

ILLINOIS STATE BOARD OF EDUCATION



Annual Performance Report, PART B

Years 2008-2009

Revised April 1, 2010

Part B Annual Performance Report (APR) for FFY 2008 (2008-2009)

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Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Overview

The attached document is the Illinois State Board of Education (ISBE) *Part B Annual Performance Report for FFY 2008 (2008-2009)*, or APR. In accordance with 20 U.S.C. 1416(2)(C)(ii), each state must report annually to OSEP on its performance according to its State Performance Plan (SPP) targets. The FFY08 (2008-2009) Illinois Part B APR was developed in conjunction with the revised Illinois Part B State Performance Plan (SPP). Progress and/or slippage in meeting the original and revised “measurable and rigorous targets” found in the SPP are addressed via the APR. The State posts the APR on the ISBE website (<http://www.isbe.net/spec-ed/>) as a means of reporting to the public on the progress and/or slippage in meeting the “measurable and rigorous targets” found in the SPP. In addition, the State publishes the Annual State Report on Special Education Performance in which key performance data for students with disabilities is summarized. Finally, the performance of every local education agency (LEA) located in the State, as related to the targets in the SPP, can be found in the District Special Education Profiles posted on the ISBE website at <http://webprod1.isbe.net/LEAProfile/SearchCriteria1.aspx>.

ISBE has ongoing communication with its primary stakeholder group, the Illinois State Advisory Council on the Education of Children with Disabilities (ISAC) through subcommittee meetings and committee of the whole meetings. In February, April, June, September, November and December of 2009 and January of 2010, ISBE staff participated in ISAC meetings, and had discussions with ISAC stakeholders regarding the SPP/APR and their specific indicators. In addition to this primary stakeholder group, ISBE collaborated with many other stakeholders to address specific indicators within the SPP/APR. Such stakeholder groups included Child and Family Connections (CFCs), the Community Residential Services Authority (CRSA), the Early Childhood Outcomes (ECO) Stakeholder Group, the Harrisburg Project, the Illinois Alliance of Administrators of Special Education (IAASE), the Illinois Children’s Mental Health Partnership (ICMHP), the Illinois Department of Children and Family Services (DCFS), the Illinois Department of Human Services (DHS), the Illinois Department of Mental Health (DMH), the Illinois Interagency Coordinating Council (IICC), the Illinois Statewide Technical Assistance Center (ISTAC) project members, the Parent Task Force, Parent and Training Information Centers, the Post Secondary Task Force, Regional Offices of Education and Support and Technical Assistance Regionally (STARNET). ISBE also shared information with stakeholders throughout the state via various conferences, regional professional development opportunities and task force meetings. Comments and suggestions from our stakeholder groups were incorporated into the revised State Performance Plan. The revised Illinois State Performance Plan is available on the ISBE website (<http://www.isbe.net/spec-ed/>) and will be featured in the Superintendent’s Weekly Bulletin to school district staff and other interested parties who subscribe to the Bulletin in February 2010.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: FAPE in the LRE

Indicator 1: Percent of youth with IEPs graduating from high school with a regular diploma.

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

Measurement: Percent = [(# of youth with IEPs graduating from high school with a regular diploma) divided by the (# of original freshmen with IEPs + Transfer in with IEPs – Transfer out or died with IEPs)] times 100.

FFY	Measurable and Rigorous Target
2007 (2007-2008)	<u>75.0%</u>
	Actual Target Data
	81.2%

Graduation Definition:

Graduates include only students who were awarded regular diplomas. Students with GEDs and other, non-regular completion certificates are not included. The calculation used to determine graduation rate for all youth and youth with IEPs is a cohort rate. Graduation rate is calculated from School Report Card data files by using the following formula: graduates / original freshmen + transfer in - transfer out or died. This calculation is done for all youth, including youth with IEPs. These data are the same data that are used for reporting to the Department for all students under Title I of the Elementary and Secondary Education Act (ESEA).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

There is a data lag of one year as States were instructed to describe the results of the data for the year before the reporting year (2007-2008). ISBE met its measurable and rigorous target for this indicator. In addition, after recalculating FFY06 data using the new measurement, the data indicate progress from 71.9% in FFY06 to 81.2% in FFY07. Based on School Report Card data collected in May of 2008, the percent of youth with IEPs graduating from high school with a regular diploma is 81.2% [14693/(21817 + 3159 – 6880)]. It is believed that the completion of improvement activities contributed to the progress on this indicator. The improvement activities listed for Indicator 1 in Illinois's State Performance Plan were implemented as planned. ISBE will continue to provide multiple methods of technical assistance regarding secondary transition, family involvement, family/school/community collaboration, evidence-based practices, self-assessment data, support of data-based decision making and accurate and reliable data submissions.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008:

The FFY08 through FFY10 measurable and rigorous targets for Indicator 1 were changed to align with the revised federal measurement and ESEA targets. After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum &

Instruction division for SISEP and Rtl, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: FAPE in the LRE

Indicator 2: Percent of youth with IEPs dropping out of high school.

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

Measurement: Percent = [(# of youth with IEPs dropping out of high school) divided by the (total high school enrollment of youth with IEPs)] times 100.

FFY	Measurable and Rigorous Target
2007 (2007-2008)	<u>5.5%</u>
	Actual Target Data
	5.0%

Dropout Definition:

A dropout is defined as any child enrolled in grades 9 through 12 whose name has been removed from the district enrollment roster for any reason other than the student's death, extended illness, removal for medical non-compliance, expulsion, aging out, graduation or completion of a program of studies and who has not transferred to another public or private school and is not known to be home schooled by parents or guardians or continuing school in another country. The calculation used to determine the dropout rate for youth with IEPs is the total number of high school dropouts with IEPs for the subgroup as reported in the End of Year Report divided by the total high school enrollment of youth with IEPs as reported in the End of Year Report. These data are the same data that are used for reporting to the Department for all students under Title I of the Elementary and Secondary Education Act (ESEA).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

There is a data lag of one year as States were instructed to describe the results of the data for the year before the reporting year (2007-2008). ISBE met its measurable and rigorous target for this indicator. Based on FFY07 data collected via the statewide Student Information System (SIS), the percent of youth with IEPs dropping out of high school was 5.0% (4399 / 87454). After recalculating FFY06 data using the new measurement, the data indicate progress from 6.1% in FFY06. It is believed that the completion of improvement activities contributed to the progress on this indicator. The improvement activities listed for Indicator 2 in Illinois's State Performance Plan were implemented as written. ISBE will continue to provide multiple methods of technical assistance regarding secondary transition, family involvement, family/school/community collaboration, evidence-based practices, self-assessment data, support of data-based decision making and accurate and reliable data submissions. ISBE staff members will also continue to participate in state and national conferences, such as the Illinois Dropout Summit and the Dropout Summit hosted by the National Dropout Prevent Center for Students with Disabilities.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008:

The FFY08 through FFY10 measurable and rigorous targets for Indicator 2 were changed to align with the revised federal measurement and ESEA targets. After completing the evaluation process, which

included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and Rtl, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments. In addition, language in another activity was revised to reflect the change in data collection systems for this indicator: 2) Ensure timely and accurate submission of ~~End of Year Report~~ dropout data through SIS by assisting the ISBE Data Analysis & Progress Reporting Division.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: FAPE in the LRE

Indicator 3: Participation and performance of children with IEPs on statewide assessments:

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

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

Measurement:

- A. AYP percent = $\left[\frac{\text{(\# of districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP targets for the disability subgroup)}}{\text{(total \# of districts that have a disability subgroup that meets the State's minimum "n" size)}} \right] \times 100$.
- B. Participation rate percent = $\left[\frac{\text{(\# of children with IEPs participating in the assessment)}}{\text{(total \# of children with IEPs enrolled during the testing window, calculated separately for reading and math)}} \right]$.
- C. Proficiency rate percent = $\left[\frac{\text{(\# of children with IEPs enrolled for a full academic year scoring at or above proficient)}}{\text{(total \# of children with IEPs enrolled for a full academic year, calculated separately for reading and math)}} \right]$.

FFY	Measurable and Rigorous Target
2008 (2008-2009)	3A. 70.0%
	3B. 95%
	3C. 38.0% Reading, 38.0% Math
	Actual Target Data
	3A. 40.3%
	3B. 98%
	3C. 41.6% Reading, 52.3% Math

Targets and Actual Target Data for FFY 2008 (2008-2009):

FFY 2008	Measurable and Rigorous Targets									
	AYP (3A)		Participation (3B)				Proficiency (3C)			
Targets for FFY 2008			Reading		Math		Reading		Math	
	70.0%		95%		95%		38.0%		38.0%	
Actual Target Data for FFY 2008	#	%	#	%	#	%	#	%	#	%
	216 / <u>536</u>	40.3%	150043/ <u>153032</u>	98.0%	149959/ <u>153048</u>	98.0%	57959/ <u>139355</u>	41.6%	72803/ <u>139253</u>	52.3%

Indicator 3A data for FFY08 show that 40.3% of districts met the State's AYP objectives for students with disabilities, down from 52.6% in FFY07. The data indicate that the target for 3A was not met. Indicator 3B data for FFY08 show that 98% of all students with disabilities participated in the reading and math statewide assessments as compared to 97.9% in FFY07. Indicator 3C data for FFY08 show that 41.6% of students with disabilities met or exceeded standards for reading as compared to 39.8% in FFY07 and 52.3% of students with disabilities met or exceeded standards for math as compared to 50.3% in FFY07. Therefore, ISBE met its measurable and rigorous targets for Indicators 3B and 3C.

3A) Districts with a disability subgroup that meet the State's minimum "n" size AND met the State's AYP target for the disability subgroup.

<u>Year</u>	<u>Total Number of Districts</u>	<u>Number of Districts Meeting the "n" size</u>	<u>Number of Districts that meet the minimum "n" size and met AYP for FFY 2008</u>	<u>Percent of Districts</u>
<u>FFY 2008 (2008-2009)</u>	<u>867</u>	<u>536</u>	<u>216</u>	<u>40.30%</u>

Disaggregated Target Data for Reading Participation (3B):

Statewide Assessment 2008-2009		Reading Assessment Participation								
		Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 11	Total	
									#	%
a	Children with IEPs	21975	22564	22615	22457	22496	22987	17938	153032	100%
b	IEPs in regular assessment - no accommodations	9055	7619	6175	5256	4652	4668	2890	40315	26.3%
c	IEPs in regular assessment with accommodations	10764	12802	14341	15070	15544	15888	11668	96077	62.8%
d	IEPs in alternate assessment against grade-level standards --- N/A									
e	IEPs in alternate assessment against modified standards --- N/A									
f	IEPs in alternate assessment against alternate standards	1961	1953	1876	1913	2016	1976	1956	13651	8.9%
g	Overall (b+c+d+e+f) Baseline	21780	22374	22392	22239	22212	22532	16514	150043	98.0%
	Children included in a but not in other counts above due to absences, medical emergencies, or invalid test scores.	195	190	223	218	284	455	1424	2989	2.0%

Statewide Assessment 2007-2008		Reading Assessment Participation								
		Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 11	Total	
									#	%
a	Children with IEPs	21812	22745	22451	22460	22827	23412	17740	153447	
b	IEPs in regular assessment - no accommodations	8847	7405	6113	5186	4728	4882	2820	39981	26.1%
c	IEPs in regular assessment with accommodations	11051	13247	14446	15245	15964	16269	11700	97922	63.8%
d	IEPs in alternate assessment against grade-level standards	Illinois does not have an alternate assessment that tests children against grade level standards.								
e	IEPs in alternate assessment against alternate standards	1729	1714	1674	1811	1848	1889	1666	12331	8.0%
f	Overall (b+c+d+e) Baseline	21627	22366	22233	22242	22540	23040	16186	150234	97.9%
Children included in a but not included in the other counts above										
Students whose assessment results were invalid		162	205	181	196	242	307	1086	2379	1.6%
Students who took an out of level test		0	0	0	0	0	0	0	0	0.0%
Parental Exemptions		Illinois does not permit schools or parents to exempt students from assessment.								
Absent		23	174	37	22	45	65	468	834	0.5%
Did not take for other reasons		0	0	0	0	0	0	0	0	0.0%

Disaggregated Target Data for Math Participation (3B):

Statewide Assessment 2008-2009		Math Assessment Participation								
		Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade HS	Total	
									#	%
a	Children with IEPs	21979	22567	22616	22460	22498	22988	17940	153048	100%
b	IEPs in regular assessment - no accommodations	9047	7623	6172	5266	4659	4655	2898	40320	26.3%
c	IEPs in regular assessment with accommodations	10756	12760	14330	15053	15537	15879	11697	96012	62.7%
d	IEPs in alternate assessment against grade-level standards --- N/A									
e	IEPs in alternate assessment against modified standards --- N/A									
f	IEPs in alternate assessment against alternate standards	1960	1952	1874	1905	2014	1975	1947	13627	8.9%
g	Overall (b+c+d+e+f) Baseline	21763	22335	22376	22224	22210	22509	16542	149959	98.0%
Children included in a but not in other counts above due to absences, medical emergencies, or invalid test scores.		216	232	240	236	288	479	1398	3089	2.0%

Statewide Assessment 2007-2008		Math Assessment Participation								
		Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 11	Total	
									#	%
a	Children with IEPs	21812	22745	22451	22460	22827	23412	17740	153447	
b	IEPs in regular assessment - no accommodations	8846	7401	6110	5192	4724	4879	2828	39980	26.1%
c	IEPs in regular assessment with accommodations	11034	13229	14443	15207	15965	16249	11729	97856	63.8%
d	IEPs in alternate assessment against grade-level standards	Illinois does not have an alternate assessment that tests children against grade level standards.								
e	IEPs in alternate assessment against alternate standards	1725	1714	1675	1812	1844	1888	1664	12322	8.0%
f	Overall (b+c+d+e) Baseline	21605	22344	22228	22211	22533	23016	16221	150158	97.9%
Children included in a but not included in the other counts above										
Students whose assessment results were invalid		184	227	186	227	249	331	1051	2455	1.6%
Students who took an out of level test		0	0	0	0	0	0	0	0	0.0%
Parental Exemptions		Illinois does not permit schools or parents to exempt students from assessment.								
Absent		23	174	37	22	45	65	468	834	0.5%
Did not take for other reasons		0	0	0	0	0	0	0	0	0.0%

Disaggregated Target Data for Reading Performance: Number and percentage of students with IEPs that scored proficient or higher (3C)

Statewide Assessment 2008-2009		Reading Assessment Performance							Total	
		Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade HS	#	%
a	Children with IEPs	20147	20768	20809	20556	20579	20920	15576	139355	
b	IEPs in regular assessment with no accommodations	5192	4503	3568	3166	2528	2807	598	22362	16.0%
c	IEPs in regular assessment with accommodations	2615	3329	3763	5229	4754	6181	1767	27638	19.8%
d	IEPs in alternate assessment against grade-level standards --- N/A									
e	IEPs in alternate assessment against modified standards --- N/A									
f	IEPs in alternate assessment against alternate standards	1002	1061	1000	1168	1212	1241	1275	7959	5.7%
g	Overall (b+c+d+e+f) Baseline	8809	8893	8331	9563	8494	10229	3640	57959	41.6%

Statewide Assessment 2007-2008	Reading Assessment Performance								
	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 11	Total	
								#	%
A. Children with IEPs	21812	22745	22451	22460	22827	23412	17740	153447	
B. IEPs in regular assessment with no accommodations	5724	4788	3742	3304	2664	2879	600	23701	15.4%
C. IEPs in regular assessment with accommodations	2791	3717	4177	5475	5207	6079	2128	29574	19.3%
D. IEPs in alternate assessment against grade- level standards	Illinois does not have an alternate assessment that tests children against grade level standards.								
E. IEPs in alternate assessment against alternate standards	985	1017	982	1164	1127	1312	1201	7788	5.1%
Overall (b+c+d+e) Baseline Proficient	9500	9522	8901	9943	8998	10270	3929	61063	39.8%

Disaggregated Target Data for Math Performance: Number and percentage of students with IEPs that scored proficient or higher

Statewide Assessment – 2008-2009		Math Assessment Performance							Total	
		Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade HS	#	%
a	Children with IEPs	20128	20725	20781	20542	20575	20897	15605	139253	
b	IEPs in regular assessment with no accommodations	6670	5687	4229	3348	2854	2637	478	25903	18.6%
c	IEPs in regular assessment with accommodations	5595	6587	6400	6356	6263	6062	1245	38508	27.7%
d	IEPs in alternate assessment against grade-level standards --- N/A									
e	IEPs in alternate assessment against modified standards --- N/A									
f	IEPs in alternate assessment against alternate standards	1078	1166	1104	1222	1293	1246	1283	8392	6.0%
g	Overall (b+c+d+e+f) Baseline	13343	13440	11733	10926	10410	9945	3006	72803	52.3%

Statewide Assessment 2007-2008		Math Assessment Performance							Total	
		Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 11	#	%
A.	Children with IEPs	21812	22745	22451	22460	22827	23412	17740	153447	
B.	IEPs in regular assessment with no accommodations	7182	5893	4365	3555	2843	2834	528	27200	17.7%
C.	IEPs in regular assessment with accommodations	6302	7273	6837	7059	6501	6294	1410	41676	27.2%
D.	IEPs in alternate assessment against grade-level standards	Illinois does not have an alternate assessment that tests children against grade level standards.								
E.	IEPs in alternate assessment against alternate standards	1067	1143	1085	1269	1263	1286	1194	8307	5.4%
	Overall (b+c+d+e) Baseline Proficient	14551	14309	12287	11883	10607	10414	3132	77183	50.3%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

While data for Indicator 3B remain statistically unchanged and data for Indicator 3C indicate progress in both reading and math, data for Indicator 3A show slippage (as noted in the preceding tables). Although ISBE did not reach its target for 3A, it is believed that the completion of the improvement activities discussed below contributed to the maintenance and progress on both 3B and 3C. After review and evaluation of the improvement activities, it was determined that activities were implemented as planned,

reached the target audience(s) and maintenance or progress had been made in 2 of the sub-indicators. However, to better address the sub-indicators, especially 3A, additions and expansions were made to the improvement activities as discussed in the “Revisions” section below. During 2008-2009 the improvement activities listed for Indicator 3 in Illinois’s State Performance Plan were implemented. ISBE will continue to provide multiple methods of technical assistance regarding Positive Behavior Interventions and Supports (PBIS), school-based problem solving, Response to Intervention (RtI), evidence-based practices, self-assessment data, support of data-based decision making and accurate and reliable data submissions.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008:

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be removed: 1) Target SPP Indicator 3 through the focused monitoring system to ensure FAPE in the LRE and equitable access to the general education curriculum. The monitoring activity was removed because, after analyzing SPP/APR data, ISBE and its stakeholder group chose to tighten the focused monitoring process by concentrating specifically on Indicator 5 (Educational Environment) and how placement decisions are made for students with disabilities. However, corrective actions for focused monitoring continue to emphasize the connection between LRE and student performance, and the importance of access to the general education setting and curriculum for students with disabilities. In addition, two activities were combined to read: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and RtI, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments. The SISEP activity was combined with the intra-agency integration activity to acknowledge SISEP staff’s efforts to integrate programs, projects and initiatives across multiple divisions within ISBE. Finally, the timelines for one activity were adjusted: 1) Develop and implement a definition for specific learning disability (SLD) eligibility that includes RtI and does not require the use of discrepancy data. A definition was drafted by the RtI stakeholder group subcommittee in February 2009 and was widely disseminated for comment. The definition was also presented to the Illinois Alliance of Administrators of Special Education (IAASE) for feedback. Revisions have been made based upon stakeholder input and a final version will be made available winter 2010 for implementation during the 2010-2011 school year.

Public Reporting Information:

The Illinois State Report Card for reporting assessment data for students with and without disabilities is available at the following link: <http://webprod.isbe.net/ereportcard/publicsite/getsearchcriteria.aspx>

The Illinois Annual Performance Report, Part B provides assessment data for students with disabilities at the following link: <http://www.isbe.net/spec-ed/default.htm>

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: FAPE in the LRE

Indicator 4: 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))

Measurement:

- A. Percent = $\left[\frac{\text{(\# of districts that have a significant discrepancy in the rates of suspensions and expulsions for greater than 10 days in a school year of children with IEPs)}}{\text{(\# of districts in the State)}} \right] \times 100$.
- B. Percent = $\left[\frac{\text{(\# of districts that have (a) a significant discrepancy, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards)}}{\text{(\# of districts in the State)}} \right] \times 100$.

The Illinois definition of "significant discrepancy" is a suspension/expulsion rate greater than the State Suspension/Expulsion Rate plus one standard deviation for three consecutive years. Please see the SPP for additional information.

Note: 4B is a new indicator. A new baseline will be established, and improvement activities will be reviewed and/or revised with the FFY09 SPP submission, due February 1, 2011. The first APR reporting for Indicator 4B will be in the FFY10 APR, due February 1, 2012.

FFY	Measurable and Rigorous Target
2007 (2007-2008)	5.00%
	Actual Target Data
	2.07%

LEAs with Significant Discrepancy in Rates for Suspension and Expulsion

Year	Total Number of LEAs	Number of LEAs that have Significant Discrepancies	Percent
FFY 2007 (2007-2008)	868	18	2.07%

Review of Policies, Procedures, and Practices

For FFY07, 18 districts met the suspension/expulsion criteria for significant discrepancy. All districts were required to complete a self-assessment that included a review of policies, procedures and practices related to suspensions and expulsions. A function of this review required districts to address the collection of data, the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that such policies, procedures, and practices comply with applicable requirements. Each district had to develop an action plan to reduce the rates of suspension/expulsions of children with disabilities for more than ten days in a school year. Action plans included methods for improving data collection to track patterns of student behavior; additional training and professional development for teachers and administrators; and implementing research based prevention programs, such as PBIS and RtI.

After the State reviewed policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards for these 18 districts, it was determined that 9 districts did not meet the requirements of 34 CFR 300.170(b) for FFY07, and were notified in March 2009 that this constituted a finding of noncompliance, requiring timely correction within one year from the date of the finding. These LEAs were required by the State to review and revise policies, procedures and practices in one or more of the following areas: the development and implementation of IEPs, the use of positive behavioral interventions and supports or procedural safeguards. The revisions were to be added to the District Improvement Plan (DIP) and approved by ISBE. LEAs were also required to report such revisions to the public. ISBE implemented a verification process to ensure that DIPs were implemented, noncompliance was corrected and LEAs were now correctly implementing the specific regulatory requirement. To date, 2 LEAs have timely corrected their noncompliance related to this indicator. The remaining 7 LEAs have until March 2010 to correct their noncompliance.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Illinois met its measurable and rigorous target for FFY07 (2.07%) and made progress from FFY06 (3.9%). The number of districts meeting established criteria decreased in FFY07, and the percentage of 2.07% is within the target percentage of 5.00% as noted in the SPP. This progress can likely be explained by the implementation of improvement activities. ISBE has made a concerted effort to provide broader communication at the state level in notifying districts of resources available related to this indicator. These resources include training and technical assistance provided through the Illinois PBIS Network and IASPIRE, which apply a three-tiered system of support and a problem-solving process to enhance the capacity of schools to effectively educate all students. Both IASPIRE and the PBIS Network are linked to the scaling up of the RtI framework.

Correction of Noncompliance:

As explained in the FFY07 APR, the State did not originally make findings of noncompliance for districts identified as having a significant discrepancy in the rate of suspensions and expulsions for children with IEPs because it was addressing the issue through the use of individualized district self-assessments and action plans. The State had the understanding that this was an acceptable practice prior to the September 3, 2008 OSEP guidance document entitled, *"Frequently Asked Questions Regarding Identification and Correction of Noncompliance and Reporting on Correction in the SPP/APR"* and the October 17, 2008 OSEP memorandum entitled, *"Reporting on Correction of Noncompliance in the Annual Performance Report Required under Sections 616 and 642 of the Individuals with Disabilities Education Act."* These documents marked the first written notification from OSEP that findings of noncompliance were to be made based on data reported by LEAs through the State's data system(s). Therefore, after receiving technical assistance and additional clarification from OSEP between November 2008 and January 2009, ISBE developed the following plan to issue findings of noncompliance to LEAs related to Indicator 4:

- Introduced this new information to districts via various modes of communication (IAASE spring conference, Special Education Director's Conference, State Superintendent's Bulletin) between January and September 2009;

- Made findings of noncompliance in March of 2009 for 2 LEAs from FFY05 data, 7 LEAs from FFY06 data and 9 LEAs from FFY07 data that did not meet the requirements of 34 CFR 300.170(b); and
- Will now ensure timely correction of noncompliance within one year through follow up with districts.

One of the 2 LEAs from FFY05 data, 6 of the 7 LEAs from FFY06 data and 7 of the 9 LEAs from FFY07 data (7 LEAs total across the 3 federal fiscal years) timely corrected their noncompliance. ISBE staff will implement enforcement actions with the remaining 2 LEAs that did not timely correct to ensure correction as soon as possible. ISBE will provide additional technical assistance to these LEAs via onsite review and other follow up activities.

Verification of Correction (either timely or subsequent):

In order to verify that LEAs were correctly implementing specific regulatory requirements, ISBE reviewed District Improvement Plans (DIPs), LEA status reports and LEA materials documenting the implementation of strategies and activities related to the suspension/expulsion of students with disabilities in the District Improvement Plan (DIP). In addition, ISBE reviewed district level data that supported the district's documentation that DIP strategies and activities had the intended impact on the suspension/expulsion rate for students with disabilities. ISBE also reviewed the list of significantly discrepant LEAs for 2009, and the 2 LEAs that have already timely corrected their noncompliance did not have a significant discrepancy for 2009.

Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
<p>The State must demonstrate that the noncompliance was corrected by reporting that each LEA with noncompliance identified in March 2009 is correctly implementing the specific regulatory requirement.</p>	<p>In March 2009, 2 LEAs received findings of noncompliance based on their FFY05 data and 7 LEAs received findings of noncompliance based on their FFY06 data. All 9 of these LEAs received additional findings of noncompliance in March 2009 based on their FFY07 data (both of the LEAs identified in FFY05 were also identified in FFY07 and all 7 of the LEAs identified in FFY06 were also identified in FFY07). These 9 LEAs were required to submit a status report on the activities included in their district improvement plans and documentation of any changes made to their policies, procedures or practices as a result of the findings of noncompliance. ISBE is completing follow up activities with these LEAs to ensure timely correction of noncompliance. To date, <u>7</u> LEAs (1 LEA identified from FFY05 and FFY07 data and <u>6</u> LEAs identified from FFY06 and FFY07 data) have corrected their noncompliance and are correctly implementing specific regulatory requirements. <u>ISBE staff will implement enforcement actions with the remaining 2 LEAs that did not timely correct to ensure correction as soon as possible. ISBE will provide additional technical assistance to these LEAs via onsite review and other follow up activities.</u></p>

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/ Resources for FFY 2008:

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be added: 1) Assist districts with improvement plans that address corrective actions for issues of noncompliance. This activity was added to assist districts with the identification of factors related to the finding of noncompliance and strategies to address the noncompliance, as well as the correction of identified noncompliance in a timely manner. In addition, two other activities were revised: 1) Complete a data verification process with districts with greater than 1,000 students with IEPs that report zero suspensions/expulsions greater than 10 days in a school year and 2) Coordinate with the Illinois PBIS Network to revise the self-assessment tool to align with State and Federal regulations. The data verification activity was revised slightly to address the LEAs with the largest enrollments of students with IEPs that are reporting zero suspensions/expulsions for students with IEPs. The self-assessment activity was revised to reflect the completion of the self-assessment and to address continuous monitoring of the self-assessment to ensure that it aligns with current State and Federal regulations. Finally, one activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and RtI, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: *FAPE in the LRE*

Indicator 5: 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))

Measurement:

- A. Percent = [(# of children with IEPs served inside the regular class 80% or more of the day) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.
- B. Percent = [(# of children with IEPs served inside the regular class less than 40% of the day) divided by the (total # students aged 6 through 21 with IEPs)] times 100.
- C. Percent = [(# of children with IEPs served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.

FFY	Measurable and Rigorous Target
2008 (2008-2009)	5A. 49.30%
	5B. 19.30%
	5C. 4.58%
	Actual Target Data
	5A. 50.43%
	5B. 18.04%
	5C. 5.71%

As Illinois has been approved to submit 618 Table 3 (EDEN File Specs N/X002, 089) via "EDEN only," ISBE submitted Educational Environment data to EDEN/EDFacts on February 1, 2009. ISBE submitted revised data to EDEN/EDFacts in August 2009, which were used to calculate Indicator 5A, 5B and 5C for FFY08. Please note that the calculations for Indicators 5A, 5B and 5C do not include students who had been parentally placed in private schools and were receiving special education services on an Individualized Service Plan (ISP), even though these students are reported by ISBE under Section 618, as required. The measurements for Indicator 5 specifically refer to the number of children with IEPs; therefore, ISBE excludes students served under an ISP in this calculation (4,306 students in FFY08). These students have been removed from both the numerator and denominator for the calculation of Indicators 5A, 5B and 5C, resulting in a denominator of 276,751 (281,057 – 4,306) for each calculation. ISBE met the measurable and rigorous targets for Indicators 5A and 5B, but did not meet the target for 5C.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

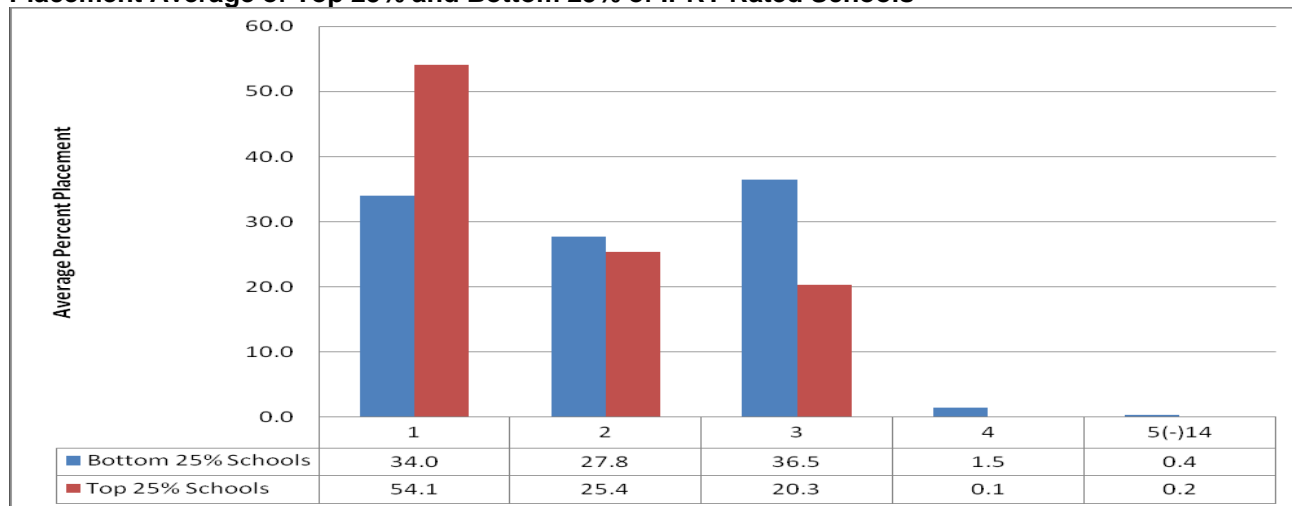
The data indicate progress for Indicators 5A, 5B and 5C in FFY08. The percentage for 5A improved to 50.43% [139,556 / (281,057 – 4,306)] in FFY08 from 49.20% in FFY07. This improvement equates to approximately 3300 more students with disabilities receiving their special education services inside the regular class 80% or more of the day. In addition, Indicator 5B improved to 18.04% [49,924 / (281,057 – 4,306)] in FFY08 from 18.40% in FFY07. The percentage for 5C improved to 5.71% [15,802 / (281,057 – 4,306)] in FFY08 from 5.90% in FFY07. This improvement equates to approximately 550 more students with disabilities receiving their special education services in settings with their non-disabled peers. Although ISBE did not reach its target for 5C, it is believed that the completion of the improvement activities discussed below contributed to the progress on 5A, 5B and 5C. After review and evaluation of the improvement activities, it was determined that activities were implemented as planned, reached the target audience(s) and progress had been made in all 3 sub-indicators. However, to better address the sub-indicators, especially 5C, additions and expansions were made to the 3-tiered model listed in the SPP that incorporates ISBE's improvement activities as discussed in the "Revisions" section below.

During 2008-2009 the improvement activities listed for Indicator 5 in Illinois's State Performance Plan were implemented. ISBE and its technical assistance projects will continue to provide multiple methods of technical assistance and training to implement multi-tiered, school-wide academic, social-emotional and behavioral supports, and to enhance the capacity of general and special educators to implement research based practices that will increase student access to the general education curriculum at grade level. For example, Project CHOICES is ISBE's Least Restrictive Environment (LRE) initiative. Project CHOICES provides collaborative support to schools, families, children and youth to ensure that all students learn in general education and community settings, and address and show progress toward the Illinois Learning Standards. Project CHOICES staff work collaboratively with LEAs (children and youth ages 3-21) to ensure that:

- All children have access to general education curriculum.
- All children and youth are assigned to general education classrooms and are treated by all staff as full participating members of the school community.
- Schools address social emotional development as a key part of academic outcomes.
- Schools develop and use data for decision making and problem solving.
- Schools make a concerted effort to involve family members.
- School districts are committed to system change and developing an effective educational system for all students.

Critical elements to improving educational environment outcomes in schools have been developed by the OSEP Technical Assistance Center on Positive Behavior Interventions and Supports. These include: 1) data that is collected and used for decision making and planning from a variety of sources, 2) quality, evidence based practices that reach the classroom level and impact delivery of instruction to students, 3) systems within districts and schools that support evidence based practices for teachers and related staff, and 4) high accountability for improved outcomes for all students that sustain when each of the critical elements is addressed in a district. CHOICES technical assistance and training are aligned to these four critical elements. In addition, these four elements, along with SPP indicators, have been the framework for design and use of the CHOICES self-assessment tool, Inclusive Practices Reflection Tool (IPRT). LEAs utilize the IPRT to evaluate their inclusive practices in various categories (e.g., school-wide settings, classroom settings, non-classroom settings and individual student settings). Below are data examples regarding IPRT schools taken from the Project CHOICES State Fiscal Year 2009 Annual Report.

Placement Average of Top 25% and Bottom 25% of IPRT Rated Schools

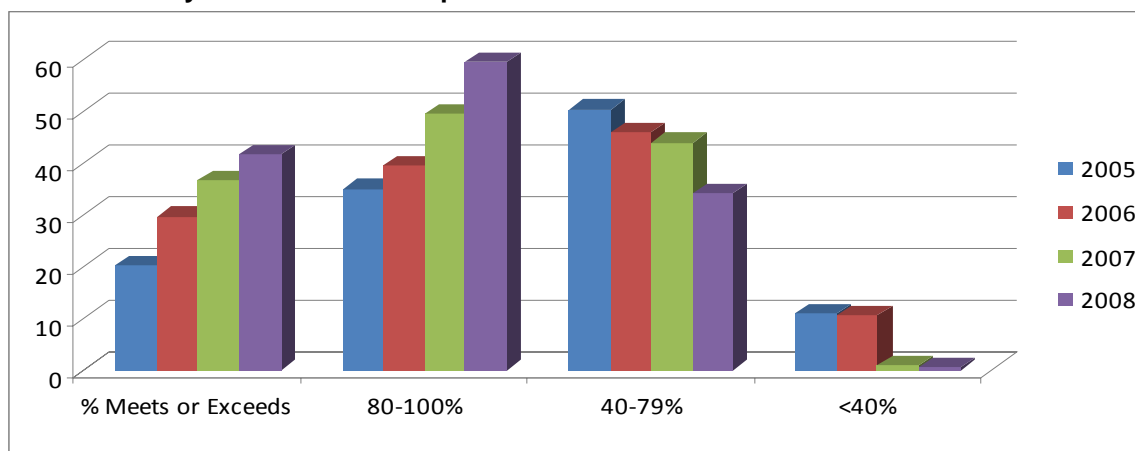


The graph above indicates the placement average of the top and bottom 25% of IPRT rated schools. To calculate this percentage, the past two years of educational environment placement data were averaged for the top and bottom IPRT schools. It is important to note that these are not the same schools over the last two years; however, the same IPRT tool was utilized and criteria for rating in the top and bottom 25% remained equal for both years. The data indicate that over the last two years, top rated IPRT schools outperform bottom IPRT schools in educational environment placement. The top 25% of schools placed 54.1% of children into code 01, while the bottom 25% of schools only placed 34.0% of children into code 01. Conversely, the bottom 25% of schools placed 36.5% of children into code 03 (a more restrictive environment), and the top 25% of schools placed 20.3% of children into code 03. Taken together, on average over the last two years, top rating IPRT schools placed more children into less restrictive environments.

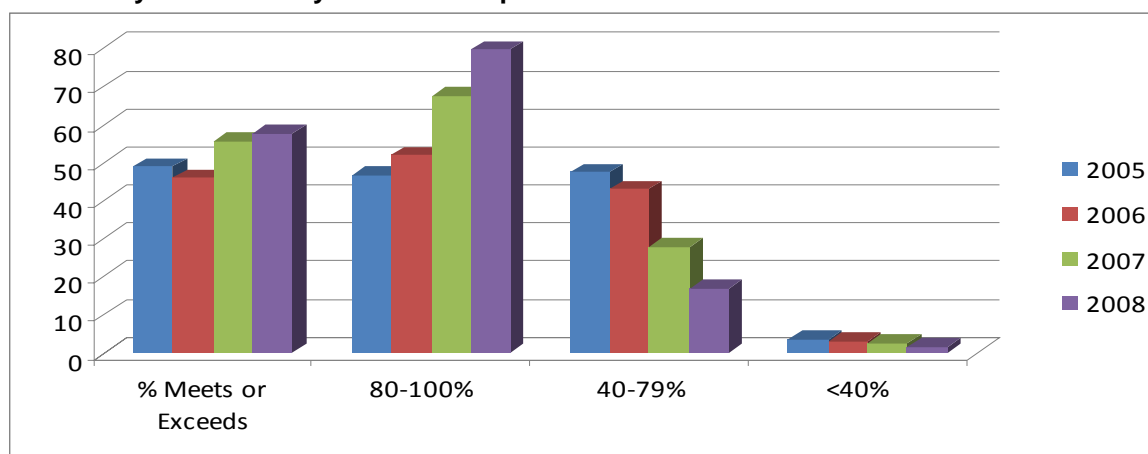
Comparison of EE Student Placement between Schools with Highest (Top 25%) and Lowest (Bottom 25%) IPRT Mean Implementation Scores for FY08

The measures of student outcomes include the school and district EE data. Although this is not a direct measure of a student's educational progress, it reflects access to the best and most challenging learning environment and can be compared to positive trends in ISAT data. For FY2008 data, the figure above showed an apparent relationship between IPRT scores and placement of students with disabilities in general education classrooms. Schools in the top 25% category for overall IPRT mean implementation score had a much higher percentage of students in Education Environment (EE) Code 01 (65.5%) than schools in the bottom 25% category (32.5%). Schools in the bottom 25% group had a greater percentage of students in EE Codes 02, 03, 04, and 05-14 than schools in the top 25% group. This means that schools with higher levels of Project CHOICES implementation, resulting in movement of students to less restrictive settings, have a higher percentage of students included in general education for more of the school day, than schools with lower implementation.

Paxton-Buckley-Loda CUD 10 Comparison of trends in ISAT data and EE data



PBL	Percentage Inside the General Classroom			
	% Meets or Exceeds	80-100%	40-79%	<40%
2005	20.2	35	50.4	10.8
2006	29.6	39.5	45.8	10.5
2007	36.5	49.5	44	0.9
2008	41.6	59.6	34.1	0.5

Gibson City-Melvin-Sibley CUSD 5 Comparison of Trends in ISAT Data and EE Data

GCMS	Percentage Inside the General Classroom			
	% Meets or Exceeds	80-100%	40-79%	<40%
2005	48.9	46.8	47.5	3.5
2006	46	51.9	43	3.2
2007	55.6	67.5	28	2.5
2008	57.5	79.7	16.9	1.4

Four years of data for these two districts are shown above. Note that as the EE data improves, the ISAT Meets/Exceeds data show a similar increase. The significance of this data is found in the matching trends for a fourth year in a row of the data for students who meet or exceed ISAT standards and students with disabilities who are educated in less restrictive environments. This is an example of the sustainability that is possible with commitment at the district level to the education of students with disabilities in less restrictive settings.

Scaling up in Illinois

The Integrated System for Student Achievement (ISSA) is Illinois' process to develop a multi-tiered statewide system to provide strong leadership and dedicated teams to implement the statewide education reform plans the State has proposed. Scaling up moves implementation from a few schools and districts to all schools in Illinois making education more effective and efficient. Scaling up implementation capacity and statewide use of evidence-based practices and other innovations, such as proven methods for supporting students in the general education environment represent a deliberate process of creating and managing change, assessing outcomes, and building capacity.

Other Improvement Activities

To enhance its evaluation, ISBE, in collaboration with Loyola University, has begun working with Dr. Leanne Kallemeyn, professor of research methodology. Dr. Kallemeyn has been working with all technical assistance providers (PBIS, CHOICES, ISRC, IATTAP, ISTAC-P, Project Reach, SEL, SMH, Transition, ASPIRE) to consolidate data collection for reporting purposes. This data collection will be focused on educational environment and achievement. Through this process, a gap in data collection was identified in the area of indicators of adult behavior change. As a result, ISBE is exploring the option of putting together a group of technical assistance providers to work with Dr. Kallemeyn to develop assessment tools for this purpose.

In addition to utilizing the resources of its technical assistance projects, ISBE continues to emphasize educational environment in its Balanced Scorecard through two of the scorecard arenas and several

activities within those arenas. For example, one of the activities under the Policy arena specifically addresses indicator 5C and involves the development of a policy statement that addresses: systemic issue(s), data analysis of categories including separate facilities and private schools, IEP audits, and an action plan to help LEAs gain insight so beliefs and practices surrounding educational environment are positively changed. A second activity stems from the School Improvement and Student Achievement arena of the scorecard, and focuses on increasing the percentage of students placed in general education classroom settings 80% or more of the day. ISBE plans to implement these activities through training and technical assistance, the development of Communities of Practice and collaborating with higher education to improve districts' use of effective practices, such as appropriate accommodations, continuum of services implementation and data-based decision making to determine appropriate programs and placement.

In addition, Indicator 5 and its related requirements are used as the selection criteria for focused monitoring visits to school districts. ISBE uses district educational environment data in the focused monitoring selection process to ensure that SEA resources are allocated to the districts with the greatest need. For example, focused monitoring efforts were shifted to target more medium elementary and medium unit districts during the 2009-2010 school year based on the educational environment data from the 2008-2009 school year. In past years, a greater number of large elementary and large unit school districts met focused monitoring criteria and were selected for visits. This year, data indicated improved educational environment data for large elementary and large unit school districts. Therefore, a greater number of medium elementary and medium unit school districts met criteria and were selected for visits.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008:

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be added to the Tier 3 improvement activities: 1) Assist districts with improvement plans that address corrective actions for issues of noncompliance. This activity was added to assist districts with the identification of factors related to the finding of noncompliance and strategies to address the noncompliance, as well as the correction of identified noncompliance in a timely manner. In addition, two activities needed to be expanded. The statewide evaluation systems Tier 2 activity was expanded to include the exploration of the development of LRE protocols/self-assessments to support district improvement. The SISEP Tier 1 activity was expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: *FAPE in the LRE*

Indicator 6: Percent of children aged 3 through 5 with IEPs attending a:

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

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

Measurement:

- A. Percent = $\left[\frac{\text{(\# of children aged 3 through 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program)}}{\text{(total \# of children aged 3 through 5 with IEPs)}} \right] \times 100$.
- B. Percent = $\left[\frac{\text{(\# of children aged 3 through 5 with IEPs attending a separate special education class, separate school or residential facility)}}{\text{(total \# of children aged 3 through 5 with IEPs)}} \right] \times 100$.

States need not report on Indicator 6 for the FFY08 APR; however, the State and districts will continue to collect data on this indicator. States are required to establish a new baseline, targets, and, as needed, improvement activities for this indicator using 2009-2010 data. These data will be reported in the FFY09 SPP submission, due February 1, 2011. The first APR reporting for Indicator 6 will be in the FFY10 APR, due February 1, 2012.

Part B State Performance Plan (SPP) for 2005-2010

Overview of the SPP Development: Please refer to Indicator 1 in the SPP for a detailed overview of development.

Monitoring Priority: FAPE in the LRE

Indicator 7: 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))

Measurement: Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes (use for FFY 2008-2009 reporting):

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

Measurement for Summary Statement 1:

Percent = $\# \text{ of preschool children reported in progress category (c) plus } \# \text{ of preschool children reported in category (d) divided by } [\# \text{ of preschool children reported in progress category (a) plus } \# \text{ of preschool children reported in category (b) plus } \# \text{ of preschool children reported in category (c) plus } \# \text{ of preschool children reported in category (d)}] \times 100$.

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

Measurement for Summary Statement 2:

Percent = $\# \text{ of preschool children reported in progress category (d) plus } \# \text{ of preschool children reported in category (e) divided by the total } \# \text{ of preschool children reported in progress categories (a) + (b) + (c) + (d) + (e)}] \times 100$.

Overview of Issue/Description of System or Process: The outcome measurement system for Illinois was developed with input from a committee of stakeholders including school district personnel from rural and urban LEAs and special education cooperatives, higher education, and representation from the Department of Human Services who is the Part C Early Intervention (EI) Lead Agency. In Illinois, many school districts and special education cooperatives have high quality assessment practices in place. A large majority of districts and special education cooperatives are funded by ISBE to operate pre-kindergarten programs for children at risk of academic failure. These pre-kindergarten programs, for the most part, are already using evidence-based curricula and assessment systems identified by ISBE. Many districts “blend” their pre-kindergarten programs and early childhood special education services to facilitate a high quality early childhood program for all preschool aged children served by the district.

A fundamental principle in developing the outcome measurement system is that it enhances and adds increased value to the high quality early childhood programs in Illinois. Therefore the outcomes measurement system is based on school districts’ use of multiple sources of information on a child’s functioning on each of the outcomes. Districts are required to choose from a variety of assessment tools (listed below) identified by the committee and ISBE as research-based and technically adequate.

Districts must choose from the following list of research-based, technically adequate assessment tools to measure the progress of children receiving early childhood special education services:

Broad-Based General Assessments

- Assessment, Evaluation, and Programming Systems (AEPS)
- Bank Street
- Battelle Developmental Inventory (BDI)
- Brigance Diagnostic Inventory of Early Development-Revised
- Carolina Curriculum for Infants and Toddlers or Preschoolers with Special Needs
- High Scope Child Observation Record (COR)
- Creative Curriculum
- Learning Accomplishment Profile (LAP) and related instruments (e.g., LAP-D, E-LAP)
- Hawaii Early Learning Profile (HELP)
- Transdisciplinary Play-Based Assessment (TPBA) - Revised (Toni Linder)
- Work Sampling System Illinois (WSS-IL)
- Portage Project 0-6 (WI)

Broad-Based Screening Instruments

- Developmental indicators for Assessment of Learning (DIAL- 3 or DIAL-R)
- Early Screening Inventory (ESI-R or ESI-P)
- Battelle Screen
- Brigance Screen
- Ages and Stages
- AGS Early Screening Profiles
- FirstSTEP-First Screening Test for Evaluating Preschoolers
- CIP (Comprehensive Identification Process) Screen
- Chicago Early
- Infant-Preschool Play Assessment Scale (I-PAS)

Supplemental** Assessments for Social-Emotional (Child Outcome 1)

- Ages and Stages - Social-Emotional
- Vineland Adaptive Behavior Scales

Supplemental Assessments for Literacy (under Child Outcome 2)

- Getting Ready to Read
- Early Literacy Assessment (ELA) - High Scope
- Individual Growth and Developmental indicators (IGDIs) (www.ggg.umn.edu)
- PALS-PreK
- Test of Early Reading Ability (TERA-3)
- Pre-Literacy Rating Scale

Supplemental Assessments for Adaptive Behavior and Meeting Own Needs (Child Outcome 3)

- Ages and Stages - Social-Emotional
- Vineland Adaptive Behavior Scales

*This list does not include assessments that would be used by therapists or other specialists as part of their evaluation of particular areas of development (e.g., speech-language pathologists might use the Preschool Language Scale or other specialized instrument to obtain more in-depth information on a child's language development or a psychologist might use the Mullen Scale).

**Supplemental assessments will be useful when the general assessment does not cover all of the required areas, or for children who are receiving only speech services.

ISBE has adapted the *Child Outcomes Summary Form* (COSF) by adding the relevant Illinois Early Learning Standards (ELS) as "sub-areas" in the 3 required outcome areas. In order to provide a uniform scale for the State, districts will use the COSF developed by the ECO Center to report measurement data on each child. The Illinois Child Outcomes Measurement System will be:

- Based on developmental progress.
- Focused on child behavior in real settings (authentic)
- Accommodate children's special sensory, motor and cultural needs
- Aligned with outcome systems for typically developing children

The Illinois COSF utilizes a 7 point rating scale for each early learning standard sub-area, with an overall rating for each required outcome area. A "7" represents functioning at the same level as a typically developing peer, whereas the "1" represents functioning that is farthest removed from that of a typically developing peer. Anchors are provided for the "3" and the "5" as well. The anchors are described in terms of how typical the behavior is in everyday situations, in comparison to expectations for age-matched peers, and in terms of conditions or behaviors that interfere with the child's ability to achieve age-expected behaviors and skills. The 2, 4 and 6 ratings are used if the team feels that, based on all of the information available, the child's functioning lies somewhere between the scale points that are defined. A score of 6 or 7 is the criteria for defining "comparable to same age peers."

The Overall Summary Rating for each one of the 3 outcomes is linked to "sub-areas" that reflect the ELS. The sub-areas are rated first, using a consensus process, based on the best available information. The sub-areas are then considered together, with more consensus discussion to determine the overall rating. The overall rating is not an average; instead, it is based on consensus, using the sub-area ratings as one more piece of information. The purpose of the sub-area ratings is to help the team think about the many things that should be considered in the overall ratings. The Illinois COSF includes a section to document the evidence that was used for making each of the summary ratings. Including the Early Learning

Standards in the COSF assists teams in rating the child comparable to same-aged peers and increases the validity and reliability of the ratings.

Illinois uses a team process to complete the developmental ratings on each child. The team is comprised of 2 or more persons who meet to complete the rating scale and select the outcome indicator. The team considers information from those familiar with the child in a variety of contexts and uses a systematic process for making decisions. The team process is supported by having individuals who have knowledge of typical child development, regular monitoring of child progress, multiple sources of information and a structure for coming to team consensus. The districts have flexibility in who participates and how the team process is accomplished, but they are required to submit a plan to ISBE regarding their process and what measurement tools they intend to use.

The COSF may be completed as a part of the Individual Family Service Plan/Individualized Education Program (IFSP/IEP) meeting, as a result of a meeting of staff familiar with the child, or by a special educator and a parent. The team bases their ratings on existing child data, including evaluations and information provided by the parents of the child, current classroom-based assessments and observations, and observations by teachers and related service providers to determine the present levels of performance. Outcome ratings will be discussed and included at initial IEP development or within 30 school days of IEP development and upon the child's exit from ECSE services.

The Illinois early childhood training and technical assistance system, STARNET, which has been in existence for 21 years, has 6 regional centers that provided regional training for providers, administrators and families. STARNET staff and a consultant from the University of Illinois developed a training module on using the COSF, using the web based system, reporting data, and interpreting and using data for program improvement. The training module was implemented in January of 2006 and is posted on the ISBE website at: http://www.isbe.net/earlychi/pdf/Child_Out_PP_7-06.pdf.

The Early Childhood Outcomes Systems (ECOS) for Part B and Part C are aligned. Both systems use the same child outcomes and the same reporting process. Exit information from Part C can be used as entry information for Part B.

The ECOS data collection system was incorporated into the SIS in Fall 2009. Districts may continue to use the assessment tools from the list above, however, on exit they are required to choose the curriculum-based assessment used with the child, from eight possible "anchor" assessments. Districts are also required to report how parent information was used in determining the ratings and who participated in the rating process by role. All other processes described above remain the same.

Children aged 3 through 5 years old who entered early childhood special education services after March of 2006, and exited with at least 6 months of service are included in the assessment and reporting process. The outcome ratings from entrance into the Early Childhood Special Education (ECSE) program will be matched to exit outcome ratings for individual children. At the district and state levels, analysis of matched scores will yield for each of the three outcomes:

- a) Percent of preschool children who did not improve functioning.
- b) Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.
- c) Percent of preschool children who improved functioning to a level nearer to same aged peers but did not reach it (improved developmental trajectory).
- d) Percent of children who improved functioning to reach a level comparable to same aged peers (gap closes).
- e) Percent of children who maintained functioning at a level comparable to same-aged peers.

Baseline Data for FFY 2008 (2008-2009):

Progress Data for Preschool Children Exiting 2008-2009

A. Positive social-emotional skills (including social relationships):	Number of children	% of children
a. Percent of children who did not improve functioning	379	3.8%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	503	5.0%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	3067	30.8%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	4275	42.9%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	1743	17.5%
Total	N=9967	100%
B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):	Number of children	% of children
a. Percent of children who did not improve functioning	347	3.5%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	518	5.2%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	3036	30.5%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	4291	43.1%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	1775	17.8%
Total	N=9967	100%
C. Use of appropriate behaviors to meet their needs:	Number of children	% of children
a. Percent of children who did not improve functioning	311	3.1%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	427	4.3%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	1999	20.1%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	4787	48.0%

e. Percent of children who maintained functioning at a level comparable to same-aged peers	2443	24.5%
Total	N=9967	100%

Baseline Data for Preschool Children Exiting 2008-2009

Summary Statements	% of children
Outcome A: Positive social-emotional skills (including social relationships)	
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program	89.3%
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program	60.4%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program	89.4%
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program	60.9%
Outcome C: Use of appropriate behaviors to meet their needs	
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program	90.2%
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program	72.5%

Discussion of Baseline Data:

Illinois uses the summary statements developed by the ECO Center to report and establish baseline data for FFY 2008. These data represent children who entered early childhood programs during the 2005-2006, 2006-2007, 2007-2008, or 2008-2009 school years, were in the program for at least 6 months and exited during the 2008-2009 school year. In FFY 2008, Illinois saw consistent results across all three outcome areas. For example, in outcome areas A, B and C, approximately 90% of children showed substantial growth in the respective area. For outcome areas A and B, approximately 60% of children exit the program within age expectations. More students are exiting the program within age expectations in outcome area C, at 72.5%

Measurable and Rigorous Target:

**Targets for Preschool Children Exiting in FFY 2009 (2009-10) and FFY 2010 (2010-2011)
and Reported in Feb 2011 and Feb 2012**

Summary Statements	Targets FFY 2009 (% of children)	Targets FFY 2010 (% of children)
Outcome A: Positive social-emotional skills (including social relationships)		
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program	89.5%	90.0%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program	61.0%	61.5%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)		
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program	90.0%	90.5%
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program	61.5%	62.0%
Outcome C: Use of appropriate behaviors to meet their needs		
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program	90.5%	91.0%
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program	73.0%	73.5%

After reviewing the FFY 2008 baseline data and seeking stakeholder input from ISAC, Illinois set the targets above for Indicator 7. Since these measurements and analyses are relatively new on a national level, Illinois chose to set conservative targets for FFY 2009 and 2010. The state plans to review and adjust these targets, as necessary, as trend data become available.

Improvement Activities/Timelines/Resources:

Preschool outcome improvement activities are related to several other indicators in the SPP including Indicators 6, 8, 12 and 20.

Improvement Category	Improvement Activity	Timeline(s)	Resources & Person(s) Responsible
A. Improving Data Collection and Reporting	Utilize data warehousing capabilities to compile, analyze and report data. <ul style="list-style-type: none"> Conduct ECSE Coordinators Roundtable meetings across the state to provide ongoing training and support on ECOS and SIS integration. 	Ongoing through 2010-2011	ISBE Special Education Division ISBE Early Childhood Division, Support and Technical Assistance Regionally (STARNET), Early Childhood Outcomes (ECO) Stakeholder Group SIS, SEARS, ECO Center

	<p>Conduct a comparison of the COSF ratings and available evaluation and assessment data with ECSE Coordinators, EC teachers, school social workers and other relevant personnel.</p> <ul style="list-style-type: none"> ▪ Incorporate information obtained into guidance and training materials to continuously improve data quality 	Ongoing through 2010-2011	<p>ISBE Special Education Division</p> <p>ISBE Early Childhood Division, STARNET, ECO Stakeholder Group, EC Teachers, School Social Workers</p> <p>COSF ratings, evaluation and assessment data</p>
C. Building Systems and Infrastructures to Deliver Support and Technical Assistance	Survey districts to ascertain training and technical assistance needs.	Annually	<p>ISBE Special Education Division</p> <p>ISBE Early Childhood Division</p> <p>STARNET</p>
<p>C. Building Systems and Infrastructures to Deliver Support and Technical Assistance</p> <p>G. Improving Collaboration and Coordination</p>	Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and Rtl, the Federal Grants & Programs division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.	Ongoing through 2010-2011	<p>ISBE Agency Divisions</p> <p>SISEP grant</p> <p>National Technical Assistance Center (SISEP), National Technical Assistance Center on PBIS, National Center on Rtl, Great Lakes West Comprehensive Center, RRFC Network</p>
D. Providing Technical Assistance, Training and Professional Development	<p>LEAs will utilize statewide technical assistance projects to implement multi-tiered, systemic social-emotional, language and behavior supports.</p> <ul style="list-style-type: none"> ▪ Preschool Rtl 	Ongoing through 2010-2011	<p>ISBE Special Education, Early Childhood and Curriculum & Instruction Divisions</p> <p>PBIS Network, Project CHOICES, SEL Project, ISTAC Parents, IASPIRE, IATTAP, STARNET</p> <p>ISTAC website, online training modules</p>
	Provide training on evaluation and assessment tools that are considered valid and reliable, and that have been cross-walked by the ECO Center to allow assessment results to appropriately inform ratings on the COSF, thereby increasing inter-rater reliability.	Ongoing through 2010-2011	<p>ISBE Early Childhood Division</p> <p>STARNET, EC Block Grant, EC Training & Technical Assistance Project, ECO Stakeholder Group</p>
D. Providing Technical Assistance, Training and Professional	Provide technical assistance and training to enhance the capacity of general and special educators to implement research based practices that will improve early	Ongoing through 2010-2011	<p>ISBE Special Education Division</p> <p>ISBE Early Childhood Division</p>

Development G. Improving Collaboration and Coordination	<p>childhood (EC) outcomes through:</p> <ul style="list-style-type: none"> Partnerships with state agencies, parents, community agencies, etc. to develop a sustainable system of support. Integration efforts among initiatives (e.g., cross training, sharing resources, utilizing common guiding principles, developing shared evaluation tools and system). Training sessions on EC outcomes during the statewide conference, Sharing a Vision and/or the Special Education Directors Conference. 		<p>ISTAC partners, DHS, Child and Family Connections (CFCs), district staff</p> <p>ECO Center</p>
H. Evaluating Improvement Processes and Outcomes	Determine whether SPP/APR improvement activities are being implemented as planned and are reaching the target audience.	Quarterly through 2010-2011	<p>ISBE Special Education Division</p> <p>ISBE Early Childhood Division</p> <p>NCRRC</p>
	Develop and pilot a quality assurance protocol based on COSF review.	October 2010	<p>ISBE Early Childhood Division</p> <p>ECO Stakeholder Group</p> <p>ECO Center</p>

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: FAPE in the LRE

Indicator 8: 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))

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

FFY	Measurable and Rigorous Target
2008	56.0%
(2008-2009)	Actual Target Data
	62.3%

Survey Sampling Methodology:

ISBE continued to use the first 25 items from the Parent Survey developed by the National Center for Special Education Accountability Monitoring (NCSEAM) to measure the percentage of parents who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

To ensure a representative sample of the population statewide and from each LEA annually, ISBE uses a sampling calculator to select a sample of LEAs for each school year. ISBE developed a six year cycle for LEAs selected to ensure that every LEA is included in this data collection over the span of the State Performance Plan. This six-year cycle has been carefully developed to ensure the sample of families selected for the survey annually are reflective of the State and each LEA demographically in terms of age, primary disability, race/ethnicity, and gender. ISBE sends the Illinois Parent Involvement Survey to all parents of students with disabilities within the district during the year the LEA has been selected for the survey, except for the Chicago Public Schools (CPS) District 299. CPS has been selected every year of the six year cycle, and ISBE ensures that a proportionate representation of parents of students with disabilities from the district receive the survey annually.

Of the 54,980 parents of students with disabilities in Illinois who were selected to participate in the 2008-2009 Illinois Parent Involvement Survey, 7,646 parents responded, yielding a 13.9% response rate. 88.7% of the respondents completed the survey in English, while 11.3% of the respondents completed the survey in Spanish. The sample of 54,980 families was carefully selected to ensure accurate representation of student demographic statewide and by LEA. Demographic information collected from returned surveys was analyzed by race/ethnicity, age, gender and disability. The data show that ISBE's efforts are reasonable, the results are adequate to evaluate parent involvement and the response rate was representative of the population in terms of age and gender. ISBE found that among families who responded to the survey, those with students with Speech/Language Impairments were slightly underrepresented as compared to statewide Child Count data. Further, families with students with

Autism were slightly overrepresented among the survey respondents. Finally, ISBE found that families who were Hispanic were slightly overrepresented among sample respondents, while families that were Caucasian were slightly underrepresented among sample respondents. While generally pleased with the validity and reliability of these data with regard to the representativeness of the survey respondents, ISBE continues to work with stakeholders and the NCRRC to improve the response rate for the Indicator 8 Parent Survey. ISBE is currently investigating the feasibility of utilizing ISTAC Parents project staff to implement strategies to improve the survey response rate. For example, ISBE is considering the benefit of project staff making podcasts available for parents in English and Spanish to provide additional information and clarification on specific survey questions and to address frequently asked questions regarding the survey.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

The data indicate that the FFY08 percentage for this indicator remained steady as compared to FFY07 data (62.4%). Of the 7,646 families who responded to the survey, 4,762 (62.3%) reported that schools facilitated parent involvement as a means of improving services and results for children with disabilities in FFY08. It is believed that the completion of improvement activities contributed to the percentage on this indicator. During 2008-2009 the improvement activities listed for Indicator 8 in Illinois's State Performance Plan were implemented. ISBE continues to collect data to improve practice around the state via its technical assistance projects, such as PBIS, IATTAP and the ISTAC Parents. Areas of need identified through the survey responses have been included in parent training modules provided by ISTAC Parents. These issues are also addressed in the expansion of the new educational rights guide and the focused monitoring public forums. In addition, ISBE continues to ensure parent involvement in state level decision-making through their inclusion on stakeholder groups such as ISAC, the LEA determinations stakeholder group and other committees. Finally, ISBE continues to include parents as full members on Focused Monitoring teams. Parents are equal team members participating in parent and school personnel interviews and student file reviews. Parents also facilitate the public forum held in conjunction with the onsite monitoring review. In addition, districts participating in the monitoring process are encouraged to include parents on the District Improvement Plan Team and in the development of the District RtI Plan.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008:

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be removed because it was completed: 1) Develop an updated version of the Parents' Educational Rights Guide that includes changes in IDEA 2004 and state law and regulations. In addition, two activities needed to be expanded: 1) Utilize data warehousing capabilities to compile, analyze and report data to improve practice and 2) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and RtI, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments. An additional bullet point was added to the data warehousing activity that addresses investigating the feasibility of utilizing ISTAC Parents project staff to implement strategies to improve the survey response rate. The SISEP activity was expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Disproportionality

Indicator 9: 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))

Measurement: Percent = $\left[\frac{\text{(\# of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification)}}{\text{(\# of districts in the State)}} \right] \times 100$.

Definition of “Disproportionate Representation” and Methodology

Disproportionate representation (or disproportionality) of racial/ethnic groups in special education is defined as students in a particular racial/ethnic group (i.e., Asian, Black, Hispanic, Native American or White) being at a considerably greater or lesser risk of being identified as eligible for special education and related services than all other racial/ethnic groups enrolled either in the district or in the state (depending on the type of risk ratio calculation applied, as discussed below). ISBE uses a risk ratio to determine state risk for racial/ethnic disproportionality. To determine district risk for racial/ethnic disproportionality, ISBE uses a weighted risk ratio for districts in which there are at least 10 students in the racial/ethnic group and at least 10 students in the comparison group (all students in the racial/ethnic group enrolled in the district), and an alternate risk ratio for districts in which there are at least 10 students in the racial/ethnic group but fewer than 10 students in the comparison group enrolled in the district. Data utilized for these calculations are taken from annual Fall Housing Reports (for all students, grades 1-12) and December Child Count (for students with IEPs, ages 6-21), which is the same data reported to OSEP on Table 1 (Child Count) of Information Collection 1820-0043 (Report of Children with Disabilities Receiving Special Education under Part B of the IDEA, as amended).

Determining if Disproportionate Representation is the Result of Inappropriate Identification

ISBE uses a two-step process to determine the existence of disproportionality based on race and ethnicity in special education that is the result of inappropriate identification. First, ISBE calculates a weighted or alternate risk ratio for every school district in the state with regard to overall special education eligibility. Such risk ratios are calculated for each racial/ethnic group enrolled in a district. ISBE's criterion for determining overrepresentation based on race/ethnicity is a calculated weighted or alternate risk ratio of 3.0 or higher for three consecutive years for a particular racial/ethnic group in which there are at least ten students in the special education population. ISBE's criterion for determining underrepresentation based on race/ethnicity is a calculated weighted or alternate risk ratio of 0.25 or lower for three consecutive years for a particular racial/ethnic group in which there are at least ten students in the special education population. Second, in order to verify whether the disproportionality is the result of inappropriate identification in those districts with a risk ratio of 3.0 or higher or 0.25 or lower, ISBE requires the identified districts to conduct self-assessment activities, including data verification and a review of policies, practices and procedures, and then submit the results of those activities to ISBE. Upon receipt, ISBE reviews the district documentation (which includes information resulting from the LEA's review of policies, practices and procedures) and, combined with the district data, determines whether or not the disproportionality is, in fact, the result of inappropriate identification of students.

FFY08 data document that 9 out of 867, or 1.0% of all Illinois districts had disproportionate representation of one or more racial and ethnic groups in special education. None (0) of the districts were found to have disproportionality due to inappropriate identification. Accordingly, final data indicate that Illinois met the target of 0% (0 districts/867 districts) in FFY08.

FFY	Measurable and Rigorous Target
2008	0%
(2008-2009)	Actual Target Data
	0%

Districts with Disproportionate Representation of Racial and Ethnic Groups that was the Result of Inappropriate Identification

Year	Total Number of Districts	Number of Districts with Disproportionate Representation	Number of Districts with Disproportionate Representation of Racial and Ethnic Groups that was the Result of Inappropriate Identification	Percent of Districts
FFY 2008 (2008-2009)	867	9	0	0.00%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

In terms of disproportionate representation of racial and ethnic groups that was the result of inappropriate identification, the data indicate that the FFY08 percentage for this indicator remained steady as compared to FFY07 data (0%). ISBE continues to meet the target of 0% of districts determined to have disproportionate representation of racial/ethnic groups in special education due to inappropriate identification in FFY08. Therefore, all LEAs were found in compliance. It is believed that the completion of the improvement activities discussed below contributed to the percentage on this indicator. ISBE has made a concerted effort to increase the number of technical assistance resources available to districts to ensure their policies, procedures and practices result in the appropriate identification of students as eligible for special education. These resources include multiple types of training and technical assistance provided through the ISBE disproportionality webpage, IASPIRE and the Illinois PBIS Network, which focus on helping districts improve core instructional and behavioral programs and implement tiered academic and behavior interventions through a RtI framework.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008:

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be added: 1) Assist districts with improvement plans that address corrective actions for issues of noncompliance. This activity was added to assist districts with the identification of factors related to the finding of noncompliance and strategies to address the noncompliance, as well as the correction of identified noncompliance in a timely manner. In addition, another activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and RtI, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Disproportionality

Indicator 10: 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))

Measurement: Percent = $\left[\frac{\text{(\# of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification)}}{\text{(\# of districts in the State)}} \right] \text{ times } 100.$

Definition of “Disproportionate Representation” and Methodology

Disproportionate representation (or disproportionality) of racial/ethnic groups in special education disability categories is defined as students in a particular racial/ethnic group (i.e., Asian, Black, Hispanic, Native American or White) being at a considerably greater or lesser risk of being identified as eligible for special education and related services in a specific disability category (Speech/Language, Specific Learning Disability, Emotional Disturbance, Mental Retardation, Autism and Other Health Impaired) than all other racial/ethnic groups enrolled either in the district or in the state (depending on the type of risk ratio calculation applied, as discussed below). ISBE uses a risk ratio to determine state risk for racial/ethnic disproportionality. To determine district risk for racial/ethnic disproportionality, ISBE uses a weighted risk ratio for districts in which there are at least 10 students in the racial/ethnic group and at least 10 students in the comparison group (all students in the racial/ethnic group enrolled in the district), and an alternate risk ratio for districts in which there are at least 10 students in the racial/ethnic group but fewer than 10 students in the comparison group enrolled in the district. Data utilized for these calculations are taken from annual Fall Housing Reports (for all students, grades 1-12) and December Child Count (for students with IEPs, ages 6-21), which is the same Child Count data reported to OSEP.

Determining if Disproportionate Representation is the Result of Inappropriate Identification

ISBE uses a two-step process to determine the existence of disproportionality based on race and ethnicity in special education that is the result of inappropriate identification. First, ISBE calculates a weighted or alternate risk ratio for every school district in the state with regard to special education eligibility in the categories listed above. Such risk ratios are calculated for each racial/ethnic group enrolled in a district. ISBE's criterion for determining overrepresentation based on race/ethnicity is a calculated weighted or alternate risk ratio of 3.0 or higher for three consecutive years for a particular racial/ethnic group in which there are at least ten students in the special education disability category in question. ISBE's criterion for determining underrepresentation based on race/ethnicity is a calculated weighted or alternate risk ratio of 0.25 or lower for three consecutive years for a particular racial/ethnic group in which there are at least ten students in the special education disability category in question. Second, in order to verify whether the disproportionality is the result of inappropriate identification in those districts with a risk ratio of 3.0 or higher or 0.25 or lower, ISBE requires the identified districts to conduct self-assessment activities, including data verification and a review of policies, practices and procedures related to child find, evaluations, eligibility determinations and IEPs. The LEA then submits the results of those activities to ISBE. Upon receipt, ISBE reviews the district documentation (which includes information resulting from the LEA's review of policies, practices and procedures) and, combined with the district data, determines whether the disproportionality is in fact the result of inappropriate identification of students.

FFY	Measurable and Rigorous Target
2008 (2008-2009)	0.00%
	Actual Target Data
	0.00%

Districts with Disproportionate Representation of Racial and Ethnic Groups in Specific Disability categories that was the Result of Inappropriate Identification

Year	Total Number of Districts	Number of Districts with Disproportionate Representation	Number of Districts with Disproportionate Representation of Racial and Ethnic Groups in specific disability categories that was the Result of Inappropriate Identification	Percent of Districts
FFY 2008 (2008-2009)	867	120	0	0.00%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

FFY08 data document that 120 out of 867, or 13.8% of all Illinois districts had disproportionate representation of one or more racial and ethnic groups in one or more specific disability categories. Of the 120 districts that had disproportionate representation of one or more racial and ethnic groups in one or more specific disability categories and were required to complete a self-assessment, none (0 out of 120) were found to have disproportionality due to inappropriate identification. Therefore, Illinois met the target of 0% in FFY08. Illinois made progress in reducing the percentage of districts with inappropriate identification, in that the FFY08 percentage decreased to zero percentage points from 0.23 percentage points in comparison with FFY07 data.

It is believed that the completion of the improvement activities discussed below contributed to the percentage on this indicator. ISBE has made a concerted effort to increase the number of technical assistance resources available to districts to ensure their policies, procedures and practices result in the appropriate identification of students as eligible for special education. These resources include multiple types of training and technical assistance provided through the ISBE disproportionality webpage, IASPIRE and the Illinois PBIS Network, which focus on helping districts improve core instructional and behavioral programs and implement tiered academic and behavior interventions through a RtI framework.

Correction of FFY 2007 Findings of Noncompliance (if State reported more than 0% compliance):

Level of compliance (actual target data) State reported for FFY 2007 for this indicator: 99.77%

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007 through June 30, 2008)	2
2. Number of FFY 2007 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	2
3. Number of FFY 2007 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Verification of Correction (either timely or subsequent):

All findings of noncompliance for this indicator were made at the district level. Based upon LEA improvement plans, status reports, evaluation reports, file reviews and/or documentation of revisions to policies, procedures and practices, ISBE has verified that the 2 LEAs with noncompliance identified in FFY07, the 3 remaining LEAs with noncompliance identified in FFY06 and the 2 remaining LEAs with noncompliance identified in FFY05 are correctly implementing the specific regulatory requirements for Indicator 10. None of the original 4 LEAs identified with noncompliance for FFY05 were identified with noncompliance for FFY06. Likewise, none of the original 4 LEAs identified with noncompliance for FFY06 were identified with noncompliance for FFY07. Finally, neither of the original 2 LEAs identified with noncompliance for FFY07 was identified with noncompliance for FFY08. All FFY07, FFY06 and FFY05 findings of noncompliance related to Indicator 10 are now closed.

Correction of Remaining FFY 2006 Findings of Noncompliance (if applicable):

1. Number of remaining FFY 2006 findings noted in OSEP's June 1, 2009 FFY 2007 APR response table for this indicator	3
2. Number of remaining FFY 2006 findings the State has verified as corrected	3
3. Number of remaining FFY 2006 findings the State has not verified as corrected [(1) minus (2)]	0

Correction of Any Remaining Findings of Noncompliance from FFY 2005 or Earlier (if applicable):

Provide information regarding correction using the same format provided above.

1. Number of remaining FFY 2005 findings noted in OSEP's June 1, 2009 FFY 2007 APR response table for this indicator	2
2. Number of remaining FFY 2005 findings the State has verified as corrected	2
3. Number of remaining FFY 2005 findings the State has not verified as corrected [(1) minus (2)]	0

Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
The State must demonstrate that the noncompliance was corrected by reporting that it has verified that each LEA with noncompliance identified in FFY07, each of the 3 LEAs with remaining noncompliance identified in FFY06, and each of the 2 LEAs with remaining noncompliance identified in FFY05 (1) is correctly implementing the specific regulatory requirements and (2) has corrected each individual case of noncompliance.	Based upon LEA improvement plans, status reports, evaluation reports, file reviews and/or documentation of revisions to policies, procedures and practices, ISBE has verified that the 2 LEAs with noncompliance identified in FFY07, the 3 LEAs with remaining noncompliance identified in FFY06 and the 2 LEAs with remaining noncompliance identified in FFY05 are correctly implementing the specific regulatory requirements <u>and have corrected each individual case of noncompliance</u> for Indicator 10. All findings of noncompliance related to this indicator were made at the district level. All FFY07, FFY06 and FFY05 findings of noncompliance related to Indicator 10 are now closed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008:

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be added: 1) Assist districts with improvement plans that address corrective actions for issues of noncompliance. This activity was added to assist districts with the identification of factors related to the finding of noncompliance and strategies to address the noncompliance, as well as the correction of identified noncompliance in a timely manner. In addition, another activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and Rtl, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Effective General Supervision Part B / Child Find

Indicator 11: 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))

Measurement:

- a. # of children for whom parental consent to evaluate was received.
- b. # of children whose evaluations were completed within 60 days (or State established timeline).

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

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

FFY	Measurable and Rigorous Target
2008	100%
(2008-2009)	Actual Target Data
	97.7%

Children Evaluated Within 60 Days (or State-established timeline)

a. Number of children for whom parental consent to evaluate was received	43,140
b. Number of children whose evaluations were completed within 60 days (or State-established timelines)	42,150
Percent of children with parental consent to evaluate, who were evaluated within 60 days (or State established-timeline) (Percent = [(b) divided by (a)] times 100)	97.7%

Range of school days beyond 60-day timeline	Number of children included in (a) but not included in (b)
1-10	593
11-20	219
21-30	84
30 and beyond	94
Total	990

Reported reasons for exceeding the 60-day timeline included staffing issues, medical issues and parent requests to reschedule meetings.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008 (2008-2009):

The data for Indicator 11 remain statistically unchanged from 98.2% in FFY07 to 97.7% in FFY08. Districts continue to electronically report data for this indicator via the Funding & Child Tracking System (FACTS). FACTS requires LEAs to indicate the reason(s) for delay when Indicator 11 timelines are not met. LEAs are not able to continue with the data reporting process in FACTS until this piece is completed. During 2008-2009 the improvement activities listed for Indicator 11 in Illinois's State Performance Plan were implemented. ISBE will continue to provide multiple methods of technical assistance regarding child find responsibilities and timelines, and accurate and reliable reporting of data. During FFY08 ISBE developed and distributed the State Performance Plan Indicator 11 Resource Guide for LEA use. LEAs with findings of noncompliance for Indicator 11 during FFY08 were required to utilize the Guide as a tool to review, and revise as appropriate, their policies, procedures and practices related to their identified noncompliance.

Findings of Noncompliance (if State reported less than 100% compliance):

As explained in the FFY07 APR, the State did not make findings of noncompliance for districts whose initial evaluations were not completed within 60 days of receiving parental consent because it was addressing the issue through the use of individualized district improvement plans (DIPs) and the State's LEA Determinations Process. The State had the understanding that this was an acceptable practice prior to the September 3, 2008 OSEP guidance document entitled, "*Frequently Asked Questions Regarding Identification and Correction of Noncompliance and Reporting on Correction in the SPP/APR*" and the October 17, 2008 OSEP memorandum entitled, "*Reporting on Correction of Noncompliance in the Annual Performance Report Required under Sections 616 and 642 of the Individuals with Disabilities Education Act.*" These documents marked the first written notification from OSEP that findings of noncompliance were to be made based on data reported by LEAs through the State's data system(s). Therefore, after receiving technical assistance and additional clarification from OSEP between November 2008 and January 2009, ISBE implemented the following plan to issue findings of noncompliance to LEAs that did not reach the measurable and rigorous target of 100% for this indicator based on data reported by the LEAs through the State's data system:

- Introduced this new information to districts via various modes of communication (IAASE spring conference, Special Education Director's Conference, State Superintendent's Bulletin) between January and September 2009;
- Made findings of noncompliance in October of 2009 based on federal regulations aligned with Indicator 11, after data had been verified by the State; and
- Will now ensure district- and student-level timely correction of noncompliance within one year through follow up with districts.

ISBE notified districts of their student-level findings of noncompliance related to Indicator 11 in October of 2009. ISBE made 990 findings of noncompliance in the fall of 2009 based on FFY08 data for Indicator 11. LEAs were required to correct each case of noncompliance, unless the child was no longer within the jurisdiction of the LEA and utilize the ISBE SPP Indicator 11 Resource Guide as a tool to review, and revise as appropriate, its policies, procedures and/or practices related to the identified noncompliance. LEAs were then required to submit a report to ISBE that detailed their review process and any revisions made to policies, procedures and/or practices to ensure that noncompliance was corrected to 100%. All 990 of the initial evaluations (100%) have been completed by the affected LEAs, although late. In addition, all 990 of the initial evaluations (100%) were timely corrected. As part of ISBE's verification process for the correction of noncompliance, each LEA with findings of noncompliance was also required to document that it is correctly implementing the specific regulatory requirements related to the finding. All of the LEAs with findings of noncompliance met the standard of correction and have timely corrected for their corresponding 990 findings. Therefore, all required corrections for FFY08 findings of noncompliance related to Indicator 11 have been completed.

Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
<p>ISBE must verify that each district with noncompliance reported in the FFY07 APR 1) is correctly implementing the specific regulatory requirements and 2) has completed the initial evaluation, although late, unless the child is no longer within the jurisdiction of the district.</p>	<p>All 245 districts (100%) identified in the FFY07 APR have completed the initial evaluation, although late, and have subsequently corrected in terms of the initial evaluation completion. In addition, these districts accessed technical assistance from ISBE regarding the correct implementation of specific regulatory requirements related to Indicator 11, and 240 of the 245, or 98%, met ISBE's standard of correction and are now correctly implementing the specific regulatory requirements. The remaining 5 districts had not yet met the target of 100%. Therefore, ISBE implemented enforcement actions for the 5 districts. ISBE made findings of noncompliance in October 2009 and required these districts to demonstrate correction at the student level. Each LEA was required to correct each individual case of noncompliance, unless the child was no longer within the jurisdiction of the LEA. In addition, each LEA was required to utilize the SPP Indicator 11 Resource Guide as a tool to review, and revise as appropriate, its policies, procedures and/or practices related to the identified noncompliance. Each LEA was then required to submit a report to ISBE detailing the review process and any revisions made to policies, procedures and/or practices as a result of the review. All 5 of these LEAs (100%) have met the standard of correction, are correctly implementing the specific regulatory requirements and have subsequently corrected.</p>

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008 (2008-2009)

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be added to the State Performance Plan to assist districts with the identification of factors related to the finding of noncompliance and strategies to address the noncompliance, as well as the correction of identified noncompliance in a timely manner: 1) Assist districts with improvement plans that address corrective actions for issues of noncompliance. Another activity was expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and Rtl, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Indicator 12: 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))

Measurement:

- # of children who have been served in Part C and referred to Part B for eligibility determination.
- # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
- # of those found eligible who have an IEP developed and implemented by their third birthdays.
- # of children for whom parent refusal to provide consent caused delays in evaluation or initial services.
- # of children who were referred to Part C less than 90 days before their third birthdays.

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

Percent = [(c) divided by (a – b – d – e) times 100.

FFY	Measurable and Rigorous Target
2008	100%
(2008-2009)	Actual Target Data
	98.9%

Data collection for Indicator 12 is integrated into the statewide ISBE Student Information System (SIS). Indicator 12 specific data elements include: whether the child was served in Early Intervention (EI); whether there was a referral from Child and Family Connections; EI number; eligibility determination date; reason for delay in transition; IEP completion date and date services began.

Actual State Data (Numbers)

a. # of children who have been served in Part C and referred to Part B (LEA notified pursuant to IDEA section 637(a)(9)(A) for Part B eligibility determination)	8300
b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday	834
c. # of those found eligible who have an IEP developed and implemented by their third birthdays	5799

d. # for whom parent refusals to provide consent caused delays in evaluation or initial services	1596
e. # of children who were referred to Part C less than 90 days before their third birthdays. <i>[This information is not required until the 2011 submission but may be reported in 2010 if the State's data are available.]</i>	4
# in a but not in b, c, d, or e.	67
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 Percent = $[(c) / (a-b-d-e)] * 100$	98.9%

Range of days beyond required timeline	Number of children
1-30	25
31-60	23
61-90	12
90 and beyond	7
Total	67

Reported reasons for exceeding the timeline included staffing issues, medical issues and parent requests to reschedule meetings.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008 (2008-2009):

The data indicate progress from 98.3% in FFY07 to 98.9% in FFY08. It is believed that the completion of the improvement activities discussed below contributed to the progress on this indicator. During 2008-2009 the improvement activities listed for Indicator 12 in Illinois's State Performance Plan were implemented. ISBE will continue to provide multiple methods of technical assistance to district special education cooperative personnel, CFC personnel and parents regarding the Part C to Part B transition process and accurate and reliable reporting of data. ISBE will also continue to collaborate with DHS through a data sharing agreement to ensure the timeliness, accuracy and reliability of early childhood transition data.

Findings of Noncompliance (if State reported less than 100% compliance)

As explained in the FFY07 APR, the State did not make findings of noncompliance for districts whose children transitioning from Part C to Part B did not have an IEP developed and implemented by their third birthdays because it was addressing the issue through the use of individualized district improvement plans (DIPs) and the State's LEA Determinations Process. The State had the understanding that this was an acceptable practice prior to the September 3, 2008 OSEP guidance document entitled, "*Frequently Asked Questions Regarding Identification and Correction of Noncompliance and Reporting on Correction in the SPP/APR*" and the October 17, 2008 OSEP memorandum entitled, "*Reporting on Correction of Noncompliance in the Annual Performance Report Required under Sections 616 and 642 of the Individuals with Disabilities Education Act.*" These documents marked the first written notification from OSEP that findings of noncompliance were to be made based on data reported by LEAs through the State's data system(s). Therefore, after receiving technical assistance and additional clarification from OSEP between November 2008 and January 2009, ISBE implemented the following plan to issue findings of noncompliance to LEAs that did not reach the measurable and rigorous target of 100% for this indicator based on data reported by the LEAs through the State's data system:

- Introduced this new information to districts via various modes of communication (IAASE spring conference, Special Education Director's Conference, State Superintendent's Bulletin) between January and September 2009;
- Made findings of noncompliance in March of 2010 based on federal regulations aligned with Indicator 12, after data had been verified by the State; and
- Will ensure timely correction of noncompliance within one year through follow up with districts.

ISBE notified districts of their student-level findings of noncompliance related to Indicator 12 in March of 2010. ISBE made 67 findings of noncompliance in the spring of 2010 based on FFY08 data for Indicator 12. LEAs were required to correct each case of noncompliance, unless the child was no longer within the jurisdiction of the LEA and utilize the ISBE SPP Indicator 12 resources on the website as tools to review, and revise as appropriate, its policies, procedures and/or practices related to the identified noncompliance. LEAs were then required to submit a report to ISBE that detailed their review process and any revisions made to policies, procedures and/or practices to ensure that noncompliance was corrected to 100%. As part of ISBE's verification process for the correction of noncompliance, each LEA with findings of noncompliance was also required to document that it is correctly implementing the specific regulatory requirements related to the finding. To date, one of the LEAs with findings of noncompliance met the standard of correction and has timely corrected for their corresponding finding. ISBE will report on timely correction for the remaining 66 FFY08 findings of noncompliance related to Indicator 12 in the February 1, 2011 APR.

Additional Information Required by the OSEP APR Response Table:

Statement from the Response Table	State's Response
<p>OSEP required ISBE to verify that each district with noncompliance reported by the State under this indicator in the FFY07 APR, each of the 5 districts with remaining noncompliance reported in the FFY06 APR and each of the 3 districts with remaining noncompliance reported in the FFY05 APR are 1) correctly implementing the specific regulatory requirements and 2) have developed and implemented the IEP, although late, unless the child is no longer within the jurisdiction of the district.</p>	<p>All of the LEAs with remaining noncompliance from FFY05 and FFY06, and all 52 districts (100%) identified in the FFY07 APR with noncompliance, have developed and implemented the IEP, although late, and have subsequently corrected in terms of the Part C to Part B transition. In addition, these districts accessed technical assistance from ISBE regarding the correct implementation of specific regulatory requirements related to Indicator 12, and <u>47</u> of the 52, or <u>90%</u>, met ISBE's standard of correction and are now correctly implementing the specific regulatory requirements. However, none of the remaining 3 LEAs for FFY05 have corrected to 100% compliance, even though all 3 are substantially compliant. One of the 3 LEAs has reached 98.84% compliance, one has reached 96.06% compliance and the final LEA has reached 95.00% compliance. These 3 LEAs were also identified in FFY06, along with 2 other LEAs, for a total of 5 LEAs. One of those remaining 5 LEAs for FFY06 has corrected, the 3 LEAs identified in both FFY05 and FFY06 are substantially compliant and the remaining LEA is currently at 83%. These remaining 4 LEAs, along with 2 newly identified LEAs in FFY07 (6 districts), have not yet met the target of 100%. <u>In terms of enforcement actions for these 6 LEAs, ISBE made findings of noncompliance in March 2010 and required these districts to demonstrate correction at the student level. Each LEA is required to correct each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA (all</u></p>

	<p>LEAs have addressed this part of the requirements for correction). In addition, each LEA <u>is</u> required to utilize the SPP Indicator 12 resources on the ISBE website as tools to review, and revise as appropriate, its policies, procedures and/or practices related to the identified noncompliance. Each LEA <u>is</u> then required to submit a report to ISBE detailing the review process and any revisions made to policies, procedures and/or practices as a result of the review to verify that they are correctly implementing the specific regulatory requirements.</p>
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Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008 (2008-2009)

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be added to assist districts with the identification of factors related to the finding of noncompliance and strategies to address the noncompliance, as well as the correction of identified noncompliance in a timely manner: 1) Assist districts with improvement plans that address corrective actions for issues of noncompliance. Another activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and RtI, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

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

Indicator 13: 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))

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

As explained in the FFY07 APR, the State did not make findings of noncompliance for districts whose students' IEPs did not include coordinated, measurable, annual IEP goals and transition services that would reasonably enable the student to meet the post-secondary goals because it was addressing the issue through the use of individualized district improvement plans (DIPs) and the State's LEA Determinations Process. The State had the understanding that this was an acceptable practice prior to the September 3, 2008 OSEP guidance document entitled, "*Frequently Asked Questions Regarding Identification and Correction of Noncompliance and Reporting on Correction in the SPP/APR*" and the October 17, 2008 OSEP memorandum entitled, "*Reporting on Correction of Noncompliance in the Annual Performance Report Required under Sections 616 and 642 of the Individuals with Disabilities Education Act.*" These documents marked the first written notification from OSEP that findings of noncompliance were to be made based on data reported by LEAs through the State's data system(s). Therefore, after receiving technical assistance and additional clarification from OSEP between November 2008 and January 2009, ISBE implemented the following plan to issue findings of noncompliance to LEAs that did not reach the measurable and rigorous target of 100% for this indicator based on data reported by the LEAs through the State's data system:

- Introduced this new information to districts via various modes of communication (IAASE spring conference, Special Education Director's Conference, State Superintendent's Bulletin) between January and September 2009;
- Made findings of noncompliance in October of 2009 based on federal regulations aligned with Indicator 13, after data had been verified by the State; and
- Will now ensure district- and student-level timely correction of noncompliance within one year through follow up with districts.

ISBE notified districts of their findings of noncompliance related to Indicator 13 in October of 2009. For FFY08 findings, ISBE examined the level of noncompliance and determined that, in many cases, the noncompliance was not a systemic/district level issue, thus requiring only student-level correction. As a

result, ISBE issued both district-level and student-level findings for noncompliance related to Indicator 13. LEAs with student-level findings are required to correct each case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, by documenting that each youth's IEP was corrected to meet requirements. LEAs with district-level findings are required to convene a team to analyze district data to determine the reason(s) for noncompliance and submit a corrective action plan to ISBE for approval. The corrective action plan must address the review and revision of policies, procedures and/or practices to ensure that noncompliance is corrected to 100%, and to ensure that the compliance is sustainable.

These LEAs must also make use of the Transition Planning Self-Assessment (TPSA) tool as part of their corrective action. The TPSA was developed in collaboration with Loyola University, and is based on Kohler's taxonomy. The TPSA is completed online via the VIMEO system, which generates reports that address the areas of program structure, collaboration, student-focused planning, student development and family involvement. The resulting TPSA reports, and the data included within the reports, serve as the basis for action planning and the development of objectives in the DIP.

LEAs with district-level findings are also required to correct each case of noncompliance, unless the youth is no longer within the jurisdiction of the LEA, by documenting that each youth's IEP was corrected to meet requirements. Finally, LEAs with district-level findings are required to show evidence that the policies, procedures and/or practices that resulted in the finding have been corrected. ISBE will verify that policies, procedures and practices were revised and newly implemented, and that the standard of correction was met. As a part of this process, ISBE will examine compliance levels within the year timeframe and LEA percentages for the subsequent year.

In addition, ISBE conducted its data verification/desk audit process. Findings of noncompliance were issued to LEAs in October of 2009 related to Indicator 13 when noncompliance was found as a result of this process. These LEAs must implement the TPSA process noted above as part of their corrective action. They are also required to correct each case of noncompliance, unless the child was no longer within the jurisdiction of the LEA, by documenting that each youth's IEP was corrected to meet requirements. Finally, the LEAs are required to show evidence that the policies, procedures and/or practices that resulted in the finding have been corrected. ISBE will ensure timely correction of noncompliance via technical assistance to LEAs, LEA corrective action activities and follow up verification with LEAs.

Technical Assistance Resources Utilized and Results:

ISBE has received technical assistance from multiple sources to ensure compliance associated with Indicator 13. In conjunction with the SPP improvement activities regarding training on effective transition practices, ISBE has received technical assistance from OSEP, the North Central Regional Resource Center (NCRRC), the National Secondary Transition Technical Assistance Center (NSTTAC), the National Drop-Out Prevention Center for Youth (NDCP/Youth), Shared Work: National Community of Practice on Transition and the Illinois Statewide Technical Assistance Center (ISTAC) Partners. Consultants from NSTTAC, NDOP/Youth and ISTAC Partners have provided technical assistance by presenting at the Statewide Transition Conference, the Special Education Director's Conference and Illinois Alliance of Administrators of Special Education (IAASE) conferences on topics related to Indicator 13. In addition, technical assistance from all of the above projects has allowed ISBE to be able to develop a variety of Indicator 13 resources and make them easily accessible for school districts and other stakeholders on ISBE's webpage. The following are included on the webpage:

- Data entry instructions and training resources to build accuracy and legitimacy of the data and its entry to the electronic database system for tracking students.
- Transition Planning Self-Assessment (TPSA) - The TPSA tool assists districts in analyzing the full continuum of secondary transition practices (e.g., program structure, interagency collaboration, student-focused planning, student development and family involvement) and engaging in a reciprocal process of action planning, implementation and on-going re-assessment. A training component on using the data for action planning was also developed and posted on ISBE's webpage.

- Illinois Indicator 13 Checklist - ISBE adopted the NSTTAC Indicator 13 checklist and adapted it to meet Illinois-specific requirements, and to reflect the data collection system format (e.g., wording, order) thereby minimizing confusion for the district level employees who complete the data entry.
- Indicator 13 PowerPoint – A training that reviews all aspects of developing the transition plan with in-depth detail and examples for measurable post-school goals and age-appropriate transition assessments.
- Transition Plan Sample - Sample statements for each section of the transition plan.
- Links to resources from the Transition Outreach Training for Adult Living (TOTAL) Project, the NSTTAC and the National Collaborative on Workforce and Disability for Youth (NCWD-Y).

In conjunction with the SPP improvement activities regarding data verification, ISBE received technical assistance from NCRRC, NSTTAC and our ISTAC Partners to complete an IEP review process for randomly sampled districts that reported 100% compliance on Indicator 13. The process involved creating a scoring rubric that is currently posted on ISBE's website and serves as an additional technical assistance tool for districts.

In conjunction with ensuring compliance at the district level for Indicator 13, ISBE received technical assistance from OSEP, NCRRC and NSTTAC. ISBE utilized technical assistance information and guidance documents provided by both OSEP and NSTTAC to make findings of noncompliance for those districts that did not meet the 100% target for compliance indicators in the State Performance Plan. ISBE special education staff are providing intensive technical assistance to the 12 largest districts with noncompliance via the district superintendents, directors of special education and secondary transition coordinators. Technical assistance is geared toward the outcomes of improved data and improved secondary transition services to students.

The outcome of all technical assistance addressed in this section has been increased awareness and understanding of Indicator 13 requirements by local district personnel to improve results for their students and compliance rates for their districts. Initial data collection on Indicator 13 shows progress from FFY07 data.

Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
<p>OSEP required ISBE to verify that each district with noncompliance reported under this indicator in the FFY07 APR and each of the 261 districts with remaining noncompliance reported in the FFY06 APR 1) are correctly implementing the specific regulatory requirements and 2) have developed an IEP that includes the required transition content for each youth, unless the youth is no longer within the jurisdiction of the district.</p>	<p>Based on FFY08 data, <u>174</u> of the remaining 203 FFY07 districts (<u>86%</u>) and <u>232</u> of the remaining 261 FFY06 districts (<u>89%</u>) have now corrected and demonstrated substantial compliance, indicating subsequent correction. Therefore, <u>29</u> districts remained (the <u>29</u> LEAs are the same for FFY06 and FFY07). In terms of enforcement actions for these <u>29</u> districts, ISBE made findings of noncompliance in October 2009 and required these districts to either implement the Transition Planning Self-Assessment process at the district level or demonstrate correction at the student level. ISBE will continue to provide technical assistance to districts, monitor district progress and determine subsequent correction for the remaining <u>29</u> FFY07/FFY06 districts.</p>

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

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

Indicator 14: 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))

Measurement:

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

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

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

States need not report on Indicator 14 for the FFY08 APR. States are required to establish a new baseline, targets and review/revise improvement activities in the FFY09 APR submission, due February 1, 2011.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Effective General Supervision Part B/General Supervision

Indicator 15: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416 (a)(3)(B) and 1442)

Measurement: Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

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

FFY	Measurable and Rigorous Target
2008 (2008-2009)	100%
	Actual Target Data
	80.26%

Describe the process for selecting LEAs for Monitoring:

The State issued findings of noncompliance during FFY07 through three general supervision systems: Focused Monitoring, State complaints, and due process hearings. As discussed in last year's APR, the State had previously addressed issues of noncompliance related to Indicators 4, 10, 11, 12 and 13 through the use of action plans and the State's LEA Determinations Process. ISBE has now issued findings for Indicators 4, 10, 11 and 13, as well as for Indicator 20. Since findings for Indicators 4, 10, 11, 12, 13 and 20 were not made during FFY07, and thus the date of timely correction for these findings did not occur during FFY08, findings made from those indicators have not been included in the State's target data. The process used to select LEAs for monitoring those indicators is described below, as is the timely or subsequent correction of noncompliance that has already been verified in those indicators. The State's process for monitoring, and plan to make findings for LEAs for Indicator 12, is also described below. The State also monitors LEAs for findings of noncompliance for Indicator 9. However, no LEAs have yet been identified with noncompliance for this indicator. The State's monitoring process for Indicator 9 mirrors the process for Indicator 10 that is described below.

Focused Monitoring System

As part of its general supervision responsibility, ISBE utilized a Special Education Focused Monitoring System designed to improve educational results and outcomes for students receiving special education services. Focused monitoring uses a data-driven approach that focuses on a small number of carefully chosen priorities that has the greatest impact on improving results for students with disabilities. LEAs were ranked for size and type, and after a review of data submitted to ISBE through the Funding and Child Tracking System (FACTS), a computerized tracking system for eligible children under IDEA- Part B,

those LEAs with the widest variance on the chosen critical performance indicator were selected to receive a monitoring review. The focus of the monitoring review is to examine the school district's compliance with federal and state requirements specifically related to the critical performance indicator, which was chosen in consultation with ISBE's stakeholder group, ISAC.

Some findings of noncompliance issued through the Focused Monitoring system in FFY07 were made subsequent to on-site reviews with LEAs conducted near the conclusion of FFY06. The critical performance indicators for the Focused Monitoring system in FFY06 were educational environment, emphasizing the access of students with disabilities to the general education curriculum to the maximum extent appropriate, in accordance with Indicator 5 of the SPP; and assessment performance, emphasizing the gap between students with and without disabilities on statewide reading assessments. The critical performance indicator for the Focused Monitoring system in FFY07 was assessment performance, emphasizing measurable and rigorous reading targets for students with disabilities, in accordance with Indicator 3 of the SPP.

To identify findings of noncompliance through the Focused Monitoring system, on-site reviews were conducted by an ISBE team consisting of a team leader, at least one additional ISBE staff member, one peer member, and one parent member. The reviews consisted of classroom observations, a review of student records and interviews with selected general and special education administrators, general education teachers, special education teachers, related service providers, and other LEA personnel. In addition, a public forum was held during each on-site review to gather input from parents of students with disabilities and other community stakeholders.

Indicator 16 Complaints

LEAs monitored through state complaint investigations are selected in response to a signed, written complaint filed with ISBE, alleging a district violated a federal or state special education rule or regulation, in accordance with *34 CFR 300.153*. The state complaint investigation typically consists of a review of relevant documentation, interviews with individuals knowledgeable about the issues of the complaint and an on-site review, as necessary. The State issues a written letter of findings to the LEA at the conclusion of the investigation, notifying them whether a violation(s) of federal or state rules had been identified.

Indicator 17 Due Process Hearings

LEAs monitored through due process hearings are selected based upon either a written request from the parent/guardian to the LEA and forwarded to ISBE, or upon a written request from the LEA and submitted directly to ISBE, in accordance with *34 CFR 300.507*. If the request results in a hearing, the assigned hearing officer issues a written ruling describing any violation(s) that the district committed, with accompanying orders to correct the violation(s).

Indicator 4 Discipline

Data collection for this indicator was integrated into the statewide Student Information System (SIS). A significant discrepancy for Indicator 4 was determined as follows:

1. A Suspension/Expulsion Rate was calculated for each LEA as follows: $((\# \text{ of students with Individualized Education Programs (IEPs) suspended or expelled for more than 10 days}) / (\# \text{ of students with IEPs})) * 100$.
2. A State Suspension/Expulsion Rate was calculated in the same manner by using the total number of students with IEPs suspended or expelled for more than 10 days in the entire state, and the total number of students with IEPs in the entire state.
3. A standard deviation from the State Suspension/Expulsion Rate was then calculated.
4. An LEA was determined to have a significant discrepancy if:
 - a. Its Suspension/Expulsion Rate was greater than the State Suspension/Expulsion Rate + one standard deviation for three consecutive years, **AND**
 - b. The LEA had at least five students suspended or expelled more than 10 days.

For FFY07, LEAs who met the suspension and expulsion criteria for a significant discrepancy for three consecutive years were required to complete a self-assessment to review policies, procedures and practices related to suspensions and expulsions. A function of this review required LEAs to address the collection of data; practices related to the development of IEPs and IEP implementation; the application of school-wide discipline, such as PBIS; and the allocation of resources for the aforementioned. Each LEA had to develop an action plan to reduce the rates of suspension/expulsions of children with disabilities for more than ten days in a school year. Action plans included methods for improving data collection to track patterns of student behavior; additional training and professional development for teachers and administrators; and implementation of research based prevention programs, such as PBIS and RtI. The State reviewed the LEA's policies, procedures and practices related to the development and implementation of IEPs, the use of positive behavioral interventions and supports; and procedural safeguards, in order to determine whether LEAs met the requirements of *34 CFR 300.170(b)* for FFY07.

Indicator 10 Disproportionality, Specific Disability Categories

LEAs monitored for disproportionate representation (or disproportionality) of racial/ethnic groups in special education in a specific disability category (Speech/Language, Specific Learning Disability, Emotional Disturbance, Mental Retardation, Autism, and Other Health Impaired) are selected by the use of a weighted risk ratio for districts in which there are at least 10 students in the racial/ethnic group and disability category in question and at least 10 students in the comparison group (all students in the racial/ethnic group enrolled in the district), and an alternate risk ratio for districts in which there are at least 10 students in the racial/ethnic group and disability category in question but fewer than 10 students in the comparison group enrolled in the district. Data utilized for these calculations are taken from annual Fall Housing Reports from SIS (for all students, grades 1-12) and December Child Count from FACTS (for students with IEPs, ages 6-21).

ISBE's criterion for determining overrepresentation based on race/ethnicity is a calculated weighted or alternate risk ratio of 3.0 or higher for three consecutive years for a particular racial/ethnic group in which there were at least ten students in the special education disability category in question. ISBE's criterion for determining underrepresentation based on race/ethnicity is a calculated weighted or alternate risk ratio of 0.25 or lower for three consecutive years for a particular racial/ethnic group in which there were at least ten students in the special education disability category in question. In order to verify whether the disproportionality is the result of inappropriate identification in those LEAs with a risk ratio of 3.0 or higher or 0.25 or lower, ISBE requires the identified LEAs to conduct self-assessment activities, including data verification and a review of policies, practices and procedures, and then submit the results of those activities to ISBE. Upon receipt, ISBE reviews the LEA's documentation (including information resulting from the LEA's review of policies, practices and procedures) and, combined with the LEA's data, determines whether or not the disproportionality was the result of inappropriate identification.

Indicator 11 Evaluation

LEAs are monitored for this indicator via electronic submission of data via FACTS. FACTS required LEAs to indicate the reason(s) for delay when the timeline for completing an initial evaluation was not met.

Indicator 12 Transition from Part C to Part B

Data collection for this indicator is integrated into SIS. Indicator 12 specific data elements include: whether the child was served in Early Intervention (EI); whether there was a referral from Child and Family Connections; EI number; date of eligibility determination; reason for any delay in transition; IEP completion date; and the initiation date of special education services.

Indicator 13 Secondary Transition

LEAs are monitored for this indicator via electronic submission of data via FACTS, which requires LEAs to confirm that each student aged 16 and above has a secondary transition plan in accordance with the requirements of *34 CFR 300.320* and *34 CFR 300.321*.

Indicator 20 State-Reported Data

ISBE employs a variety of mechanisms to ensure the accuracy of state data submitted to the Office of Special Education Programs (OSEP). The Division of Special Education and Support Services maintains ongoing communication with other relevant divisions within the agency to assist and enforce timely

reporting. Data are compared with prior year data for reasonableness of fluctuation and other information. Numerous edit checks are built into state data systems to ensure the accuracy data, which are publicly reported for each LEA. ISBE also conducts data verifications and desk audits with LEAs to ensure the accuracy, validity and reliability of data reported to OSEP. Additional information can be found in Indicator 20.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2007 (2007-2008):

The data indicate progress from 76.23% in FFY07 to 80.26% in FFY08. It is believed that the implementation and completion of the improvement activities discussed below contributed to the progress on this indicator. During 2008-2009, the improvement activities listed for Indicator 15 in Illinois's SPP were implemented and will be continued. ISBE will continue with data collection, data analysis, timeline oversight and training across all SEDS modules (due process, complaints, mediation, and Focused Monitoring). ISBE will also continue to pursue imposing sanctions against LEAs who fail to comply with required corrective actions.

While ISBE notes that the increase in timely correction of noncompliance falls short of the measurable and rigorous target of 100%, substantial progress was made on this indicator during the course of FFY08. The percentage of timely corrected noncompliance increased from FFY07 to FFY08 for findings identified through the state's complaint and Focused Monitoring systems. Within the Focused Monitoring system, the rate of correction of identified noncompliance for findings issued from March 2008 through the end of FFY07 on June 30, 2008 showed significant improvement from the rate of timely correction of noncompliance that was identified prior to March 2008. This improvement can be directly attributed to the State's implementation of improvement activities for this indicator. After review and evaluation of the improvement activities related to Indicator 15, it was determined that progress had been made, activities were being implemented as planned and activities were reaching the target audience(s). Therefore, only minor revisions were made to the improvement activities as discussed in the "Revisions" section below.

In addition, as explained in the FFY07 APR, in most instances, the State had not been making findings of noncompliance for LEAs related to Indicators 4, 9, 10, 11, 12, 13 and 20 because it was addressing the issue through the use of individualized district improvement plans (DIPs) and the State's LEA Determinations Process. The State had the understanding that this was an acceptable practice prior to the September 3, 2008 OSEP guidance document entitled, "*Frequently Asked Questions Regarding Identification and Correction of Noncompliance and Reporting on Correction in the SPP/APR*" and the October 17, 2008 OSEP memorandum entitled, "*Reporting on Correction of Noncompliance in the Annual Performance Report Required under Sections 616 and 642 of the Individuals with Disabilities Education Act.*" These documents marked the first written notification from OSEP that findings of noncompliance were to be made based on data reported by LEAs through the State's data system(s). Therefore, after receiving technical assistance and additional clarification from OSEP between November 2008 and January 2009, ISBE implemented the following plan to issue findings of noncompliance to LEAs related to the above mentioned indicators based on data reported by the LEAs through the State's data system:

- Introduced this new information to districts via various modes of communication (IAASE spring conference, Special Education Director's Conference, State Superintendent's Bulletin) between January and September 2009;
- Made approximately 1400 findings of noncompliance based on federal regulations; and
- Will now ensure district- and student-level timely correction of noncompliance within one year through follow up with districts.

Technical Assistance Resources Utilized and Results:

ISBE has received technical assistance from multiple sources to ensure correction of noncompliance within one year of identification. Ongoing technical assistance from OSEP regarding federal requirements for correction of noncompliance has been provided and incorporated into the State's system of general supervision. This has included written guidance from the department, such as the "OSEP 09-02" memorandum. ISBE has also received ongoing verbal guidance from OSEP representatives, including the State's contact, who provided on-site technical assistance in September 2009.

In conjunction with the SPP improvement activities regarding the relationship between staff workload and timelines, ISBE continues its work with Mark Wolak of the North Central Regional Resource Center (NCRRC) in refining the balanced scorecard for the Division of Special Education and Support Services. The development of the balanced scorecard has assisted the division in defining the mission and vision of the division. As it relates to this indicator, the tool has assisted ISBE in better aligning its day-to-day priorities with the SPP, as well as developing a work-force analysis to better utilize staff resources in monitoring the correction of noncompliance.

ISBE also continues to work with the Consortium for Appropriate Dispute Resolution in Special Education (CADRE) on improving the state's dispute resolution systems. CADRE has assisted ISBE in utilizing the SEDS system to monitor caseloads in the due process, state complaint, and Focused Monitoring systems, including as it relates to the correction of noncompliance. CADRE has also been an asset in helping the division to better utilize existing staff resources. ISBE staff and CADRE representatives have conducted conference calls on a quarterly basis to review the general status of the dispute resolution systems and the identified activities. The ISBE staff and representatives from CADRE developed a chart of activities focused upon coordinated oversight of the dispute resolution systems, which included output, staff responsible, completion dates and a contact person from CADRE. ISBE is in the process of revising this chart of activities to reflect the agency's current priorities.

ISBE also received an on-site visit in May 2009 from Sandy Schmitz of the Data Accountability Center (DAC), who worked with team leaders in the state's Focused Monitoring module on developing timelines to ensure LEAs timely correct noncompliance, as well as exploring potential sanctions for LEAs who do not demonstrate timely correction.

The combination of resources that ISBE has utilized for technical assistance has resulted in the agency improving its internal system for monitoring the correction of noncompliance. As referenced above, ISBE has made improvement in the timely correction of noncompliance identified through the focused monitoring and state complaint systems from FY07 to FY08. The correction of noncompliance in these two systems showed an upward trend through the course of FY08, which can be associated with the incorporation of the technical assistance cited above into ISBE's internal system for monitoring correction of noncompliance.

Correction of FFY 2007 Findings of Noncompliance Timely Corrected (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007 through June 30, 2008) (Sum of Column a on the Indicator B15 Worksheet)	228
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding) (Sum of Column b on the Indicator B15 Worksheet)	183
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	45

Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2007 findings not timely corrected (same as the number from (3) above)	45
5. Number of findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	44
6. Number of findings <u>not</u> yet verified as corrected [(4) minus (5)]	1

Actions Taken if Noncompliance Not Corrected

~~One of the three findings for which the State has not verified correction from FFY07 is a remaining finding from a Focused Monitoring review, in which two other findings have already been closed. The open finding involves a systemic issue in the development of IEPs with required components. The LEA showed progress in correcting this issue during a follow-up data verification visit within a year of the initial finding of noncompliance, but full correction was not demonstrated. Therefore, in terms of enforcement actions, ISBE has requested an additional sampling of student records from the LEA to demonstrate that noncompliance has now been corrected.~~ This finding was subsequently corrected.

One finding remains open from a state complaint regarding the provision of required compensatory speech/language services to a total of 56 students. The district has provided the required services to half of these students, and is making progress on completing the requirement on behalf of the remaining students. The correction of noncompliance has been hampered by a lack of a full complement of speech-language pathologists, as well as the failure by the LEA to develop and maintain a stable plan to complete the provision of these services. In terms of enforcement actions, ISBE has provided frequent technical assistance to the LEA via verbal communications and written correspondence. A conference call was held with LEA and special education cooperative personnel regarding the completion of the compensatory services, including discussion of additional sanctions that may be imposed if the noncompliance is not corrected.

~~One finding remains open from a systemic state complaint regarding the LEA's failure to maintain a full complement of certified special education teachers. In terms of enforcement actions, ISBE has provided frequent technical assistance to the LEA via verbal communications and written correspondence. The LEA has made significant progress to correct this issue, and has provided ongoing information to ISBE on their staff recruitment efforts. At this time, ISBE is only awaiting documentation on the certification status of one special education teacher.~~ This finding was subsequently corrected.

Verification of Correction (either timely or subsequent)

Focused Monitoring System

Findings of noncompliance issued through the Focused Monitoring system, which primarily addresses Indicator 5, were identified as corrected when the LEA demonstrated that they completed activities relevant to the finding, such as the revision of policies, procedures and practices; and completion of staff training and professional development. Additionally, student records were reviewed to verify that issues of noncompliance related to the finding were corrected. Once verification was produced that the LEA was correctly implementing the regulatory requirement(s), ISBE provided the parties with a letter of closing.

Indicator 16 Complaints

Findings of noncompliance issued through the state complaint system resulted in required corrective action(s) from the LEA. Districts were required to demonstrate that each finding of noncompliance was corrected, such as through a revision of policies, procedures, and practices; completion of staff training and professional development activities; and/or compensatory education services. The assigned complaint investigator reviewed the activities completed by the LEA to ensure correct implementation of regulatory requirements. In the event the LEA did not demonstrate correct implementation of regulatory requirements, the complaint investigator communicated with the LEA and outlined specific documentation that the district was required to produce to attain demonstrate correction of noncompliance. Once verification of compliance was produced, ISBE provided the parties with a letter of closing.

Indicator 17 Due Process Hearings

Hearing officers specified a date (or dates in some cases where multiple corrections were required) by which LEAs were expected to verify compliance with a hearing decision. The date set by the hearing officer was entered into SEDS. After the deadline for producing proof of compliance was reached, the SEDS system generated automatic email warnings to the LEA, advising them that proof of compliance needed to be provided to ISBE as soon as possible. The SEDS system continued to send additional email warnings every five days, and ceased once verification of compliance was produced.

Proof of compliance for every case was reviewed by the ISBE Due Process Coordinator to determine if the documentation and assurances were sufficient to demonstrate complete adherence to the hearing decision. In the event the LEA did not demonstrate complete adherence to the hearing decision, the Due Process Coordinator advised the LEA in writing of this fact and outlined specific documentation required to attain verification of all identified noncompliance. In the event an LEA did not verify compliance, ISBE was prepared to seek sanctions against an LEA that did not respond to warnings seeking verification of compliance. ISBE did not need to take this additional enforcement action against an LEA for failure to produce sufficient proof of compliance. Once verification of compliance was produced, ISBE provided the parties with a letter of closing.

Please note that the procedures described above were suspended in the event that the LEA opted to exercise its right to seek judicial review of an adverse hearing decision. ISBE monitored the status of judicial reviews and expected an LEA to verify compliance in the event a judicial review upheld the hearing decision (or any part of the decision for which proof of compliance was required).

In addition to ensuring timely correction of noncompliance, the review of hearing officer decisions by the ISBE Due Process Coordinator and the independent evaluator of the State's hearing officers also helped facilitate ongoing training and professional development that ISBE provided for hearing officers. In addition to the automated email warnings sent to an LEA who has missed a deadline to verify compliance with a hearing officer decision, a status screen was added to SEDS beginning in September 2009 to provide ISBE with up-to-date information pertaining to the compliance deadlines each time a staff member logs into the SEDS Due Process Module.

Indicator 4 Discipline

In order to verify that LEAs were correctly implementing specific regulatory requirements, ISBE reviewed District Improvement Plans (DIPs), LEA status reports and LEA materials documenting the implementation of strategies and activities related to the suspension/expulsion of students with disabilities in the District Improvement Plan (DIP). In addition, ISBE reviewed district level data that supported the district's documentation that DIP strategies and activities had the intended impact on the suspension/expulsion rate for students with disabilities. ISBE also reviewed the list of significantly discrepant LEAs for 2009 to verify that the LEAs that have already timely corrected their noncompliance did not have a significant discrepancy for 2009.

Indicator 10 Disproportionality, Specific Disability Categories

All findings of noncompliance for this indicator were made at the district level. ISBE utilized district improvement plans, status reports, evaluation reports, file reviews and/or documentation of revisions to policies, procedures and practices, to verify that the LEAs with noncompliance identified were now correctly implementing the specific regulatory requirements.

Indicator 11 Evaluation

Each LEA with findings of noncompliance was required to correct each individual case of noncompliance, unless the child was no longer within the jurisdiction of the LEA. ISBE utilized its statewide data systems to verify that all LEAs identified with less than 100% compliance with this indicator have completed the initial evaluation of the child or children in question, although late, and have subsequently corrected in terms of the initial evaluation completion. In addition, ISBE required each LEA to utilize the SPP Indicator 11 Resource Guide as a tool to review, and revise as appropriate, its policies, procedures and/or practices related to the identified noncompliance. As part of the verification process for the correction of noncompliance, each LEA was then required to submit a report to ISBE detailing the review process and any revisions made to policies, procedures and/or practices as a result of the review and documenting that it was correctly implementing the specific regulatory requirements related to the finding.

Indicator 12 Transition from Part C to Part B

Each LEA with findings of noncompliance was required to correct each individual case of noncompliance, unless the child was no longer within the jurisdiction of the LEA. ISBE utilized its statewide data systems to verify that all LEAs have developed and implemented the IEP for the child or children in question, although late, and have subsequently corrected in terms of the Part C to Part B transition. ISBE will be issuing findings of noncompliance in February 2010 to address the correct implementation of specific

regulatory requirements related to Indicator 12. Each LEA will be required to utilize the SPP Indicator 12 resources on the ISBE website as tools to review, and revise as appropriate, its policies, procedures and/or practices related to the identified noncompliance. Each LEA will then be required to submit a report to ISBE detailing the review process and any revisions made to policies, procedures and/or practices as a result of the review to verify that they are correctly implementing the specific regulatory requirements.

Indicator 13 Secondary Transition

ISBE made findings of noncompliance in October 2009 and required LEAs to either implement the Transition Planning Self-Assessment process at the district level or demonstrate correction at the student level. LEAs with both district- and student-level findings were required to correct each case of noncompliance, unless the child was no longer within the jurisdiction of the LEA, by documenting that IEPs were corrected to meet requirements. LEAs with district-level findings were also required to convene a team to analyze district data to determine the reason(s) for noncompliance and submit a corrective action plan to ISBE for approval. The corrective action plan addressed the review and revision of policies, procedures and practices to ensure that noncompliance was corrected to 100%, and to ensure that the new level of compliance was sustainable. LEAs with district-level findings were required to show evidence that the policies, procedures and/or practices that resulted in the finding were corrected, that the LEA was correctly implementing the specific regulatory requirements and that the new level of compliance was sustainable. As part of this process, ISBE will examine compliance levels within the year timeframe and percentages for the subsequent year for LEAs identified with district-level findings. ISBE will also verify correction through IEP reviews of previously noncompliant IEPs.

Indicator 20 State-Reported Data

ISBE made findings of noncompliance throughout the year in relation to Indicator 20. LEAs were required to submit a corrective action plan to ISBE for approval. The corrective action plan addressed the review and revision of policies, procedures and practices related to data collection and reporting to ensure that noncompliance was corrected to 100%, that the LEA was correctly implementing the specific regulatory requirements and that the new level of compliance was sustainable.

Correction of Remaining FFY 2006 Findings of Noncompliance (if applicable)

Two findings identified through the state's Focused Monitoring system in one LEA during FFY06 remain open. A number of factors have contributed to the root cause of the continuing noncompliance, including frequent turnover of the LEA's administrative staff; issues involving communication between LEA administrators, local school board, and teacher's union leadership; and technology issues with IEP software the district is attempting to utilize. The State has been addressing these issues with the LEA on an ongoing basis with frequent technical assistance and enforcement actions, including professional development provided to staff, review of student records, and planning meetings with general education and special education administrators. ISBE's activities with the district have included communications across divisions within the agency to address ongoing areas of concern involving issues related to general and special education. Staff from ISBE have, on average, engaged in communications with the LEA on a weekly basis and facilitated on-site visits to the LEA on a monthly basis. ISBE has engaged in internal discussions regarding the imposition of additional enforcement actions if the LEA continues to demonstrate noncompliance.

If the State reported <100% for this indicator in its FFY 2006 APR and did not report that the remaining FFY 2006 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY 2006 findings noted in OSEP's June 1, 2009 FFY 2007 APR response table for this indicator	13
2. Number of remaining FFY 2006 findings the State has verified as corrected	11
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	2

Correction of Any Remaining Findings of Noncompliance from FFY 2005 or Earlier (if applicable)

All findings of noncompliance identified in FFY 2005 and earlier were corrected at the time of the State's submission of the APR for FFY07.

Additional Information Required by the OSEP APR Response Table:

Statement from the Response Table	State's Response
<p>OSEP required ISBE to report that it has 1) corrected all instances of noncompliance (including noncompliance identified through the State's monitoring system, through the State's data system and by the Department) and 2) verify that each district with identified noncompliance is correctly implementing the specific regulatory requirements.</p>	<p>All instances of noncompliance made in FFY06 have been corrected <u>and ISBE has verified that each LEA with identified noncompliance is correctly implementing the specific regulatory requirements</u>, with the exception of 2 findings as explained above. All instances of noncompliance made in FFY07 have been corrected <u>and ISBE has verified that each LEA with identified noncompliance is correctly implementing the specific regulatory requirements</u>, with the exception of <u>1</u> finding as explained above. <u>All 3 of the remaining findings (2 for FFY06 and 1 for FFY07) stem from the same LEA. The enforcement actions that ISBE has taken with this LEA are described above.</u></p>
<p>OSEP required the State to review its improvement activities and revise them, if appropriate, to ensure they will enable the State to provide data demonstrating that the State timely corrected noncompliance identified in FFY07.</p>	<p>Division management and staff reviewed improvement activities and determined that many of the activities continue to be appropriate. ISBE has also revised and added new improvement activities in the State Performance Plan to improve timely correction of noncompliance.</p>
<p>OSEP also required ISBE to report on correction of noncompliance for Indicators 10, 11, 12 and 13.</p>	<p>ISBE has issued findings of noncompliance, and addressed the correction of noncompliance, for Indicators 10, 11, 12 and 13. ISBE is in the process of verifying correction for these indicators as discussed above. Indicator specific information is provided below. For additional information, please see the response table for each corresponding indicator.</p> <p>Indicator 10: ISBE has verified that the 2 LEAs with noncompliance identified in FFY07, the 3 LEAs with remaining noncompliance identified in FFY06 and the 2 LEAs with remaining noncompliance identified in FFY05 are correctly implementing the specific regulatory requirements <u>and have corrected each individual case of noncompliance</u> for Indicator 10. All findings of noncompliance related to this indicator were made at the district level. All FFY07, FFY06 and FFY05 findings of noncompliance related to Indicator 10 are now closed.</p> <p>Indicator 11: ISBE has verified that all FFY07</p>

	<p>LEAs have completed the initial evaluation, although late, and have subsequently corrected in terms of the initial evaluation completion. In addition, 98% of the LEAs met ISBE's standard of correction and are now correctly implementing the specific regulatory requirements related to this indicator. ISBE implemented enforcement actions for the remaining 5 districts and made student-level findings of noncompliance. All 5 of these LEAs have now met the standard of correction, are correctly implementing the specific regulatory requirements and have subsequently corrected.</p> <p>Indicator 12: ISBE has verified that all of the LEAs with remaining noncompliance from FFY05 and FFY06, and all LEAs identified with noncompliance in FFY07 have developed and implemented the IEP, although late, and have subsequently corrected in terms of the Part C to Part B transition. In addition, <u>90%</u> of the LEAs met ISBE's standard of correction and are now correctly implementing the specific regulatory requirements related to this indicator. <u>In terms of enforcement actions for the remaining 6 LEAs, ISBE made findings of noncompliance in March 2010.</u> These LEAs have already corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA. Therefore, they will be required to demonstrate that they are correctly implementing the specific regulatory requirements.</p> <p>Indicator 13: ISBE has verified that <u>86%</u> of the FFY07 LEAs and <u>89%</u> of the FFY06 LEAs have now corrected and demonstrated substantial compliance, indicating subsequent correction. ISBE implemented enforcement actions for the remaining <u>29</u> districts and made district- and student-level findings of noncompliance in October 2009. ISBE will continue to provide technical assistance to districts, monitor district progress and determine subsequent correction for the remaining <u>29</u> LEAs.</p>
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Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2007 (2007-2008):

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be removed: 1) Identify model sites to be part of a cooperative network to provide technical assistance to districts. The model sites activity was removed because accuracy and consistency in determining model sites has not yet reached optimum levels to accurately and fairly make a comparison at this time. In addition, it was not reasonable to implement these activities because the Division of Special Education and Support Services lacks the capacity to ensure the accuracy and consistency of this activity. Rather, it was decided that the provision of technical assistance to promote implementation of research based practices would more effectively allow for improvement. Therefore, activity language addresses the improvement of data collection and reporting and infrastructures to deliver support and statewide technical assistance. In addition, one activity needed to be revised to reflect that the Division of Special Education and Support Services completed a work-

force analysis to determine how best to improve the investigation of state complaints in a timely manner. This resulted in an additional complaint investigator position being filled in April 2009, which, in turn, has resolved workload concerns related to complaints. The team of complaint investigators also meets regularly to address ongoing complaint activities and timelines. A detailed overview of the Complaint Process system still needs to be completed, and will remain as one of the State's improvement activities. Finally, another activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and Rtl, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Effective General Supervision Part B/General Supervision

Indicator 16: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint, or because the parent (or individual organization) and the public agency agree to extend the time to engage in mediation or other alternative means of dispute resolution, if available in the State.

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

Measurement: Percent = [(complaints with reports issued within timeline) plus (complaints with reports issued within extended timelines) divided by (total # of complaints issued)] times 100.

Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2008 (2008-2009)	100%
	Actual Target Data
	100%

Resolution of Signed, Written Complaints:

	2007-2008	2008-2009
Number of Reports Issued	60	85
Number of Reports Issued within Timelines	36	80
Number of Reports Issued within Extended Timelines	24	5
Percentage	100.0%	100.0%

Data Source

Data on complaints are maintained by ISBE's conflict resolution staff members via the Special Education Data System (SEDS). These data are the same as the State's 618 data reported in Table 7.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008 (2008-2009):

There was no change in performance toward the measurable and rigorous target of 100% for FFY08, as ISBE met the target in FFY08 as it did in FFY07. It is believed that the completion of improvement activities contributed to the sustained compliance on this indicator. During 2008-2009 the improvement activities listed for Indicator 16 in Illinois's State Performance Plan were implemented. ISBE will continue with data collection, data analysis, needs assessment, training and timeline oversight through the SEDS

complaint module. The analysis of complaint data to drive agency decision making regarding training activities will continue on an ongoing basis. Investigators will continue to receive SEDS timeline reminders throughout the complaint process, including when a complaint is at risk of failing to meet timelines. Division management will continue to monitor complaint timelines and schedule regular meetings with individual complaint investigators in order to address timeline issues and maintain consistency across the investigative process. ISBE will also continue to impose sanctions against school districts who fail to comply with required corrective actions.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008 (2008-2009)

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that two activities needed to be removed due to their completion: 1) Establish an additional staff position whose responsibilities would be primarily focused on complaint investigations and 2) Implement a plan to improve the overall workload of staff in order to complete cases in a timely manner. The additional complaint investigator position was filled in April 2009. This, in turn, resolved workload concerns related to complaints. The complaint investigator team also meets regularly to address ongoing complaint activities and timelines. In addition, another activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and RtI, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 17: Percent of adjudicated due process hearing requests that were adjudicated within the 45-day timeline or a timeline that is properly extended by the hearing officer at the request of either party or in the case of an expedited hearing, within the required timelines.

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

Measurement: Percent = [(adjudicated hearing decisions within timeline) plus (adjudicated hearing decisions within extended timeline) divided by (total number of adjudicated hearings)] times 100.

Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100.

FFY	Measurable and Rigorous Target
2008	100%
(2008-2009)	Actual Target Data
	95.2%

Adjudicated Due Process Hearing Requests

	2006-2007	2007-2008	2008-2009
Total Adjudicated Cases	29	27	21
Number of Decisions Within the 45-Day Timeline	3	2	5
Number of Decisions Within Extended Timelines	24	23	15
Number of Decisions Outside of the Timelines	2	2	1
Percentage of Compliance	93.1%	92.6%	95.2%

For FFY08, 21 hearing requests were fully adjudicated. Five of the 21 hearing requests were adjudicated within the 45-day timeline, while 15 of the 21 requests were adjudicated within a timeline that was properly extended. Only one of the 21 fully adjudicated cases did not fall within applicable timelines, the decision being rendered four days past the deadline. Further analysis of the non-compliant case indicates that the hearing officer did not meet the required timeline due to time management issues. The issue has been discussed with the hearing officer and has not recurred. The overall data represent a compliance rate of 95.2%, making Illinois substantially compliant for this indicator.

Data Source

Data on adjudicated due process hearing requests are maintained by ISBE's conflict resolution staff members via the Special Education Data System (SEDS). These data are the same as the State's 618 data reported in Table 7.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008 (2008-2009):

ISBE made progress for FFY08 (95.2%) as compared to the FFY07 percentage (92.6%). It is believed that the completion of improvement activities contributed to the progress on this indicator. The improvement activities listed for Indicator 17 in Illinois's State Performance Plan were implemented. ISBE will continue with data collection, data analysis, needs assessment, training and timeline oversight for the SEDS due process hearing module. ISBE provides intensive, ongoing training and technical support for the hearing officers, including emphasis on the necessity of complying with timelines and SEDS training. The analysis of due process hearing data to drive agency decision making regarding training activities will continue on an ongoing basis. Hearing officers will continue to receive SEDS timeline reminders throughout the hearing process, including when a case is at risk of failing to meet timelines. ISBE will also continue to complete hearing officer evaluations, via an independent performance evaluator, as well as monitor hearing officer caseloads and timelines to ensure prompt and appropriate hearing officer remediation or professional discipline. Finally, ISBE is working with the Illinois State Advisory Council for Students with Disabilities (ISAC) to explore recommendations for future regulatory and statutory changes to the due process system to improve its ability to increase due process compliance and efficiency.

Technical Assistance Resources Utilized and Results:

ISBE has received technical assistance from multiple sources to ensure timeline compliance associated with Indicator 17. In conjunction with the establishment of clearly articulated performance expectations for hearing officers, ISBE has continued to utilize the services of Gail ImObersteg as an independent performance evaluator for all current Illinois due process hearing officers. Gail ImObersteg utilizes a series of performance indicators for each hearing officer, including indicators to assess how each hearing officer complies with relevant timelines in each case. In conjunction with the SPP improvement activities related to more intensive training of hearing officers, ISBE recently entered into a contract with Joyce Eckrem, Lynwood Beekman and Perry Zirkel. These individuals provide ongoing training and technical support for the hearing officers, including emphasis on the necessity of complying with timelines. ISBE has also received technical assistance from Hupp Solutions, developers of the Special Education Data System (SEDS). Through technical assistance provided by Hupp Solutions staff, ISBE has provided hearing officers with SEDS training and a SEDS procedures manual. Among other functions, SEDS provides the hearing officers with needed feedback on pending deadlines in due process cases. ISBE has also received technical assistance from CADRE and NCRRC regarding its dispute resolution systems. As a result of such technical assistance, ISBE is currently working with the Illinois State Advisory Council for Students with Disabilities (ISAC) to develop recommendations for future regulatory and statutory changes to the due process system to improve its ability to increase due process compliance and efficiency. Initial data collection on Indicator 17 shows progress from FFY07 data.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008 (2008-2009):

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be removed: 1) Release the RFSP to solicit proposals for a training entity. The RFSP was released as planned, and a new training entity was in place as of June 1, 2009. In addition, another activity needed to be expanded: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and Rtl, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments. The SISEP activity was expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE.

Additional Information Required by the OSEP APR Response Table:

Statement from the Response Table	State's Response
<p>OSEP required ISBE to review its improvement activities and revise them, if appropriate, to ensure they will enable the State to provide data demonstrating that the State is in compliance with the due process hearing timeline requirements.</p>	<p>As noted above, Illinois is now substantially compliant with Indicator 17. After reviewing Indicator 17 improvement activities, it was determined that activities would continue to emphasize the importance of complying with required timelines. Since submitting the FFY07 APR, ISBE has secured an outside training entity that has provided additional training and technical support to provide hearing officers with further time management strategies to enhance the likelihood of continued compliance with this indicator.</p>

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 18: 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))

Measurement: Percent = [(resolution session settlement agreements) divided by (total number of resolution sessions)] times 100.

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

FFY	Measurable and Rigorous Target
2008 (2008-2009)	45-65%
	Actual Target Data
	54%

Resolution Sessions

	2006-2007	2007-2008	2008-2009
Total Resolution Sessions	60	65	76
Total Resolutions	30	22	41
Percentage of Cases Resolved	50.0%	33.8%	54.0%

For FFY08, parties in 76 of the 352 due process hearing requests participated in a resolution session. Of the 76 cases for which a resolution session occurred, 41 cases produced an agreement between the parties, resulting in termination of the case at the end of the resolution session, for a rate of 54%. The data for FFY08 fall within the identified measurable and rigorous target range of 45-65%. Therefore, ISBE met its measurable and rigorous target for this indicator.

Data Source

Data on resolution sessions are maintained by ISBE's conflict resolution staff members via the Special Education Data System (SEDS). These data are the same as the State's 618 data reported in Table 7.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008 (2008-2009):

ISBE made progress for FFY08 (54.0%) as compared to the FFY07 percentage (33.8%). It is believed that the completion of improvement activities contributed to the progress on this indicator. The improvement activities listed for Indicator 18 in Illinois's State Performance Plan were implemented. ISBE will continue with data collection, data analysis and information dissemination related to resolution

sessions. Within the past year, ISBE has completed all activities associated with ensuring that hearing officers have all the information necessary to monitor the resolution process and to report outcomes with accuracy. ISBE has continued to provide information to stakeholders in the form of presentations to a range of representative groups on the resolution process and alternative dispute resolution mechanisms. As information becomes available, ISBE continues to disseminate data on the resolution process and its effectiveness in Illinois to interested parties through public presentations to representative stakeholder groups as well as published instructional materials on the ISBE website.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008 (2008-2009):

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be removed because it was already addressed in another improvement activity: 1) Disseminate a memorandum covering the responsibilities and duties of the parties to complete the resolution process to all relevant stakeholder groups and publish it on the ISBE website. In addition, the survey instrument discussed in the activity related to resolution session outcomes data has been completed. Therefore, that bullet point has been removed from the activity. Finally, it was determined that one activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and RtI, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 19: Percent of mediations held that resulted in mediation agreements.

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

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2008 (2008-2009)	75-85%
	Actual Target Data
	74%

Percent of Mediations Held That Resulted in Mediation Agreements:

	2007-2008	2008-2009
Number of Mediations Held	183	134
Number of Mediations Resulting in Mediation Agreements	127	99
Percentage	69.0%	74.0%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008 (2008-2009):

Mediation counts provided by the Division of Special Education and Support Services documented 74% of mediations held resulted in mediation agreements, and 100% of mediations did not delay or deny the parent's right to a due process hearing for FFY08. This percentage represents progress from FFY07 when 69% of mediations held resulted in mediation agreements, and 100% of mediations did not delay or deny the parent's right to a due process hearing. Although ISBE did not reach its measurable and rigorous target, it is believed that the completion of the improvement activities discussed below contributed to the progress on this indicator. After review and evaluation of the improvement activities related to Indicator 19, it was determined that progress had been made, activities were being implemented as planned and activities were reaching the target audience(s). Therefore, only minor revisions were made to the improvement activities as discussed in the "Revisions" section below.

During 2008-2009 the improvement activities listed for Indicator 19 in Illinois's State Performance Plan were implemented. Mandatory mediator training was held in July 2009 for the 9 ISBE contracted mediators for the purpose of providing professional development on special education regulations, IEP development, conflict resolution options, *Special Education Connections* and the Mediation Module of the Special Education Database System (SEDS). It is imperative that mediators be well versed in utilizing SEDS, a web-based system, to enhance case management and ensure accurate data are entered into the system. ISBE will continue with data collection, data analysis, timeline oversight and training across all SEDS modules (due process, complaints, mediation, and monitoring).

ISBE will also continue to provide multiple methods of technical assistance and training to mediators and parents regarding dispute resolution, recent developments in special education; mediation procedures and mediator responsibilities. Mediators are invited to attend additional professional development opportunities via the Special Education Leadership Academy (SELA) throughout the year. Many mediators have attended these workshops and gained valuable knowledge that have assisted them in successfully mediating cases. In addition, mediators receive subscriptions to *Special Education Connections*, and possess the ability to research identified areas of dispute. The ISBE website provides parents and school districts with resources related to dispute resolution, specifically the state-sponsored mediation. The mediation page was revised to include a "Mediation Question and Answer" document, as well as a "How to Prepare for Mediation" document. A mediation brochure and mediation podcast are currently under development.

An alternative dispute resolution system, specifically IEP Facilitation, has been explored as indicated in the SPP. ISBE is currently reviewing comparable states that offer such a program to ascertain next steps for a successful pilot program in Illinois.

The mediation evaluation survey has been updated, and Survey Monkey is the online tool being utilized to collect these data. The evaluation survey is mailed to all parties as an option for those who do not have access to the internet. The return rate for mediation evaluations has increased; however, it remains somewhat low. Evaluation processes will continue to be used to improve the mediation system and obtain a larger survey return rate.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008 (2008-2009)

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that a subpart of the IEP Facilitation feasibility study improvement activity needed to be removed due to its completion: 1) Complete IEP facilitation study analysis. In addition, one activity needed to be expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and RtI, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments.

Part B State Annual Performance Report (APR) for FFY 2008 (2008-2009)

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 20: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

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

Measurement: State reported data, including 618 data, State Performance Plan and Annual Performance Reports are:

- a. submitted on or before due dates (February 1 for child count, including race and ethnicity; placement; November 1 for exiting, discipline, personnel and dispute resolution; and February 1 for Annual Performance Reports and assessment); and
- b. accurate, including covering the correct year and following the correct measurement.

FFY	Measurable and Rigorous Target
2008 (2008-2009)	100%
	Actual Target Data
	100%

Data Mechanisms:

ISBE employs the following mechanisms to ensure the accuracy of state data submitted to OSEP. The special education Funding and Child Tracking System (FACTS) is a computerized tracking system for eligible children under IDEA. It is used to meet reporting requirements for children with disabilities in the State. Each school district electronically submits its data on students with disabilities. These data document each child's name, type of disability, age, race/ethnicity and educational environment. In addition, personnel data are included in FACTS. Edit checks are incorporated into the system to identify data errors. Cross checks have also been incorporated into the system to detect possible duplications of children in the State. Examples of edit checks include: identification of individual students (name, birth date), educational placement, exit code and anticipated post-secondary services. The Division of Special Education and Support Services maintains ongoing communication with other relevant divisions within the agency to assist and enforce timely reporting. In addition, ISBE maintains a FACTS instruction manual on its website, and provides technical assistance, both onsite for school districts and during state conferences, via the Harrisburg Project. Counts are compared with prior year counts for reasonableness of fluctuation and other information.

ISBE also uses the Illinois Student Information System (SIS) and End of Year Report to ensure the accuracy, validity and reliability of data reported to OSEP. Numerous edit checks have also been built into these systems to ensure the accuracy of enrollment, assessment, graduation and dropout data, which are publicly reported for each LEA across the State. ISBE provides extensive technical assistance to LEAs on proper procedures and definitions with regard to data submissions to ensure data are timely, accurate and reliable at both the LEA and SEA levels. Additional information regarding these data systems and the technical assistance provided can be found below.

Actual Target Data for FFY 2008 (2008-2009):

Illinois used the Indicator 20 Scoring Rubric to report on Indicator 20 data and the following definitions:

1 = State met the requirements for the given APR indicator or 618 data collection

0 = State did not meet the requirements

N/A = The requirement is not applicable to the State

SPP/APR Data

- 1) **Valid and Reliable Data** – Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).
- 2) **Correct Calculation** – Result produced follows the required calculation in the instructions for the indicator.

618 Data

- 1) **Timely** – All data for the APR are submitted on or before February 1, 2010. Data for tables for 618 are submitted on or before each tables' due date. No extensions.
- 2) **Complete Data** – No missing sections. No placeholder data. Data submitted from all districts or agencies. For example, when the instructions for an indicator require data broken down into subparts, data for all subparts are provided.
- 3) **Passed Edit Checks** - 618 data submissions do not have missing cells or internal inconsistencies. (See <https://www.ideadata.org/618DataCollection.asp> regarding data edits).
- 4) **Responded to Data Note Requests** – Written explanation of year-to-year changes are provided for inclusion in Data Notes to accompany 618 data submissions as requested by OSEP.

SPP/APR Data - Indicator 20			
APR Indicator	Valid and Reliable	Correct Calculation	Total
1	1		1
2	1		1
3A	1	1	2
3B	1	1	2
3C	1	1	2
4A	1	1	2
5	1	1	2
7	1	1	2
8	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	1	1	2
13	N/A	N/A	0
14	N/A	N/A	0
15	1	1	2
16	1	1	2
17	1	1	2
18	1	1	2
19	1	1	2
		Subtotal	34
APR Score Calculation	Timely Submission Points - If the FFY 2008 APR was submitted on-time, place the number 5 in the cell on the right.		5
	Grand Total - (Sum of subtotal and Timely Submission Points) =		39.00

618 Data - Indicator 20					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 - Child Count Due Date: 2/1/09	1	1	1	1	4
Table 2 - Personnel Due Date: 11/1/09	1	1	1	N/A	3
Table 3 - Ed. Environments Due Date: 2/1/09	1	1	1	1	4
Table 4 - Exiting Due Date: 11/1/09	1	1	1	N/A	3
Table 5 - Discipline Due Date: 11/1/09	1	1	1	N/A	3
Table 6 - State Assessment Due Date: 2/1/10	1	N/A	N/A	N/A	1
Table 7 - Dispute Resolution Due Date: 11/1/09	1	1	1	N/A	3
				Subtotal	21
618 Score Calculation			Grand Total (Subtotal X 1.857) =		39.00

Indicator #20 Calculation	
A. APR Grand Total	39.00
B. 618 Grand Total	39.00
C. APR Grand Total (A) + 618 Grand Total (B) =	78.00
Total N/A in APR	0
Total N/A in 618	0
Base	78.00
D. Subtotal (C divided by Base*) =	1.000
E. Indicator Score (Subtotal D x 100) =	100.00

Based upon the calculation provided by the Indicator 20 scoring rubric, Illinois has met the measurable and rigorous target of 100% for Indicator 20 in FFY08.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008 (2008-2009):

Explanation of Progress or Slippage:

Illinois made progress on Indicator 20 for FFY08, moving from 95.5% in FFY07 to 100% in FFY08. It is believed that the completion of the improvement activities discussed below contributed to the progress made since FFY07 in the timeliness, accuracy and reliability of data reported in the Annual Performance Report (APR). Regular memoranda were sent to all Superintendents and Directors of Special Education to ensure districts were well informed about data collection requirements, timelines, and accompanying sanctions. ISBE special education staff continued to work collaboratively with other divisions within the agency to ensure timely collection of required data elements for federal reporting and to link and integrate agency data systems. In addition, desk audits for LEAs with atypical patterns in submitted data were conducted. Finally, through the LEA Determinations Process, ISBE provides targeted technical assistance for LEAs that fail to meet submission deadlines. In reference to specific indicators, ISBE completed the following improvement activities:

Indicators 1 and 2: The Division of Special Education and Support Services worked collaboratively with the Division of Data Analysis and Progress Reporting to provide technical assistance to LEAs on proper reporting of graduation and dropout data through the annual School Report Card data submission (graduation) and the annual End of Year Report data submission (dropout).

Indicator 3 and Table 5: The Division of Special Education and Support Services worked collaboratively with the Division of Data Analysis and Progress Reporting and Division of Assessment to ensure the timeliness, accuracy and reliability of statewide assessment data. Further, all LEAs in Illinois are now using the SIS, which greatly enhances Illinois' ability to verify the accuracy of assessment participation and performance data.

Indicator 4 and Table 5: The Division of Special Education and Support Services worked collaboratively with the Division of Data Analysis and Progress Reporting to incorporate the collection of student discipline data into the SIS. ISBE has refined the SIS to collect these required data elements and has implemented the technical changes necessary to collect these data.

Indicators 5 and 6 and Tables 1, 2, 3 and 4: The Division of Special Education and Support Services worked collaboratively with the Division of Funding and Disbursements to provide technical assistance to LEAs on proper reporting of child count, personnel, educational environment and exiting data through the FACTS.

Indicator 7: Illinois continued to provide technical assistance to LEAs regarding the reporting of Early Childhood Outcomes Data during FFY08. Illinois has incorporated this data collection into the SIS to further ensure timely, valid and reliable submission of these data from LEAs.

Indicator 8: Illinois has fully examined the representativeness of the survey respondents to the population of parents of students with disabilities statewide, as discussed in Indicator 8 of this APR.

Indicator 9 & 10: Illinois analyzes both overrepresentation and underrepresentation in terms of LEA data.

Indicator 11: The Division of Special Education and Support Services worked collaboratively with the Division of Funding and Disbursements to provide technical assistance to LEAs on proper reporting of child find data through the FACTS.

Indicator 12: Illinois continues to collaborate with the Department of Human Services through a data sharing agreement to ensure the timeliness, accuracy and reliability of early childhood transition data. These data are used to follow-up with LEAs who received referrals on children but had unsuccessful transitions and correct any data reporting errors by the local Part C agencies.

Indicator 13: The Division of Special Education and Support Services worked collaboratively with the Division of Funding and Disbursements to provide technical assistance to LEAs on proper reporting of secondary transition data through the FACTS. FACTS requires the collection of these data on a student level for every student who is 14½ years or older. Illinois continued to provide extensive training and technical assistance to LEAs on the collection of Indicator 13 data, especially with regard to use of the NSTTAC checklist. This checklist helps LEAs determine if a student's transition plan has coordinated, measurable, annual IEP goals and transition services, making the Indicator 13 data reported through FACTS an accurate reflection of the status of the student's transition plan.

Indicators 15 – 19 and Table 7: Illinois continues to enhance SEDS to provide for the collection of general supervision and monitoring data. Modules have been added to cover all aspects of Illinois' general supervision system including: complaints, mediations, due process hearings, resolution sessions and focused monitoring. These enhancements help ensure that Illinois can provide timely, accurate and reliable data for Indicators 15 through 19. In addition, ISBE conducts data verifications/desk audits for district reported data. Findings of noncompliance are issued to LEAs when noncompliance is found as a result of this process.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2008 (2008-2009)

After completing the evaluation process, which included reviewing improvement activities for this specific indicator, it was determined that one activity needed to be expanded: 1) Develop an infrastructure that allows for the scaling up of evidence based programs by supporting intra-agency integration efforts including collaboration with the Curriculum & Instruction division for SISEP and Rtl, the Innovation & Improvement division for districts and schools in corrective action under NCLB and the Assessment division for all statewide assessments. The SISEP activity was expanded to acknowledge SISEP staff's efforts to integrate programs, projects and initiatives across multiple divisions within ISBE.

Attachment 1: Part B Indicator 15 Worksheet

Instructions for Completing the B-15 Worksheet

Indicator B-15 is to determine whether the State's general supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification (notification to the public agency that the State has concluded that the public agency is not complying with a statutory or regulatory provision). This indicator is measured as the percent of noncompliance corrected within one year of identification.

States are directed to reflect monitoring data collected through the components of the State's general supervision system, including on-site visits, self-assessments, local performance plans and annual performance reports, desk audits, data reviews, complaints, due process hearings, etc. Additionally, according to the OSEP Instructions for the Indicators/Measurement table, States are to group areas of noncompliance by monitoring priority areas and areas of noncompliance.

Key Terms

- **Monitoring Activities** are described in the document *Developing and Implementing an Effective System of General Supervision: Part B (January 2007)* and *FAQs Regarding Identification and Correction (August 2008)*. Specific activities of monitoring include, but are not limited to local education agency (LEA) self-assessments or local annual performance reports, data reviews, desk audits, on-site visits or other activities to ensure compliance.
- **Dispute Resolution: Hearings and Complaints** are also described in the General Supervision document referenced above. These include the tracking of timely correction of noncompliance identified through complaints and due process actions. States must include any noncompliance identified in a due process hearing decision, whether or not the parent prevailed in the hearing.
- **Finding** is defined as a written notification from the State to an LEA that contains the State's conclusion that the LEA is in noncompliance, and that includes the citation of the regulation and a description of the quantitative and/or qualitative data supporting the State's conclusion of noncompliance with the regulation.
- **Correction** is defined as the State requiring the LEA to revise any noncompliant policies, procedures and/or practices and the State verifies through follow-up review of data, other documentation and/or interviews that the noncompliant policies, procedures and/or practices have been revised and the noncompliance has been corrected. The State should notify the LEA in writing that the noncompliance is corrected. For purposes of the SPP/APR reporting, timely correction occurs when noncompliance is corrected as soon as possible but no later than one year from the identification of noncompliance.

Organization of the B-15 Worksheet:

- **The worksheet is organized by individual indicators or clusters of indicators.**
 - **Note:** When indicators are "clustered" the State does not need to report separately on each indicator in the cluster. Rather, the number of LEAs, numbers of findings, etc. should be grouped within that cluster.

- **There are five columns on the worksheet:**
 1. Indicator/Indicator Clusters
 2. General Supervision System Components
 3. Number of LEAs Issued Findings (including public agencies, such as correctional facilities and State schools that are not established as LEAs, e.g., school for the deaf)
 4. Number of Findings of noncompliance identified
 5. Number of Findings of noncompliance for which correction was verified no later than one year from identification
- **For each indicator/indicator cluster, there are two sub-rows that are repeated:**
 - Monitoring Activities
 - Dispute Resolution

Completing the Worksheet:

Column 1 - Indicator/Indicator Cluster Column - Lists the SPP/APR indicators individually or within a cluster of indicators. At the end of the worksheet, there are additional rows titled - *Other areas of noncompliance (can be grouped topically)*. These rows may be used by a State to list other areas of noncompliance that the State has not reported under other indicators/ indicator clusters. The State must list the area of noncompliance.

Column 2 - General Supervision Components Column – Represents all elements that comprise the State’s Monitoring Activities and Dispute Resolution processes. The first sub-row of Monitoring Activities may include Self-Assessment, Local APR, Data Reviews, Desk Audits, or On-Site Visits. This sub-row also has an “Other” option to indicate the list of monitoring activities may not be all inclusive. The second sub-row refers to the Dispute Resolution: Complaints and Hearings processes.

Column 3 - Number of LEAs Issued Findings of Noncompliance – Represents the number of LEAs for which the State identified through a written conclusion or report findings of noncompliance. The date of the written conclusion(s) or report of findings to the LEA is used to report the number LEAs monitored, not the date of the monitoring activity.

Notes:

- An LEA may have an onsite visit in one fiscal year and the written notification of findings of noncompliance is sent to the LEA in the next fiscal year.
- Federal Fiscal Year (FFY) begins July 1 of each year and ends June 30 of the next year.

Column 4 - (a) Number of Findings of noncompliance identified – Represents the number of identified findings of noncompliance for the indicator/indicator cluster. States must include every finding of noncompliance with a requirement of the IDEA in their data for Indicators C9/B15. The date of the written conclusion or report of findings to the LEA is used, not the date of the monitoring activity. The same FFY date range is used for Column 3 and Column 4.

Column 5 - (b) Number of Findings of noncompliance for which Correction was Verified no later than one year from identification – Represents the number of findings from Column 4 for which the State verified correction no later than one year from identification.

Sum the numbers down Column 4 and Column 5.

Percent of noncompliance corrected within one year of identification – Divide the sum of Column 5 by the sum of Column 4 and multiply 100.

PART B INDICATOR 15 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of youth with IEPs graduating from high school with a regular diploma. 2. Percent of youth with IEPs dropping out of high school.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
14. Percent of youth who had IEPs, are no longer in secondary school and who have been competitively employed, enrolled in some type of postsecondary school, or both, within one year of leaving high school.	Dispute Resolution: Complaints, Hearings	0	0	0
3. Participation and performance of children with disabilities on statewide assessments. 7. Percent of preschool children with IEPs who demonstrated improved outcomes.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
4A. Percent of districts identified as having a significant discrepancy in the rates of suspensions and expulsions of children with disabilities for greater than 10 days in a school year.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
5. Percent of children with IEPs aged 6 through 21 -educational placements. 6. Percent of preschool children aged 3 through 5 – early	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	32	45	21

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childhood placement.	Dispute Resolution: Complaints, Hearings	2	2	2
8. 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.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
9. Percent of districts with disproportionate representation of racial and ethnic groups in special education that is the result of inappropriate identification. 10. Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
11. 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.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	1	1	1

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12. 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.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
13. Percent of youth aged 16 and above with IEP that includes coordinated, measurable, annual IEP goals and transition services that will reasonably enable student to meet the post-secondary goals.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
Other areas of noncompliance: Evaluation of Students for Special Education Services	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	10	18	17
Other areas of noncompliance: Eligibility of Students for Special Education Services	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	1	1	1
Other areas of noncompliance: Educational Services/Individualized Education Program (IEP)	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	14	18	11

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	Dispute Resolution: Complaints, Hearings	37	98	89
Other areas of noncompliance: Related Services	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	2	2	2
Other areas of noncompliance: Educational Placement	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	13	22	20
Other areas of noncompliance: Procedural Safeguards	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	3	3	2
Other areas of noncompliance: Records	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	6	6	6

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Other areas of noncompliance: Discipline Procedures	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	4	5	5
Other areas of noncompliance: Personnel	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	3	3	2
Other areas of noncompliance: Tuition Reimbursement	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	2	2	2
Other areas of noncompliance: Other	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	2	2	2
Sum the numbers down Column a and Column b			228	183

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Percent of noncompliance corrected within one year of identification = (column (b) sum divided by column (a) sum) times 100.			(b) / (a) X 100 =	80.26%