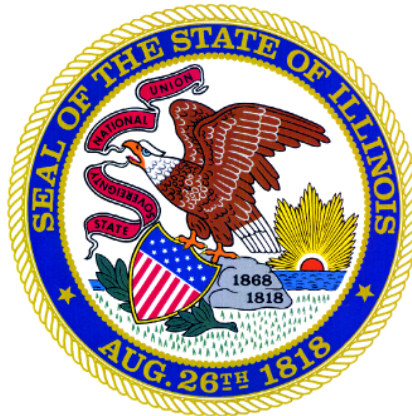


ILLINOIS STATE BOARD OF EDUCATION



ILLINOIS SPECIAL EDUCATION ACCOUNTABILITY AND SUPPORT SYSTEM LEA Determinations and Tiered Supports

September 1, 2023

Illinois Special Education Accountability and Support System

LEA Determinations and Tiered Supports

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Introduction

Each State Education Agency is responsible for ensuring the general supervision of all educational programs for children with disabilities in the state. In Illinois, the Illinois State Board of Education (ISBE) Special Education Department is responsible for enforcing the requirements of Part B of the Individuals with Disabilities Education Act (IDEA) and ensuring continuous improvement via Local Education Agencies (LEAs). In carrying out its roles of leadership, resource allocation, technical assistance, monitoring, and evaluation, ISBE is required to oversee the performance of school districts to assess and ensure the effectiveness of efforts to educate children with disabilities, in accordance with IDEA and Every Student Succeeds Act (ESSA). As stated in Section 616 of the 2004 amendments to the IDEA:

“The primary focus of Federal and State monitoring activities described in paragraph (1) shall be on (A) improving educational results and functional outcomes for all children with disabilities; and (B) ensuring that States meet the program requirements under this part, with a particular emphasis on those requirements that are most closely related to improving educational results for children with disabilities.”

ISBE’s general supervision system is characterized by multiple operational components that are interrelated and function in such a manner to form a comprehensive system. The system is intended to improve educational results and functional outcomes for children with disabilities. It is also designed to identify noncompliance and ensure correction of identified noncompliance in a timely manner. To that end, ISBE began implementing its updated Illinois Special Education Accountability and Support System in September 2020. The system was designed to:

- Maintain a high level of compliance with IDEA federal regulations and Illinois Administrative Rules for special education.
- Support LEAs in the process of self-assessment, root cause analysis, evaluation, and improvement of compliance and results-focused efforts.
- Establish a continuous and meaningful process focused on improving academic results and functional outcomes for students with disabilities by connecting local data to improvement efforts.
- Connect system improvement activities with multi-year planning and supports.

The foundation of the updated system was built on the premise of results-driven accountability (RDA) currently being utilized at the federal level. The U.S. Department of Education (ED), Office of Special Education Programs (OSEP) revised its own accountability system to shift from a system focused primarily on compliance to one that is more balanced and emphasizes improving results and outcomes as well. Like OSEP, the updated Illinois Special Education Accountability and Support System provides differentiated monitoring and support using an RDA framework. It is designed to identify potential LEA risk through the LEA Determinations process and to assist ISBE in effectively utilizing its resources to provide tiered monitoring and support to its LEAs. It focuses on monitoring for compliance and results and uses that information to provide targeted, evidence-based technical assistance and professional development to LEAs. It addresses district-specific needs in the areas of results, compliance, and funding by differentiating levels and types of monitoring and support based on each LEA’s unique strengths, progress, and challenges identified through the LEA Determinations process. The updated system complies with special education general supervision requirements and aligns with other ISBE initiatives to support results-based student outcomes. The following pages of this document describe the three main components of the Illinois Special Education Accountability and Support System: LEA selection and determinations, LEA requirements and tiered supports, and system support plans.

Section I: LEA Risk Assessment and Determinations

ISBE selects LEAs for tiered monitoring and support by identifying potential risk through the LEA Determinations process. ISBE utilizes data from indicator measures of success to determine the degree to which a school district, or LEA, is correctly implementing the requirements of Part B of IDEA. States are required to make determinations on the performance of each LEA based on indicators identified by the federal government and delineated in the State Performance Plan. These indicators are separated into compliance indicators (which measure compliance with the IDEA regulations) and results indicators (which measure outcomes for students with disabilities). States may consider LEA performance on results indicators but are required to consider compliance indicators when making local determinations.

To develop and implement Illinois' determinations process, ISBE convenes a stakeholder group to help set criteria for designating the status of LEAs in relation to the requirements outlined under Section 616 of the IDEA. This leads to an overall determination for LEAs in one of the following categories:

- Meets Requirements
- Needs Assistance
- Needs Assistance for Two or More Consecutive Years
- Needs Intervention
- Needs Intervention for Three or More Consecutive Years
- Needs Substantial Intervention.

ISBE directs public inquiries regarding LEA Determinations to the local district. ISBE encourages LEAs to develop a plan regarding how to share determination information with stakeholders, including local union leadership.

The criteria for the 2022-23 LEA Determinations are defined below. Data from the 2022-23 school year is used unless otherwise specified in the indicator target and measurement description.

Indicator Targets and Measures of Success Used for LEA Determinations

The Illinois indicator measures of success for access, equity, and growth used for LEA Determinations are aligned to the ISBE goal related to student learning:

“Every child will make significant academic gains each year, increasing their knowledge, skills, and opportunities so they graduate equipped to pursue a successful future, with the state paying special attention to addressing historic inequities.”

These indicator measures are separated into four groups:

- Early childhood outcomes
- Secondary outcomes
- Additional outcomes
- Fiscal outcomes

Targets and measures of success are derived from the IDEA Part B State Performance Plan (SPP) for Illinois and single audit findings issued to Illinois LEAs.

The specific measures for each indicator target are described below.

Early Childhood Outcome Indicator Targets and Measures:

SPP Indicator 6a results target - The LEA is meeting or exceeding the SPP target for Indicator 6a, which measures the percentage of children with Individualized Education Programs (IEPs) aged 3, 4, and 5 who are enrolled in a preschool program and who are attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program. The measure is: Percent = $[(\# \text{ of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program}) \div (\text{total } \# \text{ of children ages 3, 4, and 5 with IEPs})] \times 100$. The ISBE data source is the IEP Student Tracking and Reporting (I-Star) System. ISBE uses an N size of 5 for this indicator. Therefore, LEAs with fewer than five total preschool students ages 3, 4, and 5 with IEPs are not included in the calculation, deeming the indicator not applicable for the LEA as related to the scoring rubric.

SPP Indicator 12 compliance target – All children (100%) in the LEA who are referred by IDEA Part C prior to age 3 and who are found eligible for IDEA Part B have an IEP developed and implemented by their third birthdays. The measure is:

- a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.
- b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
- c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.
- d. Number of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
- e. Number of children who were referred to Part C fewer than 90 days before their third birthdays.
- f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a state's policy under 34 CFR 303.211 or a similar State option. (This category is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child's third birthday under 34 CFR 303.211 or a similar state option. This is applicable to Illinois beginning with the 2021-2022 school year.)

Percent = $[(c) \div (a - b - d - e - f)] \times 100$.

The ISBE data sources are the Student Information System (SIS) Early Childhood Transition database and the ISBE Data Warehouse. ISBE uses an N size of 5 for this indicator. Therefore, LEAs with fewer than five students transitioning from IDEA Part C to IDEA Part B are not included in the calculation, deeming the indicator not applicable for the LEA as related to the scoring rubric.

Secondary Outcome Indicator Targets and Measures:

SPP Indicator 1 results target - The LEA is meeting or exceeding the SPP target for the percentage of youth with IEPs exiting from high school with a regular high school diploma. The data for this indicator lags one year (e.g., data from the 2021-22 school year is used for the 2022-23 LEA Determinations). The measure is a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular diploma in the numerator and the number of all youth with IEPs who left high school (ages 14-21) in the denominator (in a single year). The ISBE data source is the same data as used for reporting to ED under Section 618 of IDEA, using the definitions in ED Facts file specification FS009. This data is derived from SIS. ISBE uses an N size of 5 for this indicator. Therefore, LEAs with fewer than five students with IEPs exiting are not included in the calculation, deeming the indicator not applicable for the LEA as related to the scoring rubric.

SPP Indicator 13 compliance target - All youth (100%) in the LEA with IEPs aged 16 and above have measurable, annual IEP goals and appropriate transition assessment, services, and courses. The measure is: Percent = $[(\# \text{ of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age-appropriate transition assessment; transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals; and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP team meeting with the prior consent of the parent or student who has reached the age of majority}) \div (\# \text{ of youth with an IEP age 16 and above})] \times 100$. The ISBE data source is I-Star. ISBE uses an N size of 5 for this indicator. Therefore, LEAs with fewer than five students with secondary transition plans are not included in the calculation, deeming the indicator not applicable for the LEA as related to the scoring rubric.

Additional Outcome Indicator Targets and Measures:

SPP Indicator 5a results target – The LEA is meeting or exceeding the SPP target for Indicator 5a, which measures the percentage of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day. The measure is: Percent = $[(\# \text{ of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day}) \div (\text{total } \# \text{ of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs})] \times 100$. The ISBE I data source is I-Star. ISBE uses an N size of 5 for this indicator. Therefore, LEAs with fewer than five students aged 5 who are enrolled in kindergarten and aged 6-21 with IEPs are not included in the calculation, deeming the indicator not applicable for the LEA as related to the scoring rubric.

SPP Indicator 4b compliance target – The LEA does not have policies, procedures, or practices that contribute to a significant discrepancy in the rates of suspensions and expulsions greater than 10 days by race/ethnicity for children with IEPs (and no open finding of noncompliance). The data for this indicator lags one year (e.g., data from the 2021-22 school year is used for the 2022-23 LEA Determinations). The measure is (a) a

significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of more than 10 days during the school year of children with IEPs; and (b) policies, procedures, or practices that contribute to the significant discrepancy 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 (as determined through the self-assessment or status report process). The ISBE data sources are the SIS Discipline De-identified Table and the district self-assessment or status report (if applicable).

SPP Indicator 9 compliance target – The LEA does not have any disproportionate representation due to inappropriate identification in any racial/ethnic group receiving special education and related services (and no open finding of noncompliance). The measure is: disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification as determined through the self-assessment or status report process. The ISBE data sources are the I-Star special education 12/1 counts, SIS 9/30 data, and the district self-assessment or status report, if applicable.

SPP Indicator 10 compliance target – The LEA does not have disproportionate representation due to inappropriate identification in any racial/ethnic group in specific disability categories (and no open finding of noncompliance). The measure is: disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification as determined through the self-assessment or status report process. The ISBE data sources are the I-Star special education 12/1 counts, SIS 9/30 data, and the district self-assessment or status report, if applicable.

SPP Indicator 11 compliance target - All children (100%) in the LEA were evaluated within 60 school days of receiving parental consent for initial evaluation. The measure is:

- a. Number of children for whom parental consent to evaluate was received.
- b. Number of children whose evaluations were completed within 60 school days.

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

The ISBE data source is I-Star. ISBE uses an N size of 5 for this indicator. Therefore, LEAs with fewer than five initial student evaluations are not included in the calculation, deeming the indicator not applicable for the LEA as related to the scoring rubric.

Timely correction of noncompliance target - All findings of noncompliance issued to the LEA are closed within one year of the date of the finding of noncompliance letter.

Fiscal Outcome Indicator Target and Measure:

Single audit finding target – The LEA was not issued any single audit findings in the most recent year available.

Indicator targets and measures of success are used as part of the Illinois Special Education Accountability and Support System Risk Assessment Scoring Rubric. The rubric lists the indicators being considered for LEA Determinations. Each indicator has a range of scores based on a district's progress toward meeting the indicator target. The rubric uses the indicator targets, and approximations toward the indicator targets, to assign an LEA score for each applicable

indicator. Score possibilities vary by indicator but range from zero to three with three being the highest score attainable. All indicators have equal weight in terms of the overall calculation. An effort was made to distribute the number of applicable compliance and results indicators as evenly as possible to maintain a balanced system. Indicators that are “Not Applicable” for a district (e.g., early childhood outcomes are not applicable for high school LEAs) are not included in the district’s calculation. The rubric scores for each district are then used to populate the Illinois Special Education Accountability and Support System LEA Determination Matrix with the district’s indicator points. The scores, or number of points, assigned for each indicator are added together to obtain a total score. The cumulative score is then divided by the total points possible to calculate a district’s overall percentage. The district’s overall percentage is then aligned to one of the LEA Determination categories. Each LEA Determination designation is also aligned to a corresponding level of tiered support. Additional information about the three levels of tiered support is in Section II of this document. The Matrix template is found on page 11.

LEA Determination Designation and Corresponding Tiered Level of Support

LEA Overall Percentage	LEA Determination	Level of Support
LEA Determination Matrix overall percentage of 80% or more	Meets Requirements	Universal (Tier 1) Support Available
LEA Determination Matrix overall percentage above 75% but less than 80%	Needs Assistance	Universal (Tier 1) Support Available
LEA Determination Matrix overall percentage above 75% but less than 80% for two or more consecutive years	Needs Assistance for Two or More Consecutive Years	Targeted (Tier 2) Guidance Needed
LEA Determination Matrix overall percentage of 45% - 75%	Needs Intervention	Intensive (Tier 3) Coaching Required
LEA Determination Matrix overall percentage of 45% - 75% for three or more consecutive years	Needs Intervention for Three or More Consecutive Years	Intensive (Tier 3) Coaching Required
LEA Determination Matrix overall percentage of less than 45%	Needs Substantial Intervention	Intensive (Tier 3) Coaching Required

Appeals

Districts wishing to appeal their LEA Determination must submit the appeal in writing on district letterhead, with supporting documentation, no later than **October 2, 2023**, to Kristina Holloway at khollowa@isbe.net. Before submitting appeals, please note the following:

- Appeals should be based on issues that could not have been resolved during data correction and verification periods. Districts have multiple opportunities throughout the year to ensure data is accurate in SIS and I-Star. Therefore, the appeal process cannot be used to dispute incorrect data that should have been adjusted during the year.

- ISBE uses federal reporting guidelines to calculate each LEA's performance. Therefore, appeals based on disputes with the prescribed targets or measurements will not be granted.

Each appeal will be reviewed on a case-by-case basis. Districts are encouraged to discuss their intent to appeal with Ms. Holloway before formal submission.

ILLINOIS SPECIAL EDUCATION ACCOUNTABILITY AND SUPPORT SYSTEM RISK ASSESSMENT SCORING RUBRIC

Indicator Measure	Score = 3	Score = 2	Score = 1	Score = 0
Indicator 6a: Early Childhood Service Delivery Settings	The LEA is meeting or exceeding the SPP target	The LEA is below the SPP target and has improved from the previous year (growth = > 1%)	The LEA is below the SPP target and has remained constant from the previous year	The LEA is below the SPP target and has declined from the previous year (slippage= > 1%)
Indicator 12: IDEA Part C to IDEA Part B Transition	100% of children referred by IDEA Part C prior to age 3, who were found eligible for IDEA Part B, had an IEP developed and implemented by their third birthdays	95.00%-99.99% of children referred by IDEA Part C prior to age 3, who were found eligible for IDEA Part B, had an IEP developed and implemented by their third birthdays	90.00%-94.99% of children referred by IDEA Part C prior to age 3, who were found eligible for IDEA Part B, had an IEP developed and implemented by their third birthdays	Fewer than 90.00% of children referred by IDEA Part C prior to age 3, who were found eligible for IDEA Part B, had an IEP developed and implemented by their third birthdays
Indicator 1: Graduation	The LEA is meeting or exceeding the SPP target	The LEA is below the SPP target and has improved from the previous year (growth = > 1%)	The LEA is below the SPP target and has remained constant from the previous year	The LEA is below the SPP target and has declined from the previous year (slippage= > 1%)
Indicator 13: Secondary Transition	100% of youth with IEPs aged 16 and above had measurable, annual IEP goals and appropriate transition assessment, services, and courses	95.00%-99.99% of youth with IEPs aged 16 and above had measurable, annual IEP goals and appropriate transition assessment, services, and courses	90.00%-94.99% of youth with IEPs aged 16 and above had measurable, annual IEP goals and appropriate transition assessment, services, and courses	Fewer than 90.00% of youth with IEPs aged 16 and above had measurable, annual IEP goals and appropriate transition assessment, services, and courses
Indicator 5a: Least Restrictive Environment	The LEA is meeting or exceeding the SPP target	The LEA is below the SPP target and has improved from the previous year (growth = > 1%)	The LEA is below the SPP target and has remained constant from the previous year	The LEA is below the SPP target and has declined from the previous year (slippage= > 1%)
Indicator 4b: Suspension/Expulsion	The LEA does not have policies, procedures or practices that contribute to a significant discrepancy in the rates of suspensions and expulsions greater than 10 days by race/ethnicity for children with IEPs	-----	-----	The LEA has an open finding of noncompliance for this indicator

Indicator Measure	Score = 3	Score = 2	Score = 1	Score = 0
Indicator 9: Disproportionality (IEPs)	The LEA does not have disproportionate representation due to inappropriate identification in any racial/ethnic group receiving special education or related services	-----	-----	The LEA has an open finding of noncompliance for this indicator
Indicator 10: Disproportionality (specific disability categories)	The LEA does not have disproportionate representation due to inappropriate identification in any racial/ethnic group in specific disability categories	-----	-----	The LEA has an open finding of noncompliance for this indicator
Indicator 11: Child Find	100% of children were evaluated within 60 school days of receiving parental consent for an initial evaluation	95.00%-99.99% of children were evaluated within 60 school days of receiving parental consent for an initial evaluation	90.00%-94.99% of children were evaluated within 60 school days of receiving parental consent for an initial evaluation	Fewer than 90.00% of children were evaluated within 60 school days of receiving parental consent for an initial evaluation
Timely Correction of Noncompliance	100% of noncompliance was corrected by the LEA within the one-year timeframe	-----	-----	The LEA has uncorrected noncompliance beyond the one-year timeframe
Fiscal Risk (Single Audit Findings)	The LEA has no single audit findings in the most recent year available	The LEA has single audit findings that are low risk (minor monitoring and/or reporting issues which are easily remedied by implementing procedures according to single audit recommendations)	The LEA has single audit findings that are moderate risk (moderate documentation and/or reporting issues which require revision of internal financial processes) OR a new moderate/minor issue is found if the LEA had audit findings last year	The LEA has single audit findings that are high risk (major financial tracking issues that require the initiation of appropriate financial and accounting procedures) OR the LEA has the same audit finding for 2 consecutive years

*An N size of 5 is utilized for indicators 1, 5a, 6a, 11, 12, and 13

District:

**ILLINOIS SPECIAL EDUCATION ACCOUNTABILITY AND SUPPORT SYSTEM
Federal Fiscal Year 2022 LEA DETERMINATION MATRIX**

Early Childhood Outcomes	FFY 2022 State Target	FFY 2022 LEA Data	FFY 2021 LEA Data	Score (0-3)
Indicator 6a: Early Childhood Service Delivery Settings	47.00%			
Indicator 12: IDEA Part C to Part B Transition	100.00%			
Secondary Outcomes				
Indicator 1: Graduation	82.60%			
Indicator 13: Secondary Transition	100.00%			
Additional Outcomes				
Indicator 5a: Least Restrictive Environment	53.10%			
Indicator 4b: Suspension/Expulsion	No policies contributing to a significant discrepancy			
Indicator 9: Disproportionality (IEPs)	No inappropriate identification			
Indicator 10: Disproportionality (specific disability categories)	No inappropriate identification			
Indicator 11: Child Find	100.00%			
Timely Correction of Noncompliance	One year			
Fiscal Outcomes				
Fiscal Risk (Single Audits)	No audit findings			
TOTAL SCORE				
TOTAL POINTS POSSIBLE				
OVERALL PERCENTAGE				
LEA DETERMINATION				
TIERED LEVEL OF SUPPORT				

The number of points assigned for each indicator is averaged to calculate the total score, overall percentage, LEA Determination, and corresponding tiered level of support. Indicators that are “Not Applicable” for a district (e.g., early childhood outcomes are not applicable for high school districts) are not included in the district’s calculation.

Please refer to the Illinois Special Education Accountability and Support System LEA Tiered Support Model on page 20 of this document for details regarding each tiered level of support.

Section II: LEA Requirements and Tiered Supports

The ISBE Special Education Department uses a tiered supports model to provide an appropriate level of assistance for LEAs. When an LEA is assigned a level of support, specific activities are required of the LEA that are intended to both ensure compliance and assist districts with improved results. The procedures under the Illinois Special Education Accountability and Support System facilitate ISBE’s efforts in the following activities:

- Fulfilling its responsibility to provide appropriate general supervision to Illinois LEAs.
- Differentiating levels of support for Illinois LEAs based on degree/intensity of needs.
- Allocating resources to address specific need(s) of Illinois LEAs.

The LEA Tiered Support Model consists of three levels, with required activities and supports in place at each level to ensure accountability for both compliance and results measures as well as resources to strengthen and improve student outcomes.

LEA Determination Designation	Tiered Level of Support
Meets Requirements Needs Assistance	Universal (Support Available) Tier 1
Needs Assistance for Two or More Consecutive Years	Targeted (Guidance Needed) Tier 2
Needs Intervention Needs Intervention for Three or More Consecutive Years Needs Substantial Intervention	Intensive (Coaching Required) Tier 3

Meets Requirements or Needs Assistance: Required Universal Tier 1 Activities

LEAs designated as “Meets Requirements”, or “Needs Assistance” fall under the universal tiered level of support (Tier 1). A determination of Meets Requirements or Needs Assistance requires no further action by the district if no findings of noncompliance have been identified.

Universal (Tier 1) supports are available for optional use. Please see the ISBE [Tier 1: Universal Supports](#) webpage for universal information, such as the online catalog of supports and resources and a link to the *Critical Components Tool for Special Education Programs* (self-assessment).

A determination of Meets Requirements or Needs Assistance requires further action by the district if a finding of noncompliance for SPP Indicators 9, 10, 11, 12, or 13 has been issued in conjunction with the LEA Determination or the district currently has an open finding of noncompliance for SPP Indicator 4b. Districts with open findings of noncompliance:

- Are assigned an ISBE SPP contact to support the district with its Corrective Action Plan (CAP) process.
- Must work with their ISBE SPP contact to develop and implement a CAP specific to the SPP indicator that was found to be out of compliance. The ISBE Special Education Accountability and Support System District Corrective Action Template is available on the ISBE [System Support Plans](#) webpage. It is optional for the district to convene a District Accountability Team (DAT) and complete the *Critical Components Tool for Special*

Education Programs to assist in the corrective action process. It is recommended that DAT members be representative of different departments (e.g., special education, general education, administration, community), and the assigned ISBE SPP contact may be included on the team. The district may use the *Critical Components Tool* to collaboratively identify, plan, implement, and monitor changes necessary to correct the findings of noncompliance. The *Critical Components Tool's* ratings can assist the DAT with the development of the CAP, for example. The ISBE SPP contact reviews the CAP and verifies that it adequately addresses the relevant SPP indicator(s). Once the ISBE SPP contact verifies this, the CAP is accepted. After ISBE accepts the CAP, the district begins plan implementation. The ISBE SPP contact is available for technical assistance and support as needed related to the finding of noncompliance. ISBE must verify that the district has corrected each individual case of noncompliance to demonstrate that previous noncompliance has been corrected, unless the student is no longer within the jurisdiction of the LEA. This is referred to as data correction, or Prong 1. ISBE must also verify that the district is correctly implementing the specific regulatory requirements based on a review of updated data. This is referred to as data verification, or Prong 2. Therefore, at scheduled intervals, the ISBE SPP contact verifies individual student correction and implementation of specific regulatory requirements related to the original finding of noncompliance. Noncompliance must be corrected as soon as possible, but in no case more than one year from identification (i.e., the date on which ISBE provided written notification to the LEA of the noncompliance). The ISBE SPP contact will verify district plan implementation through mid-year and end-of-year progress reports if the finding of noncompliance has yet to be closed. The ISBE SPP contact issues a letter closing the finding of noncompliance once correction at both levels, or prongs, is verified. This completes the corrective action process for the current LEA Determination cycle.

Needs Assistance for Two or More Consecutive Years: Required Targeted Tier 2 Activities

LEAs designated as “Needs Assistance for Two or More Consecutive Years” (NA2) fall under the targeted tiered level of support (Tier 2). Districts that need assistance for two or more consecutive years have follow-up actions related to their LEA Determination of NA2. ISBE, in accordance with Section 616(e) of IDEA and 34 CFR 300.604, must take one or more of the following enforcement actions for LEAs designated as NA2:

- Advise districts of available sources of technical assistance that may help them address the area(s) in which they need assistance,
- Direct the use of funds on the area or areas in which the district needs assistance, or
- Identify the district as a high-risk grantee and impose special conditions on the district's IDEA Part B grant award.

ISBE is, therefore, advising districts of available sources of technical assistance that may help them address the indicator area(s) for which they need assistance. Available state and national technical assistance resources, along with an online catalog of supports/resources, may be accessed on the ISBE [Tier 2: Targeted Supports](#) webpage.

NA2 districts must assemble and convene a DAT to review data related to those compliance indicators and results elements for which the LEA received scores below a three. It is recommended that DAT members be representative of different departments (e.g., special

education, general education, administration, community). After a data review, the district must access state and/or national technical assistance resources to support the development of a Corrective Action Plan and/or Improvement Plan. Such targeted (Tier 2) supports are located on the ISBE [Tier 2: Targeted Supports](#) webpage. Targeted supports include a series of options to assist with the implementation of objectives that enhance policies, programs, services, and/or systems.

It is optional for the DAT to use the *Critical Components Tool for Special Education Programs* (self-assessment) to support the development of the plan. The plan must:

- Document the state and/or national technical assistance resources accessed by the district and the action steps developed for implementation by the district (as a result of accessing the resources) to address the scores of zero.
- Be submitted to the ISBE SPP contact for acceptance.
- Be accepted by ISBE and implemented by the district, the NA2 requirement is completed for the current LEA Determination cycle. If results indicators are the only reason for the NA2 designation, the district will complete the ISBE Special Education Accountability and Support System District Improvement Plan Template.

Districts with open findings of noncompliance for SPP Indicators 4b, 9, 10, 11, 12, or 13 have CAP requirements *in addition to* the above-mentioned NA2 requirements. NA2 districts that also have open findings of noncompliance are assigned an ISBE SPP contact to support the district with its CAP process. Districts must work with their ISBE SPP contact to develop and implement a CAP specific to the SPP indicator that was found to be out of compliance. The district utilizes its DAT to assist in the Corrective Action Plan process. It is optional for the DAT to use the *Critical Components Tool for Special Education Programs* to collaboratively identify, plan, implement, and monitor changes necessary to correct the findings of noncompliance; however, the *Critical Components Tool's* ratings can assist the DAT with the development of the CAP. If compliance indicators are the only reason for the NA2 designation, the district will complete the ISBE Special Education Accountability and Support System District Corrective Action Plan Template. If the district NA2 designation is due to both compliance and results indicators, the district will complete the ISBE Special Education Accountability and Support System District Combined Plan Template. Templates are available on the ISBE [System Support Plans](#) webpage.

After the plan is developed, the ISBE SPP contact will review it and verify that it adequately addresses the relevant SPP indicator(s) so that it can be accepted. After ISBE accepts the plan, the district begins implementation. The ISBE SPP contact is available for technical assistance and support as needed as related to the finding of noncompliance.

ISBE must verify that the district has corrected each individual case of noncompliance to demonstrate that previous noncompliance has been corrected, unless the student is no longer within the jurisdiction of the LEA. This is referred to as data correction, or Prong 1. ISBE must also verify that the district is correctly implementing the specific regulatory requirements based on a review of updated data. This is referred to as data verification, or Prong 2. Therefore, at scheduled intervals, the ISBE SPP contact verifies individual student correction and implementation of specific regulatory requirements related to the original finding of noncompliance. Noncompliance must be corrected as soon as possible, but in no case more than one year from identification (i.e., the date on which ISBE provided written notification to the LEA of the noncompliance). The ISBE SPP contact will verify district plan implementation through

mid-year and end-of-year progress reports if the finding of noncompliance has yet to be closed. The ISBE SPP contact issues a letter closing the finding of noncompliance once correction at both levels, or prongs, is verified. This completes the corrective action process for the current LEA Determination cycle.

Needs Intervention, Needs Intervention for Three or More Consecutive Years, or Needs Substantial Intervention: Required Intensive Tier 3 Activities

Districts designated as “Needs Intervention,” “Needs Intervention for Three or More Consecutive Years (NI3),” or “Needs Substantial Intervention” fall under the intensive tiered level of support (Tier 3). A determination of Needs Intervention, Needs Intervention for Three or More Consecutive Years, or Needs Substantial Intervention requires further action by the district.

Districts that Need Intervention, Need Intervention for Three or More Consecutive Years, or Need Substantial Intervention require on-site and/or virtual ISBE direction and coaching. Districts are also required to engage and work with the Illinois Elevating Special Educators (IESE) Network as part of their technical assistance component for the NI/NI3 process.

An ISBE special education consultant is assigned to each district at the intensive tier to facilitate improvement planning and provide individualized oversight, technical assistance, and coaching support. Districts that Need Intervention, Need Intervention for Three or More Consecutive Years, or Need Substantial Intervention that also have open findings of noncompliance for SPP Indicators 4b, 9, 10, 11, 12, or 13 are assigned an ISBE SPP contact, in addition to the ISBE special education consultant, to support the district with its Corrective Action Plan process for the identified indicators.

A data profile identifying patterns and trends in low-performing areas is shared with the district as part of the original LEA Determination information packet. Prior to the initial on-site or virtual visit from the ISBE special education consultant, the district is required to assemble and convene a DAT to review the LEA Determination Matrix data related to those compliance indicators and results elements for which the LEA received a score below three and the data profile provided to the district. It is optional for districts to address results elements for which the LEA received a score of two. The district is required to include the ISBE special education consultant in this process. DAT members should be representative of different departments (e.g., special education, general education, administration, community).

After the DAT’s data analysis, the ISBE special education consultant will initiate an on-site or virtual visit to provide support to the district pertaining to root cause analysis and development of an Improvement Plan or combined Corrective Action Plan and Improvement Plan. The ISBE Special Education Accountability and Support System District Combined Plan Template is available on the ISBE [System Support Plans](#) webpage. The ISBE special education consultant will meet with the DAT after arriving on-site to review data and determine whether additional data needs to be collected to assist with data triangulation and root cause identification. The ISBE consultant then completes interviews, student record reviews, and additional district-specific data collections to dig deeper into results and compliance indicator areas needing support. The DAT will work with ISBE consultant to complete the required *Critical Components Tool for Special Education Programs* during the 1st semester of the LEA Determination year. The ISBE special education consultant will work with the DAT to facilitate the review and triangulation of new data, determination of root causes of low performance, and the creation of an Improvement Plan or combined Corrective Action Plan and Improvement Plan. Related indicators may be clustered to

see whether additional factors exist to identify a root cause explanation. The plan should address any identified compliance- and results-based issues and detail what actions the district will implement as a result of low performance scores or noncompliance. The plan may include one or more of the following activities:

- Reviewing and/or revising district policies, procedures, and/or practices.
- Providing professional development and support to relevant staff.
- Utilizing national, state, or local technical assistance resources.

In addition to accessing the online catalog of supports/resources and state and national sources of technical assistance, the district must access intensive (Tier 3) supports that are available on the ISBE [Tier 3: Intensive Supports](#) webpage. Intensive supports are provided with the intent to offer appropriate resources for LEAs to comply with and implement IDEA Part B requirements for students with disabilities. The district can begin implementation after the ISBE special education consultant approves the plan. The ISBE special education consultant will provide support to the district on implementation of the plan throughout the year. If the district has identified noncompliance, the ISBE SPP contact will work with the ISBE special education consultant. ISBE must verify that the district has corrected each individual case of noncompliance to demonstrate that previous noncompliance has been corrected, unless the student is no longer within the jurisdiction of the LEA. This is referred to as data correction, or Prong 1. ISBE must also verify that the district is correctly implementing the specific regulatory requirements related to the finding of noncompliance (based on a review of updated data). This is referred to as data verification, or Prong 2. At scheduled intervals, therefore, the ISBE consultant and SPP contact will verify individual student correction and implementation of specific regulatory requirements related to the original finding of noncompliance. The ISBE consultant and SPP contact will issue a letter closing the finding of noncompliance once correction at both levels, or prongs, is verified. Noncompliance must be corrected as soon as possible, but in no case more than one year from identification (i.e., the date on which ISBE provided written notification to the LEA of the noncompliance). This completes the corrective action portion of the combined plan for the current LEA Determination cycle.

During the one-year LEA Determination cycle, the ISBE special education consultant will verify district plan implementation via mid-year and end-of-year progress reports. If the district remains in the Intensive Tier 3 category for subsequent LEA Determinations, district staff will continue to work with the ISBE special education consultant until the district's annual LEA Determination changes to Meets Requirements, Needs Assistance, or Needs Assistance for Two or More Consecutive Years.

Additional Required Intensive Tier 3 Activities for LEAs Designated as Needs Intervention for Three or More Consecutive Years

ISBE, in accordance with Section 616(e) of IDEA and 34 CFR 300.604, must take one or more of the following enforcement actions for districts designated as "Needs Intervention for Three or More Consecutive Years":

- Require districts to prepare a Corrective Action Plan or Improvement Plan if ISBE determined that the LEA should be able to correct the problem within one year.
- Require districts to enter into a compliance agreement if ISBE has reason to believe that the district cannot correct the problem within one year.
- Withhold not less than 20% and not more than 50% of the district's direct funds for each year of the determination.

- Recover funds.
- Withhold (in whole or in part) any further payments to the district.
- Refer the matter for appropriate enforcement action.

ISBE is, therefore, requiring districts to prepare an Improvement Plan or combined Corrective Action Plan and Improvement Plan.

Additional Required Intensive Tier 3 Activities for LEAs Designated as Needs Substantial Intervention

ISBE, in accordance with Section 616(e) of IDEA and 34 CFR 300.604, must take one or more of the following enforcement actions for districts designated as “Needs Substantial Intervention”:

- Recover funds.
- Withhold (in whole or in part) any further payments.
- Refer the matter for appropriate enforcement action.

ISBE will either refer the matter for appropriate enforcement action to another ISBE department, place special conditions on the LEA's funding, require the district to redirect funds, or withhold LEA funding, depending upon the LEA's specific areas of concern.

Levels of Tiered Support

Level of Support	Corresponding...		Optional (O) and Required (R) Activities												
	Risk	Determination	Improvement								Response to Noncompliance				
			A	B	C	D	E	F	G	H	W	X	Y	Z	
Tier 1	Low	MR	O	O	O							O	R	R	R
Tier 1	Low	NA	O	O	O							O	R	R	R
Tier 2	Med	NA2	O	R	R	R						R	R	R	R
Tier 3	High	NI	R	R	R			R	R	R		R	R	R	R
Tier 3	High	NI3	R	R	R			R	R	R	O	R	R	R	R
Tier 3	High	NSI	R	R	R			R	R	R	R	R	R	R	R

List of improvement activities:

- A. Self-assessment (Critical Components Tool for Special Education Programs)
- B. Online catalog of supports/resources
- C. District Accountability Team
- D. NA2 required components of the Corrective Action Plan and/or Improvement Plan
- E. ISBE consultant assistance with data review and analysis
- F. On-site and/or virtual individualized monitoring and support
- G. Improvement Plan
- H. Refer the matter for appropriate enforcement action to another ISBE department, special conditions on funding, redirect funding, and/or withhold funding (in whole or in part)

List of compliance activities:

- W. Technical assistance from ISBE SPP contact
- X. Data correction (Prong 1)
- Y. Corrective Action Plan
- Z. Data verification (Prong 2)

Intensive Tier 3 Combined Plan Completion and Submission Procedures

Districts will use the ISBE Special Education Accountability and Support System District Combined Plan Template to report a summary of performance and improvement activities for each indicator. The template is available on the ISBE [System Support Plans](#) webpage. The template addresses:

- a) State Performance Plan indicators with scores of zero or one
- b) Data analyses and root cause determinations
- c) *Critical Components Tool* ratings (district self-assessment)
- d) Corrective Action Plan and Improvement Plan

The DAT will complete its plan and submit it to the ISBE consultant via email. The ISBE special education consultant will review the plan and determine whether it is *Approved*, *Partially Approved*, or *Not Approved*. If the plan is deemed *Partially Approved* or *Not Approved*, the

district must make revisions and resubmit to the ISBE consultant for approval. Districts may view and check their status using the data element codes:

- a) Approved: ISBE has accepted the proposed plan.
- b) Partially Approved: ISBE has partially accepted the proposed plan. The district must correct and resubmit based on the ISBE special education consultant's feedback.
- c) Not Approved: ISBE has rejected the proposed plan. The district should correct and resubmit based on the ISBE special education consultant's feedback.

Upon approval of the plan, the assigned ISBE consultant will notify the district of the approval and of the dates the progress reports are due. The district must submit evidence that the activities have resulted in a changed practice and that the district has achieved compliance with the IDEA. The assigned ISBE consultant will review the submitted documentation and determine whether it is sufficient. If not, the district must submit additional documentation based on the ISBE special education consultant's feedback. In addition, the DAT should evaluate the progress of the plan. If plan implementation is not resulting in the desired changes, the team should consult with the ISBE consultant to make any necessary revisions and resubmit for approval. At the end of the year, the DAT and ISBE special education consultant will review the district's final report to discuss progress on the plan (including correction of findings). An ISBE closing letter will be issued to the district for findings of noncompliance that have been appropriately corrected. Results-based indicators will remain open until the next LEA Determination is issued. If the LEA moves to Needs Assistance or Meets Requirements, the case is formally closed. If the LEA continues to need intensive Tier 3 supports, the process remains open.

To support improvement, the ISBE consultant will establish a schedule for interviews and on-site/virtual visits. Depending on the district's need, there are numerous ISBE tiered supports and resources available to assist LEAs with improvement efforts (e.g., IEP reviews, on-site/virtual visits, guidance and support documents/webinars, district-specific assistance). Progress reports and ISBE support logs for district activities will be maintained by the ISBE consultant within the ISBE Special Education Department.

LEA TIERED SUPPORT MODEL

The Illinois Special Education Accountability and Support System LEA Tiered Support Model consists of three levels, or tiers, of support to bring about improved student outcomes and assist LEAs with any identified noncompliance. Technical assistance and supports are offered within each tier, and all LEAs will have an opportunity to access some level of resources.

- **Tier 1 – Universal:** Addresses common areas and needs
- **Tier 2 – Targeted:** Addresses concentrated areas and needs
- **Tier 3 – Intensive:** Addresses complex areas and needs

TIER 1 – UNIVERSAL (<i>Support Available</i>)	
Description	Illinois districts that Meet Requirements or Need Assistance on their annual LEA Determination.
Activities	Districts with open findings of noncompliance (and corresponding scores of zero on the Illinois Special Education Accountability and Support System Risk Assessment Scoring Rubric) must complete the Corrective Action Plan process for the identified indicator(s).
Supports	Universal supports include information and technical assistance resources that are made available to all districts for their optional use. <ul style="list-style-type: none"> • Self-assessment (Critical Components Tool for Special Education Programs) • Online catalog of supports/resources (e.g., support projects, webinars, FAQ, Q&A, and other guidance documents)
TIER 2 – TARGETED (<i>Guidance Needed</i>)	
Description	Illinois districts that Need Assistance for Two or More Consecutive Years (NA2) on their annual LEA Determination. These districts may benefit from formal action planning to improve outcomes for students with disabilities.
Activities	Districts with open findings of noncompliance (and corresponding scores of zero on the Illinois Special Education Accountability and Support System Risk Assessment Scoring Rubric) must complete the corrective action plan process for the identified indicator(s). Targeted level districts must: <ul style="list-style-type: none"> • Assemble and convene a District Accountability Team. • Review data related to those compliance indicators and results elements for which the LEA received a score of zero. • Access state and/or national technical assistance resources and develop appropriate action steps to address the scores of zero. • Submit the appropriate plan template to the ISBE SPP coordinator regarding the technical assistance sources from which the district received support and the actions the district took as a result.
Supports	Targeted supports include a series of options that are available to LEAs that may assist with implementation of any objective(s) to enhance policies, programs, services, and/or systems. <ul style="list-style-type: none"> • Individual or small group support • Corrective Action Plan technical assistance • Virtual conferencing support • Online state and national technical assistance resources • Self-assessment (Critical Components Tool for Special Education Programs) • Online catalog of supports/resources (e.g., support projects, webinars, FAQ, Q&A, and other guidance documents)

TIER 3 – INTENSIVE (Coaching and Direction Required)

Description	Illinois districts that Need Intervention, Need Intervention for Three or More Consecutive Years (NI3), or Need Substantial Intervention on their annual LEA Determination. These districts require ISBE direction and coaching to improve outcomes for students with disabilities.
Activities	<p>Districts with open findings of noncompliance (and corresponding scores of zero on the Illinois Special Education Accountability and Support System Risk Assessment Scoring Rubric) must complete the corrective action plan process for the identified indicator(s).</p> <p>Intensive level districts must:</p> <ul style="list-style-type: none"> • Assemble and convene a District Accountability Team. • Review data related to those compliance indicators and results elements for which the LEA received a score of zero or one and conduct a root cause analysis to address identified need(s). • Access intensive support resources and develop appropriate action steps. • Submit a combined Corrective Action Plan and Improvement Plan to the assigned ISBE special education consultant (due October 16, 2023) that addresses both compliance-based issues and results-based issues and identifies what actions the district will implement as a result of the finding(s) of noncompliance and low performance scores. • LEAs will be required to work with the Illinois Elevating Special Educators (IESE) Network as part of the technical assistant component requirement under the Needs Intervention process. • Complete two formal progress report reviews and submit them to the assigned ISBE special education consultant to verify district plan implementation. (Due February 28, 2024 and May 31, 2024) • Build sustainability and continued improvement capacity.
Supports	<p>Intensive supports are administered with the intent to provide appropriate resources for LEAs to comply and implement IDEA requirements for students with disabilities.</p> <ul style="list-style-type: none"> • Required for a small number of districts • Sustained district engagement • Individual district coaching required • Small group support, as applicable (e.g., Community of Practice) • Comprehensive on-site/virtual review and support • Assistance with data review and analysis • Corrective Action Plan technical assistance – compliance indicators • Improvement planning support – results indicators • Virtual conferencing support • Online state and national technical assistance resources • Self-assessment (Critical Components Tool for Special Education Programs) • Online catalog of supports/resources (e.g., support projects, webinars, FAQ, Q&A, and other guidance documents)

Section III: LEA Tier 3 Intensive Process

Districts	ISBE Consultants
Districts assemble and convene their District Accountability Team to review their LEA Determination Matrix data and data profile. <i>Must include the assigned ISBE consultant.</i>	ISBE consultants schedule and conduct district on-site or virtual visits (<i>to be completed first quarter</i>) that may include the following activities: interviews, IEP reviews, and other district-specific data collection based on compliance and results indicator areas of concern.
DAT uses its data to complete the Critical Components Tool (<i>with assistance from the ISBE consultant</i>).	ISBE consultants triangulate/analyze data collection results from on-site or virtual visit and consult with the appropriate SPP indicator team contacts, as needed throughout the process.
DAT creates district plan(s) based on its LEA Determination Matrix score. Districts must have an Improvement Plan. A combined plan (<i>Improvement Plan + Corrective Action Plan</i>) is required if there is a finding of noncompliance.	ISBE consultants coach and direct DAT with the development and implementation of district plan(s). Districts must have an Improvement Plan. A combined plan (<i>Improvement Plan + Corrective Action Plan</i>) is required if there is a finding of noncompliance.
Districts correspond with ISBE consultants for follow-up activities, as required.	ISBE consultants verify that the plan addresses relevant indicators and approves the plan.
Districts submit mid-year and end-of-year progress reports that include: <ul style="list-style-type: none"> • Evidence and assurance related to CAP/Improvement Plan execution of activities, and other verification deliverables as directed by ISBE consultants. 	ISBE consultants establish a schedule of required district activities that include: <ul style="list-style-type: none"> • Verification of correction for compliance indicators 4, 9, 10, and 13 (<i>where applicable</i>) • Updated data for verification of correction for compliance indicators 11 and 12 (<i>where applicable</i>) • Mid-year and end-of-year progress reports, and other district-specific activities directed by ISBE consultants (<i>e.g., additional on-site visit(s), IEP file reviews, surveys</i>).
Districts continue to correspond with ISBE consultants for follow-up activities, as directed.	ISBE consultants conduct ongoing coaching and direction to include monitoring of timeline developments, implementation of required activities, and mid-year and end-of-year progress report reviews.
Districts complete two formal progress report reviews with ISBE consultants to close ISBE annual process.	ISBE consultants coordinate with SPP contacts for Verification of Correction to close finding(s) of noncompliance. ISBE consultants continue to work with the district on results indicators until the district's annual LEA Determination changes to Meets Requirements, Needs Assistance, or Needs Assistance for Two or More Consecutive Years.