

Illinois Special Education Accountability and Supports System

# Annual LEA Determinations

## Resource Guide

June 2024

# Illinois Special Education Accountability and Support System

## LEA Determinations

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## Section I: Introduction

Pursuant to 34 CFR §§ 300.603(b) and 303.703(b), states are required to make annual determinations on the performance of each Local Education Agency (LEA) based on indicators identified by the federal government and delineated in the State Performance Plan (SPP). States must include the following components when making annual determinations:

- Performance on compliance indicators (4b, 9, 10, 11, 12, and 13)
- Timely correction of noncompliance
- Single audit findings
- Timely, valid, and reliable data

States are also encouraged to consider results indicators and other data related to compliance when issuing annual LEA Determinations.

Pursuant to Sections 616(a) and 642 of the Individuals with Disabilities Education Act (IDEA), states must use the same four determination categories that the Office of Special Education Programs is required to use:

- Meets Requirements
- Needs Assistance
- Needs Intervention
- Needs Substantial Intervention

### Required Enforcement Actions Under 34 CFR §§ 300.604 and 303.704

#### **Needs Assistance for Two Consecutive Years**

If a state determines that an LEA or Early Intervention Services (EIS) program needs assistance for two consecutive years, the state must take one or more of the following actions:

- 1) Advise the LEA or EIS program of available sources of technical assistance that may help the LEA or EIS program address the areas in which the LEA or EIS program needs assistance and require the LEA or EIS program to work with the appropriate sources of technical assistance (34 CFR §§ 300.604(a)(1) and 303.704(a)(1)).
- 2) Identify the LEA or EIS program as a high-risk grantee and impose specific conditions on the LEA's IDEA Part B grant award or the EIS program's Part C grant award. See 34 CFR §§ 300.604(a)(3) and 303.704(a)(2).

#### **Needs Intervention for Three or More Consecutive Years**

If a state determines that an LEA or EIS program needs intervention for three or more consecutive years, the state may take any of the actions described above for "Needs Assistance." In addition, the state must take one or more of the following enforcement actions:

- 1) Require the LEA or EIS program to prepare a Corrective Action Plan or Improvement Plan to correct the identified area(s). See 34 CFR §§ 300.604(b)(2)(i) and 303.704(b)(2)(i).

2) Withhold, in whole or in part, further payments under Part B to the LEA or under Part C to the EIS program. See 34 CFR §§ 300.604(b)(2)(v) and 303.704(b)(2)(iv).

**Needs Substantial Intervention**

A state's determination that an LEA or EIS program "Needs Substantial Intervention" -- at any time -- must result in the state withholding (after reasonable notice and opportunity for a hearing, consistent with 34 CFR §§ 300.155, 300.221, and 76.401(d)), in whole or in part, any further payments under Part B to the LEA or under Part C to the EIS program. See 34 CFR §§ 300.604(c)(2) and 303.704(c)(2).

**If a state determines that an LEA is not meeting the requirements of Part B, including the targets for compliance indicators in the SPP/Annual Program Report, the state must prohibit the LEA from reducing its maintenance of effort under 34 CFR § 300.203 for any fiscal year (34 CFR § 300.608(a)). A state may take additional enforcement actions that it identifies as appropriate under its determinations policy in all three of these determination categories. See 34 CFR §§ 300.608(b) and 303.708.**

## Section II: LEA Risk Assessment and Determinations

ISBE convened 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. The criteria for the 2023-24 LEA Determinations are defined below. Data from the 2023-24 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:

*“All students will receive a high-quality education with access to appropriate resources and supports to increase their knowledge, skills, and opportunities so they graduate equipped to pursue a successful future.”*

These indicator measures are separated into five groups:

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

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 III of this document.

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 = [(# 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) divided by the (total # 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 has been applicable to Illinois since the 2021-22 school year.)

Percent = [(c) divided by (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 2022-23 school year is used for the 2023-24 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 the U.S. Department of Education (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 =  $[(\# \text{ of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age-appropriate transition assessment; transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals; and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP team meeting during which transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP team meeting with the prior consent of the parent or student who has reached the age of majority}) \div (\# \text{ of youth with an IEP age 16 and above})] \times 100$ . 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 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 2022-23 school year is used for the 2023-24 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 Dec. 1 counts, SIS Sept. 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 Dec. 1 counts, SIS Sept. 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.

## **Data Outcome Indicator Target and Measure**

**Timely, valid, and reliable data** -- The LEA submitted all data on time and did not require corrections to the data reports submitted.

Reports include:

- Child Count: Data is complete, error-free, and verified by March 22, 2024.



- Indicators 11: Data is complete, and delay codes are provided for all evaluations that are past the 60-day timeline as of July 15, 2024.
- Indicator 12: Data is complete, and submitted data indicates the LEA has zero past due incomplete records as of July 15, 2024.
- Indicator 13: Data is complete and submitted on time as of July 15, 2024.
- Personnel: Data is complete, error-free, and completed by due data due June 30, 2024).

**Noncompliance findings due to a coding error will not be counted under the Timely, Valid, and Reliable data component. These will continue to fall under noncompliance for the specific indicators impacted by the data entry error.**

## ILLINOIS SPECIAL EDUCATION ACCOUNTABILITY AND SUPPORT SYSTEM RISK ASSESSMENT SCORING RUBRIC

Indicator Measure	Score = 3	Score = 2	Score = 1	Score = 0
<b>Indicator 6a:</b> 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%).
<b>Indicator 12:</b> 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.
<b>Indicator 1:</b> 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%).
<b>Indicator 13:</b> 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.
<b>Indicator 5a:</b> 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%).
<b>Indicator 4b:</b> 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
<b>Indicator 9:</b> 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.
<b>Indicator 10:</b> 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.
<b>Indicator 11:</b> 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.
<b>Timely Correction of Noncompliance</b>	100% of noncompliance was corrected by the LEA within the one-year timeframe.	-----	-----	The LEA has uncorrected noncompliance beyond the one-year timeframe.
<b>Fiscal Risk</b> (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 that 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 that 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 two consecutive years.
<b>Data</b> (Timely, Valid, and Reliable Data)	The LEA submitted all data components on time and did not require any corrections to the reports.	The LEA submitted one report late or required corrections to one report.	The LEA submitted a total of two reports late or required corrections for two reports.	The LEA submitted three or more reports late or required corrections to three submitted reports.

**ILLINOIS SPECIAL EDUCATION ACCOUNTABILITY AND SUPPORT SYSTEM**  
**Federal Fiscal Year 2023 LEA DETERMINATION MATRIX**

<b>Early Childhood Outcomes</b>	<b>FFY 2023 State Target</b>	<b>FFY 2023 LEA Data</b>	<b>FFY 2022 LEA Data</b>	<b>Score (0-3)</b>
Indicator 6a: Early Childhood Service Delivery Settings	47.00%			
Indicator 12: IDEA Part C to Part B Transition	100.00%			
<b>Secondary Outcomes</b>				
Indicator 1: Graduation	82.60%			
Indicator 13: Secondary Transition	100.00%			
<b>Additional Outcomes</b>				
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			
<b>Fiscal Outcomes</b>				
Fiscal Risk (Single Audits)	No audit findings			
<b>Data</b>				
Timely, Valid, and Reliable Data	All data is completed on time and is error-free		<b>N/A</b>	
<b>TOTAL SCORE</b>				
<b>TOTAL POINTS POSSIBLE</b>				
<b>OVERALL PERCENTAGE</b>				
<b>LEA DETERMINATION</b>				
<b>TIERED LEVEL OF SUPPORT</b>				

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 III: LEA Requirements and Tiered Supports

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 (one year)	Universal (Tier 1) Support Available
LEA Determination Matrix overall percentage of 45% - 75% for two consecutive years	Needs Intervention Two Consecutive Years	Targeted (Tier 2) Guidance Needed
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

### Universal (Tier 1)

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.

- May convene a District Accountability Team (DAT) and complete the Critical Components Tool for Special Education Programs to assist in the corrective action process.
- May use the Critical Components Tool to collaboratively identify, plan, implement, and monitor changes necessary to correct the findings of noncompliance. Ratings generated by the Critical Components Tool can assist the DAT with the development of the CAP, for example.

Once the district completes the CAP and submits it to the ISBE SPP contact, the ISBE SPP contact will review the CAP and verify 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 also must 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.

## Targeted (Tier 2)

“Needs Assistance (NA) 2/Needs Intervention (NI2)” 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 represent 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.

The DAT must 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 and accepted by ISBE.
- Be implemented by the district, and the NA2 requirement be completed for the current LEA Determination cycle.

In addition:

- NA2/NI1/NI2 districts that also have open findings of noncompliance SPP Indicators 4b, 9, 10, 11, 12, and/or 13 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.
- The district DAT should use the Critical Components Tool for Special Education Programs 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.
- The CAP template is 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. ISBE also must verify that the district is correctly implementing the specific regulatory requirements based on a review of updated data. 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 via 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 is verified. This completes the corrective action process for the current LEA Determination cycle.

### **Intensive (Tier 3)**

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 a Corrective Action Plan.



Districts designated as “Needs Intervention for Three or More Consecutive Years (NI3),” or “Needs Substantial Intervention” fall under the intensive tiered level of support (Tier 3). Districts that Need Intervention, Need Intervention for Three or More Consecutive Years, or Need Substantial Intervention require onsite and/or virtual ISBE direction and coaching. Districts are also required to engage and work with the Illinois Elevating Special Educators Network as part of their technical assistance component for the 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 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 onsite 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 represent different departments (e.g., special education, general education, administration, community).

After the DAT’s data analysis, the ISBE special education consultant will initiate an onsite 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 onsite 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 first 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, determine root causes of low performance, and create a Corrective Action 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. ISBE also must verify that the district is correctly implementing the specific regulatory requirements related to the finding of noncompliance (based on a review of updated data). 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, 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."

### **Intensive Tier 3 Combined Plan Completion and Submission Procedures**

Districts will use the ISBE Special Education Accountability and Support System District Corrective Action 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:

- State Performance Plan indicators with scores of zero or 1
- Data analyses and root cause determinations
- Critical Components Tool ratings (district self-assessment)

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:

- Approved: ISBE has accepted the proposed plan.

- Partially Approved: ISBE has partially accepted the proposed plan. The district must correct and resubmit based on the ISBE special education consultant's feedback.
- 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 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.

The ISBE consultant will establish a schedule for interviews and onsite/virtual visits to support improvement. There are numerous ISBE tiered supports and resources available to assist LEAs with improvement efforts to meet their needs (e.g., IEP reviews, onsite/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.

## Tiered Supports Model

The Illinois Special Education Accountability and Support System 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.

<b>TIER 1 – UNIVERSAL (<i>Support Available</i>)</b>	
Description	Illinois districts that Meet Requirements, Need Assistance, or Need Intervention 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 (CAP) process for the identified indicator(s).
Supports	<p>Universal supports include information and technical assistance resources that are made available to all districts for their optional use.</p> <ul style="list-style-type: none"> <li>• Self-assessment (Critical Components Tool for Special Education Programs)</li> <li>• Online catalog of supports/resources (e.g., support projects, webinars, FAQ, Q&amp;A, and other guidance documents)</li> </ul>
<b>TIER 2 – TARGETED (<i>Guidance Needed</i>)</b>	
Description	Illinois districts that Need Assistance for Two or More Consecutive Years (NA2) or Need Intervention for Two or More Consecutive Years (NI2) on their annual LEA Determination. These districts may benefit from formal action planning 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 CAP process for the identified indicator(s).</p> <p>Targeted level districts must:</p> <ul style="list-style-type: none"> <li>• Assemble and convene a district accountability team.</li> <li>• Review data related to those compliance indicators and results elements for which the LEA received a score of zero.</li> <li>• Access state and/or national technical assistance resources and develop appropriate action steps to address the scores of zero.</li> <li>• 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.</li> </ul>
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"> <li>• Individual or small group support</li> <li>• CAP technical assistance</li> <li>• Virtual conferencing support</li> <li>• Online state and national technical assistance resources</li> <li>• Self-assessment (Critical Components Tool for Special Education Programs)</li> <li>• Online catalog of supports/resources (e.g., support projects, webinars, FAQ, Q&amp;A, and other guidance documents)</li> </ul>
<b>TIER 3 – INTENSIVE (<i>Coaching and Direction Required</i>)</b>	
Description	Illinois districts that Need Intervention for Three or More Consecutive Years (NI3) or Need Substantial Intervention (NSI) 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 CAP process for the identified indicator(s).</p> <p>Intensive level districts must:</p> <ul style="list-style-type: none"> <li>• Assemble and convene a district accountability team.</li> <li>• 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).</li> <li>• Access intensive support resources and develop appropriate action steps.</li> <li>• Submit a combined Corrective Action Plan and Improvement Plan to the assigned ISBE special education consultant (<b>due October 16, 2024</b>) 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.</li> <li>• LEAs will be <b>required</b> to work with the <a href="#">Illinois Elevating Special Educators Network</a> as part of the technical assistant component requirement under the Needs Intervention process.</li> <li>• Complete two formal progress report reviews and submit them to the assigned ISBE special education consultant to verify district plan implementation. (<b>Due February 28, 2025, and May 31, 2025.</b>)</li> <li>• Build sustainability and continued improvement capacity.</li> </ul>
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"> <li>• Required for a small number of districts</li> <li>• Sustained district engagement</li> <li>• Individual district coaching required</li> <li>• Small group support, as applicable (e.g., Community of Practice)</li> <li>• Comprehensive onsite/virtual review and support</li> <li>• Assistance with data review and analysis</li> <li>• CAP technical assistance – compliance indicators</li> <li>• Improvement planning support – results indicators</li> <li>• Virtual conferencing support</li> <li>• Online state and national technical assistance resources</li> </ul>

	<ul style="list-style-type: none"><li>• Self-assessment (Critical Components Tool for Special Education Programs)</li><li>• Online catalog of supports/resources (e.g., support projects, webinars, FAQ, Q&amp;A, and other guidance documents)</li><li>• 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) <b>(NSI ONLY)</b></li></ul>
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