previous Year)/16

The following calculation for graduation target is based on actual data for FFY 2016:

Graduation Rate Growth Goal: (100% - 69.99%)/16 = 1.88

Graduation Target: 69.99% + 1.88% = 71.87%

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2015-16 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	10/12/2017	Number of youth with IEPs graduating with a regular diploma	6,327	
SY 2015-16 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	10/12/2017	Number of youth with IEPs eligible to graduate	8,813	null
SY 2015-16 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec C150; Data group 695)	10/12/2017	2014-15 Regulatory four-year adjusted-cohort graduation rate table	71.79%	Calculate <input type="checkbox"/>

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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 2015 Data	FFY 2016 Target	FFY 2016 Data
6,327	8,813	69.99%	71.87%	71.79%

Graduation Conditions

Choose the length of Adjusted Cohort Graduation Rate your state is using: 4-year ACGR

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

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? No

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 2: Drop Out**

Monitoring Priority: FAPE in the LRE

Results indicator:
Percent of youth with IEPs dropping out of high school.

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

Historical Data

Baseline Data: 2011

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≤			18.30%	14.90%	15.40%	13.49%	1.80%	2.70%	8.10%	3.42%	3.37%
Data		19.80%	16.40%	16.90%	14.99%	3.30%	4.20%	9.60%	3.47%	3.36%	3.62%

FFY	2015
Target ≤	3.32%
Data	5.26%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≤	3.27%	3.22%	3.17%

Key:

Targets: Description of Stakeholder Input

Please refer to "Stakeholder Involvement" in the General Supervision section.

Please indicate whether you are reporting using Option 1 or Option 2.

- Option 1
- Option 2

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? No

FFY 2016 SPP/APR Data

Number of youth with IEPs who exited special education due to dropping out	Total number of high school students with IEPs	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
864	35,148	5.26%	3.27%	2.46%

Use a different calculation methodology

- Change numerator description in data table
- Change denominator description in data table

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

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
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FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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 in grades 9-12 who were classified as dropouts) were applied to the data in the LEA level EdFacts file C032 for the 2015-16 school year. The denominator of this dropout calculation is the number of students with disabilities in grades 9-12 enrolled during the 2015-16 SY as based on the census information collected in the LEA level EdFacts file C002. Thus, the calculation of dropouts for FFY 2016 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 = 864

Count of students with disabilities enrolled in grades 9-12 as per the LEA level EdFacts file C002 = 35,148
864/35,148 = 2.46%

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, 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? No

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3B: Participation for Students with IEPs**

Monitoring Priority: FAPE in the LRE

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

- A. 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))

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Reading	A Overall	2011	Target ≥			95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		98.00%	104.20%	99.10%	92.70%	99.20%	99.20%	99.10%	99.60%	98.95%	99.02%
Math	A Overall	2011	Target ≥			95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		99.00%	95.90%	99.10%	99.40%	99.10%	99.30%	99.20%	99.70%	98.91%	98.99%

	Group Name	FFY	2015
Reading	A Overall	Target ≥	95.00%
		Data	
Math	A Overall	Target ≥	95.00%
		Data	

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

FFY 2016 - FFY 2018 Targets

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

Key:

Targets: Description of Stakeholder Input

Please refer to "Stakeholder Involvement" in the General Supervision section.

FFY 2016 SPP/APR Data: Reading Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A Overall	64,096	62,612		95.00%	97.68%

FFY 2016 SPP/APR Data: Math Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A Overall	62,968	61,701		95.00%	97.99%

Public Reporting Information

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

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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>.

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3C: Proficiency for Students with IEPs**

Monitoring Priority: FAPE in the LRE

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

- A. 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))

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Reading	A Overall	2011	Target ≥			74.70%	79.00%	79.40%	81.50%	83.30%	41.50%	44.40%	34.80%	32.08%
			Data		71.50%	77.27%	78.69%	77.96%	24.90%	38.50%	41.40%	31.80%	29.08%	21.05%
Math	A Overall	2011	Target ≥			61.40%	65.20%	68.60%	71.70%	74.50%	34.20%	39.80%	31.30%	33.33%
			Data		59.47%	58.40%	67.42%	67.74%	19.90%	31.20%	36.80%	31.30%	30.33%	27.50%

	Group Name	FFY	2015
Reading	A Overall	Target ≥	35.08%
		Data	NVR
Math	A Overall	Target ≥	36.33%
		Data	NVR

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

FFY 2016 - FFY 2018 Targets

	FFY	2016	2017	2018
Reading	A ≥ Overall	38.08%	41.08%	44.08%
Math	A ≥ Overall	39.33%	42.33%	45.33%

Key:

Targets: Description of Stakeholder Input

NOTE: Under the former ESEA Flexibility Waiver for Tennessee (prior the Waiver approved in 2015), the target established for Indicator 3C is to increase by at least 3% - 5% the average growth of SWDs scoring proficient or advanced against grade level, modified, and alternate achievement standards on statewide reading and mathematics assessments. Because these targets are based on previous year's data the actual targets could not accurately be set for all years subsequent to FFY 2014. The targets will have to be revised every year thereafter to reflect the new data from the previous year. In the meantime, the targets for the remaining years FFY 2015 - 2018 will be based on the targets set for the previous year (so if the target is 32.08% for Reading in FFY 2014 then the target set for FFY 2015 will be at least a 3% increase over this previous target, which is 35.08%).

Please refer to "Stakeholder Involvement" in the General Supervision section.

FFY 2016 SPP/APR Data: Reading Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A Overall	62,612	6,823	NVR		10.90%

FFY 2016 SPP/APR Data: Math Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
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FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A Overall	61,701	8,224	NVR		13.33%

Public Reporting Information

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

Assessment information for all students, including SWDs, can be found on Tennessee's State Report Card at: <https://www.tn.gov/education/data/report-card.html>. The data for the 2016-17 SY 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)

As noted on the *Historical Data and Targets* page, target information was not listed for the 2016-17 school year assessment data. This was due to technical challenges with the statewide vendor in the 2015-16 school, during which assessments for students in grades 3-8 were not completed (see attached waiver approval letter titled "USDOE Waiver"). Because Tennessee's target for this indicator is predicated on growth from the previous school year, the department was unable to assign a target to the 2016-17 assessment data. While there is assessment data from the 2014-15 school year, growth between that data and the 2016-17 school year assessment data would not be appropriate, as the 2016-17 school year was the first year in which a newly formatted assessment with new content standards was deployed.

Actions required in FFY 2015 response

none

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 4A: Suspension/Expulsion

Monitoring Priority: FAPE in the LRE

Results indicator: Rates of suspension and expulsion:

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≤			25.50%	22.50%	25.50%	26.50%	32.80%	18.00%	1.00%	2.60%	2.40%
Data		30.00%	26.47%	28.00%	28.00%	33.82%	19.00%	1.90%	0.74%	7.41%	17.39%

FFY	2015
Target ≤	2.20%
Data	22.22%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≤	2.00%	1.80%	1.60%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

FFY 2016 SPP/APR Data

Has the State Established a minimum n-size requirement? Yes No

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. 120

Number of districts that have a significant discrepancy	Number of districts that met the State's minimum n-size	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
2	25	22.22%	2.00%	8.00%

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

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

State's definition of "significant discrepancy" and methodology

The department utilizes a percentage calculation methodology for each LEA in the state that meets "n" size requirements. In this calculation, the number of SWDs suspended/expelled for greater than 10 days is divided by the total number of SWDs within that LEA. An LEA is found significantly discrepant if 2.50% or more of the SWDs are suspended/expelled for greater than 10 days **AND** there must be a minimum "n" size of 5 or more students suspended/expelled. The addition of an "n" size limitation was introduced the FFY 2014 APR to mitigate situations in which false positives might lead to over-identification of LEAs due to small numbers of students.

Actions required in FFY 2015 response

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2015 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2016 using 2015-2016 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 suspension/expulsion rate for SWDs of 2.50% 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. Once the self-assessment has been submitted to the department and analyzed, if it is determined that any of these are contributors then revision and technical assistance/support are required.

A copy of the file review form used for LEAs to complete an evaluation of their disciplinary practices has been attached below and is entitled "Final Indicator 4 Review." Those LEAs identified for file reviews are provided this form, which allows department staff to thoroughly review LEA's policies, procedures, and 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 NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b). If YES, select one of the following:

Correction of Findings of Noncompliance Identified in FFY 2015

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 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4B: Suspension/Expulsion**

Monitoring Priority: FAPE in the LRE

Compliance indicator: Rates of suspension and expulsion:

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

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

Historical Data

Baseline Data: 2009

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data						0%	0%	0%	0%	0%	0%

FFY	2015
Target	0%
Data	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	0%	0%	0%

FFY 2016 SPP/APR Data

Has the State Established a minimum n-size requirement? Yes No

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. 126

Number of districts that have a significant discrepancy, by race or ethnicity	Number of those districts that have policies, procedures, or practices that contribute to the significant discrepancy and do not comply with requirements	Number of districts that met the State's minimum n-size	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
7	0	19	0%	0%	0%

All races and ethnicities were included in the review

State's definition of "significant discrepancy" and methodology

The department utilizes a rate ratio calculation methodology for each LEA in the state that meets "n" size requirements. In this calculation, the number of SWDs suspended/expelled for greater than 10 days in a specific racial/ethnic group is divided by the total number of SWDs within that LEA in the same specific racial/ethnic group. This suspension/expulsion rate is then divided by the statewide average (number of SWDs, ages 3-21, suspended/expelled for greater than 10 days divided by the total number of SWDs, ages 3-21, in the LEA). The quotient of this calculation is the rate ratio. To be considered significantly discrepant for this indicator, the rate ratio for an LEA must be 2.0 or greater and the LEA must meet the "n" size requirement for students suspended/expelled for greater than 10 days in a specific racial/ethnic group, which is a minimum of 5 students. This change took place in FFY 2014, and was done to align with Indicator 4A's calculation and to mitigate situations in which false positives might lead to over-identification of LEAs due to small numbers of students.

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2015 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2016 using 2015-2016 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 rate ratio of 2.00 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. Once the self-assessment has been submitted to the department and analyzed, if it is determined that any of these are contributors then revision and technical assistance/support are required.

A copy of the file review form used for LEAs to complete an evaluation of their disciplinary practices has been attached below and is entitled "Final Indicator 4 Review." Those LEAs identified for file reviews are provided this form, which allows department staff to thoroughly review LEA's policies, procedures, and 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 NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)
- The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b). If YES, select one of the following:

Correction of Findings of Noncompliance Identified in FFY 2015

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 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 5: Education Environments (children 6-21)**

Monitoring Priority: FAPE in the LRE

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2005	Target ≥			53.50%	54.00%	54.50%	55.00%	55.50%	60.00%	60.50%	65.50%	67.50%
		Data		53.48%	63.44%	56.31%	59.15%	62.33%	63.40%	63.40%	63.41%	66.07%	70.06%
B	2005	Target ≤			14.50%	14.00%	13.50%	62.33%	12.50%	12.00%	11.50%	11.50%	11.40%
		Data		14.69%	10.90%	13.52%	13.24%	12.64%	12.40%	12.30%	11.92%	11.27%	10.74%
C	2005	Target ≤			4.00%	4.00%	3.71%	2.10%	2.08%	2.06%	2.04%	1.70%	1.60%
		Data		1.89%	1.76%	1.98%	1.77%	1.75%	1.90%	1.80%	1.80%	1.76%	1.79%

	FFY	2015
A	Target ≥	69.50%
	Data	70.46%
B	Target ≤	11.30%
	Data	11.11%
C	Target ≤	1.50%
	Data	1.78%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target A ≥	71.50%	73.50%	75.00%
Target B ≤	11.20%	11.10%	11.00%
Target C ≤	1.40%	1.30%	1.20%

Key:

Targets: Description of Stakeholder Input

Please refer to "Stakeholder Involvement" in the General Supervision section.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	Total number of children with IEPs aged 6 through 21	115,456	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	81,006	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	13,255	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	c1. Number of children with IEPs aged 6 through 21 in separate schools	988	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	c2. Number of children with IEPs aged 6 through 21 in residential facilities	368	null

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Source	Date	Description	Data	Overwrite Data
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements	716	null

FFY 2016 SPP/APR Data

	Number of children with IEPs aged 6 through 21 served	Total number of children with IEPs aged 6 through 21	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	81,006	115,456	70.46%	71.50%	70.16%
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	13,255	115,456	11.11%	11.20%	11.48%
C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	2,072	115,456	1.78%	1.40%	1.79%

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 6: Preschool Environments**

Monitoring Priority: FAPE in the LRE

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2014	Target ≥									9.80%		28.50%
		Data								NVR	8.70%		26.53%
B	2014	Target ≤									12.80%		39.20%
		Data								13.30%	13.80%		35.62%

	FFY	2015
A	Target ≥	30.00%
	Data	24.09%
B	Target ≤	34.00%
	Data	35.71%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target A ≥	32.00%	34.00%	36.00%
Target B ≤	29.00%	24.00%	20.00%

Key:

Targets: Description of Stakeholder Input

Please refer to "Stakeholder Involvement" in the General Supervision section.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	Total number of children with IEPs aged 3 through 5	13,480	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	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	3,258	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	b1. Number of children attending separate special education class	4,499	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	b2. Number of children attending separate school	101	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	b3. Number of children attending residential facility	n	null

FFY 2016 SPP/APR Data

	Number of children with IEPs aged 3 through 5 attending	Total number of children with IEPs aged 3 through 5	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A. A regular early childhood program and receiving the majority of special education	3,258	13,480	24.09%	32.00%	24.17%

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	Number of children with IEPs aged 3 through 5 attending	Total number of children with IEPs aged 3 through 5	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
and related services in the regular early childhood program					
B. Separate special education class, separate school or residential facility	4,602	13,480	35.71%	29.00%	34.14%

Use a different calculation methodology

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 7: Preschool Outcomes**

Monitoring Priority: FAPE in the LRE

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A1	2009	Target ≥						91.70%	92.20%	92.20%	92.70%	92.70%	92.76%
		Data						91.70%	90.80%	90.00%	88.00%	90.17%	90.52%
A2	2009	Target ≥						57.40%	57.90%	57.90%	58.40%	58.00%	58.60%
		Data						57.40%	61.30%	59.50%	57.80%	57.84%	59.21%
B1	2009	Target ≥						89.50%	90.00%	90.00%	90.50%	90.50%	90.56%
		Data						89.50%	89.40%	88.90%	87.00%	89.21%	89.51%
B2	2009	Target ≥						55.70%	56.20%	56.20%	56.70%	57.00%	57.60%
		Data						55.70%	59.20%	56.90%	55.50%	55.60%	57.59%
C1	2009	Target ≥						92.60%	93.10%	93.10%	93.60%	93.60%	93.66%
		Data						92.60%	91.30%	89.60%	88.60%	90.63%	91.33%
C2	2009	Target ≥						68.00%	68.50%	68.50%	69.00%	69.00%	69.40%
		Data						68.00%	71.10%	69.20%	68.30%	68.13%	69.40%

	FFY	2015
A1	Target ≥	92.82%
	Data	90.29%
A2	Target ≥	59.20%
	Data	59.61%
B1	Target ≥	90.62%
	Data	88.81%
B2	Target ≥	58.20%
	Data	57.33%
C1	Target ≥	93.72%
	Data	90.14%
C2	Target ≥	69.80%
	Data	68.74%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target A1 ≥	92.88%	92.94%	93.00%
Target A2 ≥	59.80%	60.40%	61.00%
Target B1 ≥	90.68%	90.74%	90.80%
Target B2 ≥	58.80%	59.40%	60.00%
Target C1 ≥	93.70%	93.80%	93.90%
Target C2 ≥	70.20%	70.60%	71.00%

Key:

Targets: Description of Stakeholder Input

Please refer to "Stakeholder Involvement" in the General Supervision section.

FFY 2016 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed	6024.00
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Outcome A: Positive social-emotional skills (including social relationships)

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	35.00	0.58%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	506.00	8.40%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1985.00	32.95%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2434.00	40.41%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1064.00	17.66%

	Numerator	Denominator	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. $(c+d)/(a+b+c+d)$	4419.00	4960.00	90.29%	92.88%	89.09%
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. $(d+e)/(a+b+c+d+e)$	3498.00	6024.00	59.61%	59.80%	58.07%

Reasons for A1 Slippage

Historically, Tennessee A1 data have been nearly one standard deviation above the national average. The current data continues to be at a high level, even with the 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.

Reasons for A2 Slippage

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.

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	37.00	0.61%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	532.00	8.84%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2066.00	34.31%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2421.00	40.21%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	965.00	16.03%

	Numerator	Denominator	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
B1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. $(c+d)/(a+b+c+d)$	4487.00	5056.00	88.81%	90.68%	88.75%
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. $(d+e)/(a+b+c+d+e)$	3386.00	6021.00	57.33%	58.80%	56.24%

Reasons for B2 Slippage

Historically, Tennessee B2 data have been higher than the national average by approximately one third of a standard deviation. The current data reflects only 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.

Outcome C: Use of appropriate behaviors to meet their needs

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	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	33.00	0.55%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	359.00	5.96%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1451.00	24.09%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2583.00	42.89%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1597.00	26.52%

	Numerator	Denominator	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
C1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. $(c+d)/(a+b+c+d)$	4034.00	4426.00	90.14%	93.70%	91.14%
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. $(d+e)/(a+b+c+d+e)$	4180.00	6023.00	68.74%	70.20%	69.40%

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

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process? Yes

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

To gather the initial data informing the results of this indicator, LEAs use the Child Outcomes Summary Form to address performance in each of the three 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.

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8: Parent involvement**

Monitoring Priority: FAPE in the LRE

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

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			93.00%	93.00%	94.00%	96.00%	97.00%	97.00%	97.00%	92.75%	93.00%
Data		92.00%	92.10%	97.00%	89.40%	91.30%	91.10%	91.00%	97.30%	90.40%	90.87%

FFY	2015
Target ≥	93.25%
Data	91.00%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≥	93.50%	93.75%	94.00%

Key:

Targets: Description of Stakeholder Input

Please refer to "Stakeholder Involvement" in the General Supervision section.

FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
4268.00	4711.00	91.00%	93.50%	90.60%

The number of parents to whom the surveys were distributed.	15.71%	29980.00
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The percentage shown is the number of respondent parents divided by the number of parents to whom the survey was distributed.

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, a grade level break out was completed in Excel and it was found that surveys were disseminated to: 787 P3 (three year old students in pre-K) students with 187 responses from the family and 1,401 P4 (four year old students in pre-K) students with 301 responses from the family.

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 2016 school year, the *Parent Survey* was administered to all parents of SWDs ages 3 through 21 in 34 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 2016, a total of 29,980 surveys were distributed to parents.

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There were 4,847 survey responses with usable data for a response rate of 16.2%, a 0.2% decrease from the previous school year. Note that this response rate is different from the one in the above data table (response rate calculated was 15.71%). 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 15.71%; however, the response rate of 16.2% 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 4,711 parents responding to item one, 90.60% (4,268/4,711) agreed that the schools facilitated their involvement as a means of improving services and results for children with disabilities. The department's target of 93.50% 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.

Federal Fiscal Year	Parent Response Rate
Surveys Conducted by LEAs*	
2006	33.00%
2007	28.20%
Surveys Conducted by State Contractor**	
2008	15.30%
2009	18.50%
2010	17.90%
2011	18.90%
2012	18.30%
2013	16.20%
2014	17.30%
2015	16.40%
2016	16.20%

*In 2006 and 2007 surveys were conducted by LEA staff, using only paper copies and manual tabulation of results. Therefore survey findings may be slightly inflated.

**In FFY 2008, the department began utilizing three methods to distribute surveys (electronic, direct US mail, and take home surveys). A sampling of students was used instead of a census method and a lower response rate resulted. From FFY 2009 through FFY 2016, electronic and take home surveys have continued to be utilized with minimal change in response rate.

The table below provides summary representativeness data on all FFY 2016 *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 (-7.46%) as were parents of children with learning disabilities (-8.53%). Parents of students from all other (non-listed) disability groups were overrepresented by the respondents (8.23%). See respondent disaggregated data in the table below:

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NPSO Response Totals	Overall	LD	ED	ID	AO	Female	Minority
Target Pool Totals	29,980	9,757	747	1,947	17,529	10,111	10,674
Respondents Totals	4,847	1,164	113	337	3,233	1,667	1,364
Target Pool Representation		32.55%	2.49%	6.49%	58.47%	33.73%	35.60%
Respondent Representation		24.01%	2.33%	6.95%	66.70%	34.39%	28.14%
Difference		-8.53%	-0.16%	0.46%	8.23%	0.67%	-7.46%

Was sampling used? Yes

Has your previously-approved sampling plan changed? No

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

LEAs are sampled based on their locations in the state so that all regions are represented and it is 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. 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 students with disabilities population is being wholly reflected.

Was a survey used? Yes

Submitted survey: [Parent Survey](#)

The demographics of the parents responding are representative of the demographics of children receiving special education services. No

Describe the strategies 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 2017-18 school year to ensure that the population of those surveyed is representative of the population of the state as a whole. Efforts from the 2016-17 school year to remedy some of the noteworthy over/underrepresentation are manifest in the decrease in underrepresentation of responses from minority individuals (improvement of 1.22% in representativeness). There will be continued, increased efforts to more consistently 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.

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 9: Disproportionate Representation**

Monitoring Priority: Disproportionate Representation

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

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

Historical Data

Baseline Data: 2016

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data		1.50%	0%	0%	0%	0%	0%	0%	0%	0%	0%

FFY	2015
Target	0%
Data	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	0%	0%	0%

FFY 2016 SPP/APR Data

Has the State Established a minimum n-size requirement? Yes No

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 totally excluded from the calculation as a result of the requirement because the district did not meet the minimum n and/or cell size. 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-size	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
0	0	141	0%	0%	0%

Were all races and ethnicities included in the review? Yes No

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 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 2016, 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 LEAs’ 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;*

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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. *Note: the “n” of 45 is the “n” size historically used for previous measures of adequate yearly progress (AYP) for student subgroups. This established “n” size and the reasoning for it can be found Tennessee’s initial NCLB Accountability Workbook, which states: “In calculating AYP for student subgroups, 45 or more students must be included to assure high levels of reliability.”*

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, 2016 Membership data (from EdFacts file C052) and December 1, 2016 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 145 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 "Self-Assessment Ind 9 and 10") 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.

Actions required in FFY 2015 response

none

Note: Any actions required in last year’s response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State’s only actions required in last year’s response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

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

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Indicator 10: Disproportionate Representation in Specific Disability Categories

Monitoring Priority: Disproportionate Representation

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

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

Historical Data

Baseline Data: 2016

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data		1.50%	0%	0%	0%	0%	0%	0%	1.47%	2.21%	2.76%

FFY	2015
Target	0%
Data	2.76%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	0%	0%	0%

FFY 2016 SPP/APR Data

Has the State Established a minimum n-size requirement? Yes No

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 totally excluded from the calculation as a result of the requirement because the district did not meet the minimum n and/or cell size. 3

Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n-size	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
26	4	142	2.76%	0%	2.82%

Were all races and ethnicities included in the review? Yes No

Describe how the State made its annual determination that 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 below, which are used to calculate disproportionate representation, are required to complete a self-assessment. A copy of this self-assessment (titled "Self-Assessment Ind 9 and 10") 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.

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 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

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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 2016, 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 LEAs' 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;*
- 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.
- 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, 2016 Membership data (from EdFacts file C052) and December 1, 2016 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 145 LEAs. Those LEA's 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 below, which are used to calculate disproportionate representation, are required to complete a self-assessment. A copy of this self-assessment (titled "Self-Assessment Ind 9 and 10") 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.

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

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

FFY 2015 Findings of Noncompliance Verified as Corrected

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

The four LEAs identified with disproportionate representation, based on self-assessments submitted to the department in FFY 2015, 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,

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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 effect. 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 employed to get an overall perspective of persistent themes and concerns in the eligibility documentation.

All information and concerns gleaned from these site visits were provided to LEA staff via written communication subsequent to the visits. The four LEAs were required to develop action plans based on these site visits and had to periodically submit evidence of activities completed throughout the 2016-17 SY to address findings of possible contributing factors to disproportionate representation. The department staff also continuously provided technical assistance as necessary and reviewed additional eligibility documents from the four LEAs to confirm that the correct regulatory practices were being followed regarding appropriate identification of SWDs.

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

In conjunction with the site visits held to address the source of noncompliance and ensure the LEAs flagged for disproportionate representation were correctly implementing the regulatory requirements, the department's monitoring team conducted student file reviews. These file reviews addressed a vast array of special education documentation components, including appropriate evaluations and initial eligibility reports as well as appropriate reevaluation reports, which are required to be conducted triennially. In the four LEAs identified for disproportionate representation predicated on the self-assessment enumerated above and in information for the FFY 2016 data, there were eight students with cases of noncompliance relative to either initial eligibility documentation or reevaluation documentation across these four LEAs.

All instances of noncompliance identified in these four LEAs were required to be addressed within a set timeframe established by the department. The department issued these four LEAs corrective action plan (CAP) items that included all areas of noncompliance relative to evaluations, initial eligibilities, and reevaluations in February of 2016. Corrections of these CAP items were required to be completed by the end of March 2016. Subsequent to the completion of these corrections, the department verified that all noncompliance had been corrected within a maximum of 365 days since the notification of noncompliance. All areas of noncompliance found in these file reviews for the eight students stratified across the four flagged LEAs were corrected within the appropriate timeframe.

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 11: Child Find**

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		89.00%	82.00%	90.20%	96.00%	96.25%	95.30%	97.90%	97.90%	94.60%	94.81%

FFY	2015
Target	100%
Data	95.16%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	100%	100%	100%

FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
28,975	27,596	95.16%	100%	95.24%

Number of children included in (a), but not included in (b) [a-b]	1,379
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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.

Of the 28,975 students for whom parent consent to evaluate was received in FFY 2016, 1,379 students did not have their evaluations completed with the 60 calendar day timeline. These 1,379 students did not have an approved timeline extension requests OR they exceeded the timeline agreed upon in the timeline extension request OR they did not complete any timeline extension request and the eligibility exceeded the 60 calendar day timeline.

In Tennessee, districts can request timeline extensions for three approved reasons, and this request is submitted through the statewide IEP data management system. 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 eligibility is 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
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 an eligibility determination. The receiving district has made progress toward completing the evaluation.

In FFY 2016, 77 of the 1,379 noncompliant students for whom timeline extensions were requested were declined based on the nature of the request or the reason for delay. There were 4 out of the 1,379 noncompliant students who exceeded the 60 calendar day timeline prior to exit and then moved out of the district before eligibilities were completed. Three of the 4 students moved to other districts where evaluation was suspended and no further action was taken. The remaining student was placed in a state agency and no further actions with evaluation were taken. There were 51 students who exited after the 60 calendar day timeline was exceeded due to withdrawal of

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

parental consent, transferring to general education (by virtue of not qualifying for special education), or graduating.

There were 4 out of the 1,379 noncompliant students who still did not have eligibilities established as of December 2017. These students' LEAs were contacted by the executive director of data services (Prong 1) to resolve outstanding eligibilities. The remaining 1,243 noncompliant students had eligibilities established outside of the 60 calendar timeline and did not have extension requests completed OR had extension requests approved but the eligibility date exceeded the agreed upon timeline. The number of days beyond the established timeline ranged from 1 to 193 days. When LEAs complete eligibilities 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 eligibilities 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.
- The State established a timeline within which the evaluation must be conducted.

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

- State monitoring
- State database that includes data for the entire reporting year

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

The department collected data on initial consents for eligibility determinations for all students with signed consent forms during FFY 2016 (July 1, 2016 – June 30, 2017). Data were collected through the statewide IEP data management system for all of Tennessee's 145 LEAs. FFY 2016 was the eighth 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

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will

Correction of Findings of Noncompliance Identified in FFY 2015

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
1,340	1,336	4	0

FFY 2015 Findings of Noncompliance Verified as Corrected

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

See information regarding Prongs 1 and 2 in the text box below.

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

Prong 1

The statewide IEP data management system is used to collect the data necessary to determine timely evaluation. This system was also used to follow-up on all instances of FFY 2015 student-level noncompliance instances when the eligibility determination exceeded established timelines. The department initially provided the LEAs with instances of noncompliance a listing of their FFY 2015 students where initial eligibility was late and still open (eligibility not yet determined). These LEAs were required to research individual students and update EasyIEP if the eligibility determination had been completed (with the corresponding reason for delay). In the case of students whose eligibility determinations were still pending, LEAs were required to determine eligibility as soon as possible. By assessing all LEA's instances of noncompliance on a case by case basis, the department was able to ensure that all noncompliance was accounted for and have LEAs verify their own information. 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 1,340 instances, the eligibility 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.

Prong 2

For those LEAs with 1 or more of the 1,340 late student evaluations during FFY 2015, the department staff conducted data pulls of written parental permissions signed in FFY 2016 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 eligibility in FFY 2015, the department required them to demonstrate 100% compliance for initial eligibility determinations for a minimum of 30 consecutive days in FFY 2016. For LEAs with more than 500 initial referrals for eligibility in FFY 2014, the department required them to demonstrate 100% compliance for initial eligibility determinations for a minimum of 10 consecutive days in FFY 2016. 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 2015 had been corrected (Prong 2), the finding was closed.

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 12: Early Childhood Transition**

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		99.00%	47.10%	84.70%	95.00%	98.80%	98.30%	98.50%	98.71%	98.53%	97.53%

FFY	2015
Target	100%
Data	97.53%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	100%	100%	100%

FFY 2016 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	3,920
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.	497
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	1,581
d. Number of children 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.	1,461
e. Number of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.	366
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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. $[c/(a-b-d-e-f)] \times 100$	1,581	1,596	97.53%	100%	99.06%

Number of children who have been served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f	15
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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 15 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 15 children, 13 had documentation and/or eligibility information completed by Feb. 1, 2018. The range of days beyond the third birthday until eligibility was determined or an IEP was developed and implemented for these 13 children was 1 days to 254 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. Two remaining children have open records that the department is working with the LEAs to close.

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

- State monitoring
- State database that includes data for the entire reporting year

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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. 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.

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
41	41	0	0

FFY 2015 Findings of Noncompliance Verified as Corrected

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

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.

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 2015 developed and implemented the IEP, although late, for all 41 children for whom implementation of the IEP was untimely. The data from the Part B EasyIEP system identified the date in which the IEP was developed or a non-eligibility was determined. This information was reviewed and verified by the department's IDEA 619 coordinator and 619 consultants.

Prong 2

The department conducted a subsequent review of additional data to determine that all LEAs with noncompliance for FFY 2015 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.

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 13: Secondary Transition**

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Historical Data

Baseline Data: 2009

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		60.00%	31.00%	50.00%		50.03%	73.30%	87.20%	87.60%	100%	73.68%

FFY	2015
Target	100%
Data	71.84%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	100%	100%	100%

FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
227	313	71.84%	100%	72.52%

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

- State monitoring
- State database that includes data for the entire reporting year

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

For FFY 2016, staff from the office of consolidated planning and monitoring (CPM) completed the monitoring requirements of this indicator. Analyses of IEPs were done via desktop monitoring by CPM and special populations and student support staff for nearly all LEAs.

Review Item	Total Records	Compliant	Noncompliant	Percentage
Student Invitation to Meeting	313	288	25	92.01%
Agency Invitation to Meeting	313	281	32	89.78%
Measurable Postsecondary Goals	313	299	14	95.53%
Secondary Transition Annual IEP Goals	313	284	29	90.73%
Age-Appropriate Transition	313	278	34	89.14%
Academic and Functional Achievement	313	302	11	96.49%

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Courses of Study	313	296	17	94.57%
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Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?

Yes No

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? Yes No

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
69	69	0	0

FFY 2015 Findings of Noncompliance Verified as Corrected

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

All LEAs with findings of noncompliance in FFY 2015 were included in the desktop monitoring process in fall 2016 to evaluate records of students ages 16 or older during the life of the IEP pulled for evaluation. The same transition criteria and protocol (in addition to all other monitoring elements) from FFY 2015 were utilized for these LEAs to ascertain whether there was improvement from the previous year and/or to determine compliance. Both the monitoring team and staff from the division of special populations and student support assisted in this review process, conducting quality checks of transition plans as well, and provided notes and comments for LEAs.

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

All LEAs in the state were required to conduct their own self-evaluation, as per state monitoring requirements. After this LEA-level review, the department's statewide monitoring team conducted desktop auditing of the same student records to supplement LEA reviews and ensure compliance oversight. Based on the review of records in the statewide web-based monitoring system (WBMS), there were 69 instances of noncompliance within the 50 (out of 122) LEAs flagged for one (or more) instance(s) of noncompliance in FFY 2015. Those 50 LEAs with instances of noncompliance were notified of this noncompliance by the department and were required to correct the areas of noncompliance and resubmit the relevant items through the monitoring system by a set deadline. These corrections included addressing all requisite portions of the transition plan, as required for Indicator 13. Subsequent to the LEA corrections deadline, state monitors reviewed the 69 student records in which noncompliance was identified within 50 LEAs across the state. Based on the monitors' final reviews of these revised student documents submitted by LEAs to address areas of noncompliance, the department determined that all required corrections to individual student records were completed within 365 days of the initial findings.

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 14: Post-School Outcomes**

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2009	Target ≥							22.50%	23.00%	23.50%	23.50%	23.75%
		Data						22.00%	16.80%	15.00%	18.30%	21.27%	22.10%
B	2009	Target ≥							57.50%	58.00%	58.50%	58.50%	59.00%
		Data						57.00%	51.40%	50.90%	52.30%	55.59%	58.22%
C	2009	Target ≥							66.50%	67.00%	67.50%	68.00%	68.75%
		Data						65.00%	63.40%	60.30%	66.10%	67.70%	69.26%

	FFY	2015
A	Target ≥	24.00%
	Data	33.93%
B	Target ≥	59.50%
	Data	64.43%
C	Target ≥	69.50%
	Data	73.32%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target A ≥	24.25%	24.50%	24.75%
Target B ≥	60.00%	60.50%	61.00%
Target C ≥	70.25%	71.00%	71.75%

Key:

Targets: Description of Stakeholder Input

Please refer to "Stakeholder Involvement" in the General Supervision section.

FFY 2016 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	978.00
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	207.00
2. Number of respondent youth who competitively employed within one year of leaving high school	327.00
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	39.00
4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	59.00

	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
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FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

	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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A. Enrolled in higher education (1)	207.00	978.00	33.93%	24.25%	21.17%
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	534.00	978.00	64.43%	60.00%	54.60%
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	632.00	978.00	73.32%	70.25%	64.62%

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.
- Option 2: 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.

Reasons for A Slippage

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 2015 APR are not completely comparable to the FFY 2016 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 2012 APR, which had the same LEAs and schools included as in the FFY 2016 reporting period. The same format for capturing this information was employed in both FFY 2012 and FFY 2016, which enhances the reliability of the data, and when comparing the FFY 2012 data to the FFY 2016 data, there was a 3.17% increase in students reporting that they were enrolled in higher education within one year of exiting high school. Thus, while there was slippage from FFY 2015 to FFY 2016, there was overall improvement in FFY 2016 based on the same cohort of LEAs and schools surveyed in FFY 2012.

Reasons for B Slippage

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 2015 APR are not completely comparable to the FFY 2016 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 2012 APR, which had the same LEAs and schools included as in the FFY 2016 reporting period. The same format for capturing this information was employed in both FFY 2012 and FFY 2016, which enhances the reliability of the data, and when comparing the FFY 2012 data to the FFY 2016 data, there was a 2.60% increase 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 2015 to FFY 2016, there was overall improvement in FFY 2016 based on the same cohort of LEAs and schools surveyed in FFY 2012.

Reasons for C Slippage

As aforementioned in the rationale for slippage in parts A and B, 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 2015 APR are not completely comparable to the FFY 2016 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 2012 APR, which had the same LEAs and schools included as in the FFY 2016 reporting period. The same format for capturing this information was employed in both FFY 2012 and FFY 2016, which enhances the reliability of the data.

When comparing the FFY 2012 data to the FFY 2016 data, there was a 1.38% decrease in students reporting that they were enrolled in higher education or some other form of education or were competitively employed or in some other form of employment within one year of exiting high school. While there was slippage for this indicator, it is worth noting that the slippage is significantly less than the 8.70% decrease between the results of FFY 2015 and FFY 2016. Based on the increased percentages of students attending higher education and/or competitively employed from FFY 2012 to FFY 2016, it would appear that the decrease for part C could be attributed to an overall decline in students enrolling in other post-secondary education not meeting the criteria for higher education or engaged in employment not considered competitive. In addition, there was a little over a 1% increase in the percent of students reporting that they were not engaged in any post-school activities from FFY 2012 to FFY 2016, which would also explain the slippage in this indicator.

Was sampling used? Yes

Has your previously-approved sampling plan changed? No

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

The LEAs are sampled based on their locations in the state so that all regions are represented and it is ensured that every four years an LEA will complete the survey. This sampling is done via the National Post-School Outcomes Center (NPSO) Sampling Calculator on a four year sampling cycle. To ensure there is no potential bias or misrepresentation that can sometimes arise from student sampling, all students with disabilities within each selected LEA who exited school by (a) graduating with a regular diploma, (b) graduating with a

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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.

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

Describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

While the demographics of the survey respondents are representative of the overall cohort of students pulled in this sampling, there was one group - students dropping out - who were not completely representative. The table below provides a summary of representativeness data on all FFY 2016 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, there was no significant under or overrepresentation in any of the demographics fields, meaning the respondent data was indeed representative of the overall demographics of students. See respondent disaggregated data in the table below:

NPSO Response Totals	Overall	LD	ED	ID	AO	Female	Minority	ELL	Dropout
Target Leaver Totals	1,804	934	75	205	590	613	548	0	168
Respondents Totals	978	493	32	125	328	330	301	0	56
Target Leaver Representation		51.77%	4.16%	11.36%	32.71%	33.98%	30.38%	0.00%	9.31%
Respondent Representation		50.41%	3.27%	12.78%	33.54%	33.74%	30.78%	0.00%	5.73%
Difference		-1.36%	-0.89%	1.42%	0.83%	-0.24%	-0.40%	0.00%	-3.59%

To ensure that moving forward, the students with exit reasons of dropping out are better represented in this data, the department will provide guidance to districts on the importance of maintaining updated contact information for all students and how to leverage resources to reach the student and/or their family.

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 15: Resolution Sessions**

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			52.00%	3.00%	4.00%	5.00%	6.00%	7.00%	8.00%	9.00%	10.00%
Data		50.00%	55.00%	16.70%	60.00%	56.00%	68.42%	69.23%	56.76%	75.00%	54.17%

FFY	2015
Target ≥	11.00%
Data	65.12%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≥	12.00%	13.00%	14.00%

Key:

Targets: Description of Stakeholder Input

Please refer to "Stakeholder Involvement" in the General Supervision section.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/1/2017	3.1(a) Number resolution sessions resolved through settlement agreements	27	null
SY 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/1/2017	3.1 Number of resolution sessions	39	null

FFY 2016 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
27	39	65.12%	12.00%	69.23%

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 16: Mediation**

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			52.50%	55.00%	57.50%	60.00%	62.50%	65.00%	67.50%	70.00%	71.00%
Data		56.00%	67.00%	73.90%	83.33%	76.20%	86.96%	73.68%	84.62%	87.50%	82.35%

FFY	2015
Target ≥	72.00%
Data	77.27%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≥	73.00%	74.00%	75.00%

Key:

Targets: Description of Stakeholder Input

Please refer to "Stakeholder Involvement" in the General Supervision section.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/1/2017	2.1.a.i Mediations agreements related to due process complaints	n	null
SY 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/1/2017	2.1.b.i Mediations agreements not related to due process complaints	n	null
SY 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/1/2017	2.1 Mediations held	16	null

FFY 2016 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
3	2	16	77.27%	73.00%	31.25%

Reasons for Slippage

Based on the input from the department's assistant general counsel for special education, in the 2016-17 school year there was an increased number of legal teams involved in special education dispute resolution in Tennessee unwilling to fully resolve the disputes via mediation.

Actions required in FFY 2015 response

none

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 17: State Systemic Improvement Plan**

Monitoring Priority: General Supervision

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

Reported Data

Baseline Data: 2016

FFY	2013	2014	2015	2016
Target ≥		70.33%	73.33%	76.33%
Data	67.33%	56.68%		36.80%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	39.80%	42.80%

Key:

Explanation of Changes

Due to technical challenges with the Tennessee Department of Education's assessment vendor in the 2015-16 SY, students in grades 3-8 did not participate in the annual statewide assessments. Accordingly, the department could not report data any data for the state-identified measurable result (SiMR) for the 2015-16 school year. The statewide assessment data for the 2016-17 data have been added in the "Reported Data" section and will serve as the new baseline for the SiMR. The SiMR measurement is predicated on growth of three percent annually from the baseline onward, and in light of the baseline change, the growth targets had to be modified as well.

Description of Measure

The measure utilized for the SSIP to assess progress toward the SiMR is Tennessee's statewide English/Language Arts (ELA) assessment data for students with a specific learning disability (SLD) in grades 3-8. This assessment was revised to align with new standards in the 2016-17 school year, thus leading to the significant change in the percent of students scoring at or above basic (now termed "approaching") on this assessment.

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

Overview

Detailed in the attached Phase III - 2 report ("SSIP Phase III-2 17-18 FINAL TN").

Data Analysis

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

Please see the pages 3-9 of the attached document "TN Phase I SSIP" for an overview of the state's data analysis and the attached spreadsheet labeled "TN SSIP Appendix" for additional charts and graphs.

Analysis of State Infrastructure to Support Improvement and Build Capacity

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

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Please see pages 9-20 of the attached document labeled "TN Phase I SSIP" for the state's infrastructure analysis.

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

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

Statement

As a result of the data and infrastructure analyses, the Tennessee Department of Education has determined its state-identified measurable result will be to increase the percentage of students with Specific Learning Disabilities that score at least Basic on the state achievement test for grades 3-8 in Reading Language Arts. The department will support efforts designed to increase the number of SLD students scoring at least Basic and target an annual increase of three percent per year from the baseline score percentage. This rate of improvement constitutes an ambitious yet achievable goal that will ultimately raise the percentage of students with SLD scoring Basic or higher by 15 percent over the following five years.

Description

Please see pages 20-22 of the attached document labeled "TN Phase I SSIP" for detailed information on Tennessee's SIMR.

Selection of Coherent Improvement Strategies

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

Please see pages 22-28 of the attached document labeled "TN Phase I SSIP" for the state's selection of coherent improvement strategies.

Theory of Action

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

Submitted Theory of Action: No Theory of Action Submitted

Provide a description of the provided graphic illustration (optional)

Description of Illustration

Please see pages 28-29 of the attached document labeled "TN Phase I SSIP" for more information on the state's Theory of Action.

Infrastructure Development

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

Please see pages 6-22 in the attached "SSIP Phase 2 TN FINAL" document provided below.

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

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

Please see pages 23-61 in the attached "SSIP Phase 2 TN FINAL" document provided below.

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Evaluation

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

Please see pages 62-108 in the attached "SSIP Phase 2 TN FINAL" document provided below.

Technical Assistance and Support

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

Please see pages 109-110 in the attached "SSIP Phase 2 TN FINAL" document provided below.

Phase III submissions should include:

- Data-based justifications for any changes in implementation activities.
- Data to support that the State is on the right path, if no adjustments are being proposed.
- Descriptions of how stakeholders have been involved, including in decision-making.

A. Summary of Phase 3

1. Theory of action or logic model for the SSIP, including the SiMR.
2. The coherent improvement strategies or principle activities employed during the year, including infrastructure improvement strategies.
3. The specific evidence-based practices that have been implemented to date.
4. Brief overview of the year's evaluation activities, measures, and outcomes.
5. Highlights of changes to implementation and improvement strategies.

Detailed in the attached Phase III - 2 report ("SSIP Phase III-2 17-18 FINAL TN").

B. Progress in Implementing the SSIP

1. Description of the State's SSIP implementation progress: (a) Description of extent to which the State has carried out its planned activities with fidelity—what has been accomplished, what milestones have been met, and whether the intended timeline has been followed and (b) Intended outputs that have been accomplished as a result of the implementation activities.
2. Stakeholder involvement in SSIP implementation: (a) How stakeholders have been informed of the ongoing implementation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing implementation of the SSIP.

Detailed in the attached Phase III - 2 report ("SSIP Phase III-2 17-18 FINAL TN").

C. Data on Implementation and Outcomes

1. How the State monitored and measured outputs to assess the effectiveness of the implementation plan: (a) How evaluation measures align with the theory of action, (b) Data sources for each key measure, (c) Description of baseline data for key measures, (d) Data collection procedures and associated timelines, (e) [If applicable] Sampling procedures, (f) [If appropriate] Planned data comparisons, and (g) How data management and data analysis procedures allow for assessment of progress toward achieving intended improvements
2. How the State has demonstrated progress and made modifications to the SSIP as necessary: (a) How the State has reviewed key data that provide evidence regarding progress toward achieving intended improvements to infrastructure and the SiMR, (b) Evidence of change to baseline data for key measures, (c) How data support changes that have been made to implementation and improvement strategies, (d) How data are informing next steps in the SSIP implementation, and (e) How data support planned modifications to intended outcomes (including the SIMR)—rationale or justification for the changes or how data support that the SSIP is on the right path
3. Stakeholder involvement in the SSIP evaluation: (a) How stakeholders have been informed of the ongoing evaluation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing evaluation of the SSIP

Detailed in the attached Phase III - 2 report ("SSIP Phase III-2 17-18 FINAL TN").

D. Data Quality Issues: Data limitations that affected reports of progress in implementing the SSIP and achieving the SIMR

1. Concern or limitations related to the quality or quantity of the data used to report progress or results
2. Implications for assessing progress or results
3. Plans for improving data quality

To be detailed in the Phase 3, Year 2 report due April 2, 2018.

E. Progress Toward Achieving Intended Improvements

1. Infrastructure changes that support SSIP initiatives, including how system changes support achievement of the SiMR, sustainability, and scale-up
2. Evidence that SSIP's evidence-based practices are being carried out with fidelity and having the desired effects
3. Outcomes regarding progress toward short-term and long-term objectives that are necessary steps toward achieving the SIMR
4. Measurable improvements in the SIMR in relation to targets

Detailed in the attached Phase III - 2 report ("SSIP Phase III-2 17-18 FINAL TN").

F. Plans for Next Year

1. Additional activities to be implemented next year, with timeline

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2. Planned evaluation activities including data collection, measures, and expected outcomes

3. Anticipated barriers and steps to address those barriers

4. The State describes any needs for additional support and/or technical assistance

Detailed in the attached Phase III - 2 report ("SSIP Phase III-2 17-18 FINAL TN").

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Certify and Submit your SPP/APR**

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

Selected: Designated by the Chief State School Officer to certify

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

Name: Rachel Wilkinson

Title: Executive Director of Data Services

Email: rachel.wilkinson@tn.gov

Phone: 615-532-9702