Special Education Performance Diagnostic Framework

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Texas Education Agency | SPD

Special Education Performance Diagnostic Framework

The Texas Special Education Performance Diagnostic (SPD) framework provides school districts and open-enrollment charter schools with an organizing structure for understanding the overall health of their special education systems. The framework is organized around levers, essential actions, and key practices that define what a district should do to ensure that students with disabilities are effectively served in schools. Each key practice is further defined via success criteria and sources of evidence that district teams can use to assess the extent to which the key practice is being implemented. The SPD Key Practice Self-Assessment Rating Scale provides additional guidance on ratings.

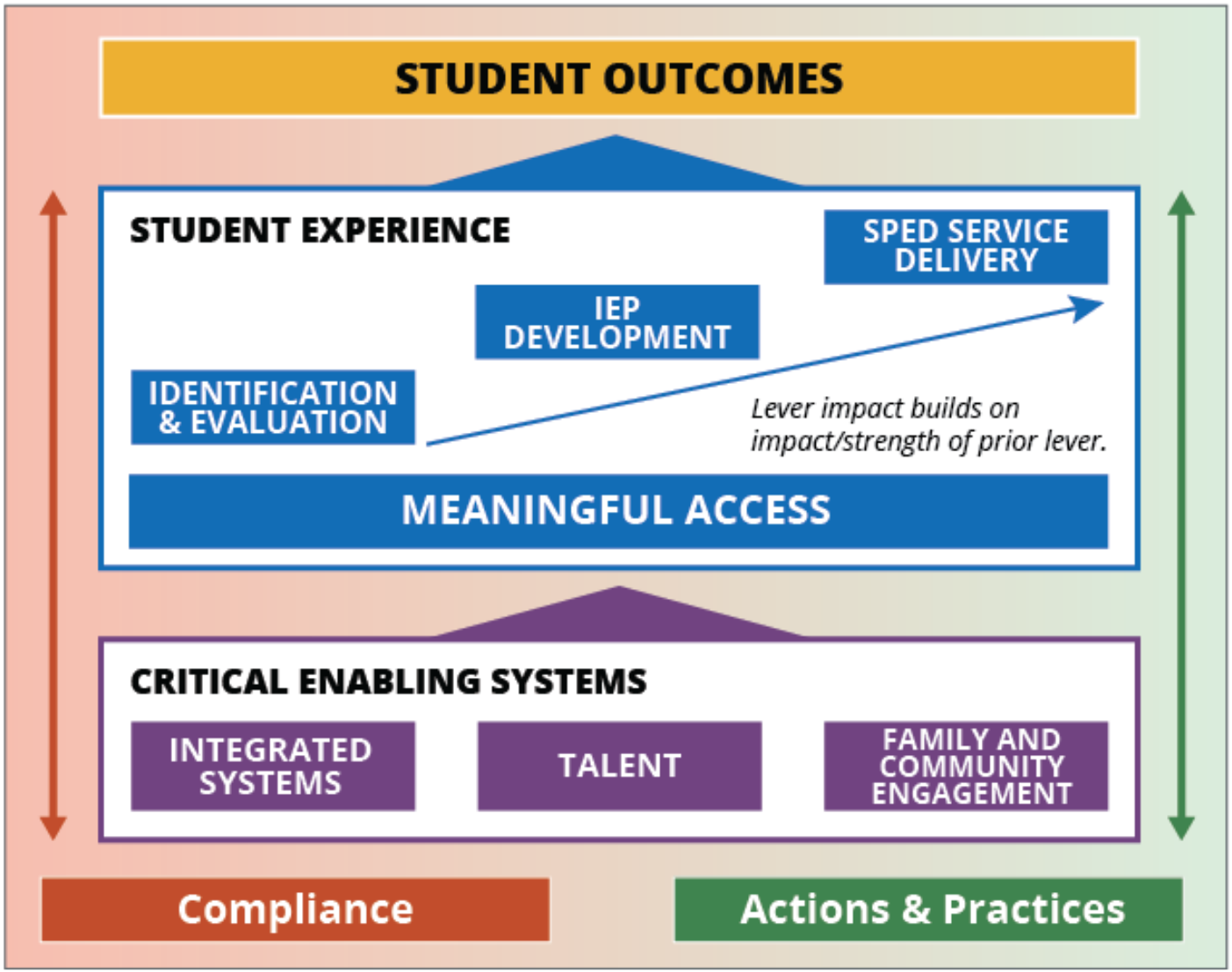
For purposes of this framework, the term:

- “district” includes both school districts and open-enrollment charter schools unless otherwise specified;
- “school board” or “board” includes both a school district board of trustees and the governing body of an open-enrollment charter school;
- “district leadership team” or “leadership team” refers to the group of professionals from key departments who work with the superintendent to identify and solve problems, as well as assist in forming and revising district priorities and goals (this team is sometimes referred to as “the superintendent's cabinet”);
- “administrators” includes campus and district staff that supervise staff and the implementation of programs (e.g., principals, assistant principals, special education directors and coordinators);
- “special educators” includes special education teachers, related service providers, evaluators, and paraprofessionals who support students with disabilities;
- “family” or “families” include non-relatives of a student who serve as caregivers to a student; and
- “students with disabilities” means those students who are receiving special education and related services.

The Levers in the SPD Framework are as follows:

- Lever 1: Integrated Systems (enabling system)
- Lever 2: Talent (enabling system; *in development*)
- Lever 3: Special Education Identification and Evaluation (student experience)
- Lever 4: Individualized Education Program (IEP) Development (student experience)
- Lever 5: Special Education Service Delivery (student experience)
- Lever 6: Meaningful Access (student experience; *in development*)
- Lever 7: Family and Community Engagement (enabling system; *in development*)

As depicted in the impact model below, these levers work together to support student outcomes. Levers 1, 2, and 7 are the critical enabling systems that allow for quality implementation of the student experience levers. Special education delivery requires strong IEP development, which is built upon appropriate identification and comprehensive evaluation. Meaningful access cuts across all aspects of the school experience for students with disabilities.



Framework at a Glance: Essential Actions and Key Practices by Lever

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Lever 5 Special Education Service Delivery (continued)
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5.5 Transition Planning and Services
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5.5.2 Monitoring Transition Plan Implementation
5.5.3 Collaborative Partnerships

Lever 1: Integrated Systems

Integrated systems are the organizational structures, processes, procedures, and performance management structures within the district that work together to ensure positive outcomes for all students, including students with disabilities. Integrated systems are essential for the effective delivery of special education and related services. This lever ensures special education is not an isolated function but seamlessly woven into the overall educational strategies and practices of the district.

Integrated systems at the district level are a foundational pillar for special education health because they embed support for students with disabilities into the fabric of the entire educational system. This strategic alignment promotes consistency, effectiveness, and sustainability in delivering high-quality special education and related services for students with disabilities.

The Essential Actions in Lever 1: Integrated Systems are as follows:

- Essential Action 1.1: District Systems Integration
- Essential Action 1.2: Continuous Improvement

Essential Action 1.1: District Systems Integration

The district ensures ongoing collaboration between the special education department, other departments, district planning or implementation teams, and families to ensure that support for special education is seamlessly integrated into overall district educational strategies and practices.

Key Practices	Success Criteria	Sources of Evidence
1.1.1: Leadership Team The district has a leadership team in place to ensure that the interests of students with disabilities are considered in the board's local policies and the district's procedures and decision-making processes.	☐ The district leadership team includes members who understand the needs of, and services for, students with disabilities to support district-level decision-making ☐ Leadership team meeting procedures and protocols include explicit attention to the interests of students with disabilities when making district decisions, including reviewing relevant data. ☐ The leadership team regularly evaluates the impact of the board's and district's policies and procedures on services and outcomes for students with disabilities. ☐ The leadership team evaluates the effectiveness of implemented actions and adjusts strategies when outcomes for students with disabilities do not improve. ☐ The leadership team identifies and addresses system-level barriers that impede effective implementation of special education policies and procedures, delivery of services, access to high-quality instruction, or progress toward district goals for students with disabilities. ☐ The leadership team provides school board members, administrators, campus staff, and community members with regular updates on the state of special education programs and performance of students with disabilities. ☐ Processes are in place to onboard new leadership team members to current data, goals, and knowledge building related to special education.	☐ The district has an established leadership team cabinet roster that includes leaders who are knowledgeable about special education. ☐ The leadership team meeting calendar with artifacts (e.g., attendance, agendas, meeting notes) shows regular participation and conversations focused on students with disabilities. ☐ Regular (e.g., quarterly) leadership meeting summaries show data review based on implemented actions. ☐ Evidence of adjustments made based on continuous improvement cycle and other tracked data. ☐ Evidence of special education data reports and presentation slides discussed during leadership team meetings. ☐ School board agendas, meeting notes, and presentations demonstrate that attention is shown to programs and outcomes for students with disabilities. ☐ Evidence that relevant presentations, information, and communication were shared with district staff, campus staff, and community members. ☐ Onboarding materials for new district leadership team members show relevant knowledge sharing related to special education.

Key Practices	Success Criteria	Sources of Evidence
1.1.2: Shared Vision, Goals, and Values The board and leadership team have established shared vision, goals, and value statements that prioritize high expectations for all students.	☐ The board and leadership team develop and disseminate vision, goals, and value statements (e.g., guiding principles, core beliefs) anchored in the belief that all students can achieve high expectations with appropriate supports and services.[1] ☐ The vision, goals, and value statements are consistently and clearly communicated across multiple channels (e.g., website, key community-facing communications and presentations, new employee onboarding materials). ☐ The board and leadership team develop specific measurable, time-bound goals (inclusive of special education targets) that support the vision and values. ☐ Stakeholders, including families who have children with disabilities, are/were engaged in developing the vision, values, and goals. ☐ Staff, leaders, and families are familiar with and express support for the vision, goals, and values. ☐ Vision and goals are embedded in district improvement planning templates and referenced in campus plans.	☐ Board meeting minutes or agendas document adoption or annual review of vision and goals. ☐ Annual goal-setting documents show co-signing or co-presentation by the board and superintendent. ☐ Copies of the district's vision, goals, and value statements include inclusive language and specific references to the belief that all students can achieve high expectations. ☐ Lists or artifacts show published and promoted vision, goals, and value statements are widely accessible and publicly available (e.g., district website, new staff onboarding material, on-campus signage, social media, staff email signatures, multiple languages). ☐ Meeting notes, attendance lists, or other artifacts show stakeholder feedback opportunities and participation in creating vision, goal, and value statements. ☐ Survey responses, focus groups, or other artifacts indicate knowledge of and support for the vision, goals, and value statements. ☐ District improvement plan excerpts show embedded vision/goals.

1 This success criterion corresponds to TEC § 11.1511 relating to the board-adopted vision statement and comprehensive goals and TEC § 11.1512 related to superintendent and board collaboration to advocate for high achievement of all students.

Key Practices	Success Criteria	Sources of Evidence
1.1.3: District Commitment The district demonstrates commitment to the vision, goals, and value statements.	☐ The district reinforces commitment to the shared vision, goals, and value statements through leadership training (e.g., board trainings, administrator trainings) that includes content specific to special education and students with disabilities. ☐ District resources are allocated to support inclusive practices and programs designed to improve outcomes for students with disabilities. ☐ Board and leadership team engage in systematic, timely, and comprehensive reviews of relevant reports and student data that illustrate progress toward locally developed student outcome goals, including for students with disabilities. ☐ The board routinely discusses the performance of students with disabilities during public meetings.[2] ☐ The district evaluates the effectiveness of investments, training, and initiatives in improving outcomes for students with disabilities, and when progress is not as expected, adjusts strategies accordingly.	☐ Artifacts from leadership training and development prioritize specific content and strategies for students with disabilities. ☐ Reviews of budget expenditures and resources support the vision, values, and goals for improving outcomes for students with disabilities. ☐ Board meeting agendas, notes, and presentations document discussions of students with disabilities and performance measures. ☐ Annual public report or dashboard shows progress toward SPED goals and documented adjustments. ☐ Artifacts such as dashboards, progress monitoring summaries, or leadership presentations reflect data-based evaluation and adjustment, when needed, of district initiatives related to special education.

[2] TEC § 29.001 requires that at least once each year, the board of trustees of a district and governing board of a charter school must include during a public meeting a discussion of the performance of students receiving special education services at the district or school.

Key Practices	Success Criteria	Sources of Evidence
1.1.4: Collaboration Across District Teams The district ensures that collaborative structures are in place across district teams and departments (e.g., curriculum and instruction, school improvement, human resources, special education, transportation, operations, finance) to ensure appropriate programming and supports for students with disabilities and the personnel providing the services.	☐ The district establishes clear expectations for collaboration across district teams and departments to support students with disabilities as well as the systems and staff that provide the services and supports. ☐ The district provides dedicated time and clear structures for collaboration among all staff members, including among general education staff and those providing direct services for students with disabilities in all settings. ☐ Other district departments or teams include the special education department in initiative planning and decision making that will impact Tier 1 supports or services for all students. ☐ The district provides time within the master schedule and professional learning (PL) calendar for collaborative instructional planning for school personnel.	☐ Meeting artifacts (e.g., agendas, planning protocols, action plans, resources, data reviews) show cross-team collaboration. ☐ Procedures documenting the district guidance on collaboration expectations, structures, and strategies include a focus on students with disabilities. ☐ Documentation of districtwide collaboration protocols includes expectations for cross-team planning, data sharing, and joint problem-solving. ☐ Campus master schedules and PL calendars include intentional opportunities for cross-team collaboration, with detailed expectations for staff participation. ☐ Artifacts from joint data reviews (e.g., combined dashboards, meeting notes) demonstrate collaboration. ☐ Artifacts show shared ownership (e.g., joint action plans, co-authored protocols).

Key Practices	Success Criteria	Sources of Evidence
1.1.5: Professional Learning (PL) Systems The district provides robust PL offerings differentiated for various groups of personnel (e.g., special education teachers, general education teachers, specialized instructional support personnel) to build their capacity to effectively serve students with disabilities.	☐ The district develops a PL plan and/or framework that increases the capacity of all staff to effectively serve students with disabilities. ☐ The district provides PL (e.g., training, coaching) for all staff on meaningful access and best practices, including the roles that all staff can play in supporting students with disabilities. ☐ The district provides opportunities for PL offerings (e.g., training, coaching) differentiated by staff role to help all staff understand how they can support services and success for students with disabilities. ☐ The district uses data (e.g., staff and family surveys, student performance data), established performance goals, and adopted board professional development policy[3] to make decisions about PL offerings. ☐ PL effectiveness is evaluated through pre- and post-training measures such as staff confidence surveys, observed implementation, and/or student outcome data.	☐ District PL plans, calendars, and training artifacts (e.g., sign-in sheets, handouts) demonstrate differentiated PL for supporting students with disabilities. ☐ The district PL attendance data demonstrates high percentages of participation by general and special education staff in promoted PL opportunities for students with disabilities. ☐ Documented district communication and outreach about PL opportunities (e.g., PL catalogs, schedules/calendars, lists of training opportunities, methods of outreach) indicate topics supporting students with disabilities. ☐ Coaching artifacts (e.g., logs, observation or feedback rubrics) indicate a focus on supporting students with disabilities. ☐ PL planning reviews student performance data, staff feedback, and other data. ☐ School board's adopted professional development policy includes consideration of the needs of students with disabilities. ☐ Artifacts demonstrating PL effectiveness measures are collected (e.g., pre-post tests, staff confidence surveys, observation and feedback ratings, student data).

[3] TEC § 21.4515 requires that the board of trustees of a school district and the governing body of an open-enrollment charter school, to the extent applicable, shall annually review the clearinghouse published under Section 21.4514 (Continuing Education and Training Clearinghouse; Advisory Group) and adopt a professional development policy.

Key Practices	Success Criteria	Sources of Evidence
1.1.6: Alignment/ Integration of Various District and Campus Plans The district ensures that the needs of students receiving special education services are thoroughly integrated across district and campus plans, reflecting a coordinated approach across all levels of the educational system.	☐ Special education data (e.g., student performance, accountability and monitoring determinations, corrective actions, complaints) are reviewed, and improvement strategies are incorporated into district and campus improvement plans such as the district improvement plan (DIP), campus improvement plans (CIPs), early childhood literacy and math proficiency plans, and college, career, and military readiness (CCMR) plans. ☐ Plans have been shared with administrators, staff, families, and the community (e.g., website, public presentations, town halls), with attention to the needs of students with disabilities. ☐ District and school administrators can clearly articulate how plans support the needs of all students, including students with disabilities. ☐ All staff understand their roles in implementing these plans, including as they relate to improving special education services. ☐ District and school administrators, in collaboration with stakeholders, regularly assess whether they need to update plans or how they are implemented and communicated.	☐ District and campus plans reflect incorporation of special education data and improvement strategies addressing the needs of students with disabilities. ☐ Artifacts (e.g., needs assessments, data reports or dashboards) from annual reviews of various plans by the board and/or district leadership team demonstrate an analysis of outcomes and goal planning for students with disabilities. ☐ Documentation shows multiple communication methods for various plans (e.g., website, presentations, family meetings). ☐ Administrator and staff responses and feedback (e.g., interviews, surveys, focus groups) demonstrate understanding and agreement with plans. ☐ Artifacts from annual reviews of various plans by the board and/or district leadership team demonstrate an analysis of outcomes and goal planning for students with disabilities.

Essential Action 1.2: Continuous Improvement

The district continually assesses practices to identify challenges, needs, and opportunities for improvement in serving students with disabilities and routinely executes improvements that align with and incorporate into broader performance management systems.

Key Practices	Success Criteria	Sources of Evidence
1.2.1: Improving Academic Outcomes The district collects, analyzes, interprets, shares, and acts on academic performance data for students with disabilities, including students receiving early childhood special education services.	☐ The district acquires or develops data systems that securely gather, disaggregate, analyze, and report data on student academic outcomes (e.g., assessment results, screening data) and services (e.g., intervention participation). ☐ Deidentified student data on academic outcomes, including for students with disabilities, is publicly available to families, community members, and other stakeholders. ☐ The district analyzes the quality of Tier 1 instruction provided to all students, including those with disabilities, and identifies needed improvements. ☐ Academic progress reviews for students with disabilities include an analysis of instructional access (e.g., time in general education, IEP services, access to high-quality instructional materials). ☐ The district provides guidance, data meeting protocols, and supporting professional learning (PL) on using multiple sources of academic data to assess the effectiveness of supports for students with disabilities, how to look at data on students with disabilities disaggregated by groups, and how to consider changes across levels of the system (e.g., campus, grade, classroom, intervention group, IEP services) when needed. ☐ The district makes changes to student supports and services in response to analyzed data when desired outcomes are not being achieved.	☐ Archived academic assessment data (e.g., universal screening, state assessment data, language proficiency for emergent bilingual students) are collected, organized, and accessible, and may be disaggregated (including for students with disabilities) to identify and respond to student needs. ☐ Archived academic assessment data are publicly available (with student information protected). ☐ District reports and data analysis of academic Tier 1 instruction, including disaggregation for students with disabilities, demonstrate alignment with corresponding improvement plans and goals. ☐ District dashboards or reports document analysis of instructional access for students with disabilities. ☐ Established processes and protocols for data meetings and data summaries (e.g., data reports, dashboards, slide decks with data for staff or stakeholder review) demonstrate consideration of academic performance data for students with disabilities. ☐ Documentation of changes to student academic supports and services demonstrates data-driven decision making.

Key Practices	Success Criteria	Sources of Evidence
1.2.2: Improving Behavioral Outcomes The district collects, analyzes, interprets, and acts on behavioral performance data (e.g., attendance, discipline) for students with disabilities, including students who receive early childhood special education services.	☐ The district acquires or develops data systems that securely gather, disaggregate, analyze, and report data on discipline (e.g., referrals, suspensions) and behavior (e.g., attendance, intervention participation). ☐ Disaggregated behavior and discipline data and trends, including comparison data for students with and without disabilities, are regularly reviewed across levels of the system (e.g., district, campus, grade, classroom) to identify needs and inform responsive efforts. ☐ The district provides guidance, data meeting protocols, and supporting PL on using multiple sources of data to assess the effectiveness of behavioral supports for students with disabilities, how to look at data on students with disabilities disaggregated by groups, and how to consider changes across levels of the system (e.g., district, campus, grade, classroom, intervention group, IEP services) when needed. ☐ The district makes changes to student behavioral supports and services in response to analyzed data when desired outcomes are not being achieved. ☐ The district analyzes discipline and behavior data at the campus and teacher level to identify disproportional patterns and provide them with additional support (e.g., resources, training, coaching).	☐ Archived discipline and behavior data (e.g., universal screening, discipline referrals, attendance) are collected, organized, and accessible, and may be disaggregated (including for students with disabilities) to identify and respond to student needs. ☐ Established processes and protocols for data meetings and summaries (e.g., data reports, dashboards, slide decks with data) show consideration of behavioral performance for all students and are disaggregated for students with disabilities. ☐ PL materials and attendance records demonstrate that staff receive training and guidance related to using behavioral performance data. ☐ Documentation of changes to student behavioral supports and services demonstrates data-driven decision making. ☐ Targeted professional learning/coaching provided to campuses and teachers with disproportionate discipline patterns is documented (e.g., prevention and intervention training logs, coaching notes).

Key Practices	Success Criteria	Sources of Evidence
1.2.3: Improving Graduation and Dropout Rates The district collects, analyzes, interprets, and acts on graduation data and dropout rates for students with disabilities.	☐ The district acquires or develops data systems that securely gather, disaggregate, analyze, and report student graduation and dropout data, including monitoring drop out risk. ☐ Disaggregated graduation and dropout data, including comparisons of students with and without disabilities, and trends are regularly reviewed across levels of the system (e.g., district, campus, grade, classroom) to identify needs and inform responsive efforts. ☐ The district collects, monitors, and reports data on student participation in any services intended to support graduation (e.g., drop out and recovery programs, mentoring) for students with and without disabilities. ☐ The district regularly reviews the participation rates of students with disabilities in universal district graduation supports (e.g., personal graduation plan), including dropout prevention (e.g., after-school opportunities), to ensure they are available to students with disabilities. ☐ The district engages in a problem-solving process when graduation rates for students with disabilities are lower, or dropout rates are higher, than for students without disabilities; identifies system-level barriers contributing to these gaps; and implements plans for improvement.	☐ Archived graduation and dropout data are collected, organized, and accessible, and may be disaggregated (including for students with disabilities) to identify and respond to student needs. ☐ Archived graduation and dropout data are publicly available (with student information protected). ☐ Progress monitoring of data to track graduation rates or designation of risk for dropping out is established. ☐ Established processes for data summaries (e.g., data reports, dashboards, slide decks with data) show consideration of graduation and dropout data for students with disabilities. ☐ Data reports disaggregate graduation patterns for students with disabilities (e.g., 4-year vs. 5/6-year graduates). ☐ Data dashboards or reports document student participation in graduation supports and recovery programs. ☐ Dropout prevention[4] data are evident in district or campus improvement plans (if applicable). ☐ Problem solving meeting notes or reports identify factors contributing to lower graduation rates or higher dropout rates for students with disabilities. ☐ Targeted interventions or program adjustments implemented in response to root-cause findings are documented.

[4] TEC § 11.255 requires analysis of information related to dropout prevention.

Key Practices	Success Criteria	Sources of Evidence
1.2.4: Postschool Outcomes The district collects, analyzes, interprets, and acts on postschool readiness (e.g., CCMR data) and outcome data for students with disabilities, including postsecondary education, employment, and independent living.	☐ The district acquires or develops data systems that securely gather, disaggregate, analyze, and report data on student readiness for continuing education, career, and military, and postschool outcomes. ☐ The district analyzes postschool outcomes (e.g., education, employment, independent living) for students who were eligible to return for transition services, disaggregated by those who returned vs. those who did not, and uses these data to identify gaps and implement improvements. ☐ The district provides guidance and supporting professional learning for collecting and analyzing data on student participation in readiness supports, including implementation of IEP transition services. ☐ CCMR Outcomes Bonus funds generated due to special education classifications are reinvested into programs that support more students with disabilities meeting those criteria.	☐ Postschool outcome data, including RDA, SPP, and CCMR data, are easily accessed and disaggregated. ☐ Data synthesis (e.g., data reports, dashboards, slide decks with data) show consideration of postschool outcome data for students with disabilities. ☐ Program changes made in response to postschool outcome data are documented. ☐ Data-driven changes to readiness services and postschool outcome data collection are documented, such as reducing the collection of unused data and adding data sources when needed. ☐ Professional learning materials and attendance records show that staff receive support in implementing guidance related to using postschool outcome data, including IEP transition services. ☐ Data on utilization of CCMR Outcomes Bonus funds show reinvestment and are publicly available.

Lever 3: Special Education Identification and Evaluation

This lever defines the processes and procedures by which students are identified and evaluated for special education and related services. The Individuals with Disabilities Education Act (IDEA) mandates federal support for states to offer free appropriate public education (FAPE) to eligible students with disabilities. Child Find, a key component of IDEA since 1975, requires the identification, evaluation, and provision of services for all students with disabilities within a state. To improve special education identification and evaluation processes, regular reviews of student data through response to intervention (RtI) or multi-tiered system of supports (MTSS) processes, clear procedures for referral, and proper documentation are recommended strategies. Implementing best practices around initial evaluation, reevaluation, Child Find, and MTSS can help districts meet their obligations more effectively, ensuring that no student's educational needs are overlooked.

The Essential Actions in Lever 3: Special Education Identification and Evaluation are as follows:

- Essential Action 3.1: Multi-Tiered System of Supports (MTSS)
- Essential Action 3.2: Child Find
- Essential Action 3.3: Initial Evaluation
- Essential Action 3.4: Reevaluation

Essential Action 3.1: Multi-Tiered System of Supports (MTSS)

The district implements a coherent MTSS for academic and nonacademic prevention and intervention that ensures timely referrals for special education evaluations when warranted.

Key Practices	Success Criteria	Sources of Evidence
3.1.1: Strong Universal Supports The district ensures that high-quality instructional materials (HQIM) and academic and nonacademic evidence-based strategies (e.g., explicit instruction, Universal Design for Learning (UDL), schoolwide behavior expectations and routines) are provided to all students as part of Tier 1 instruction.	☐ The district adopts and implements HQIM and uses research-based instructional strategies (RBIS) at each campus across academic areas and settings. ☐ The district adopts and implements evidence and research-based strategies, programs, and supports for behavior, mental health/wellness, and prevention at each campus. ☐ The district has developed and implemented a comprehensive assessment system (i.e., screening, progress monitoring) to drive data-based decision making.	☐ Evidence of training and coaching on adopted instructional materials, strategies, and programs is provided to reflect completion by both general and special education teachers. ☐ Published district policies, procedures, instructional frameworks or guidelines related to effective instruction (e.g., explicit instruction, UDL, RBIS) are evident. ☐ Documentation of district-wide nonacademic programs/strategies implementation (e.g., program descriptions, data collection and monitoring for behavior and mental health trends) is evident. ☐ Forms, checklists, classroom observation tools, or special educator evaluation tools are used to consider the implementation of effective instructional strategies, inclusive of strategies for students with disabilities. ☐ A documented process to inform intervention decisions includes analyzing data from universal screening assessments.

Key Practices	Success Criteria	Sources of Evidence
3.1.2: Interventions and Supports The district ensures a clear system of evidence-based supports and interventions is provided at Tiers 2 and 3, with appropriate intensity, for all students who fail to make adequate progress within Tier 1.	☐ The district has established systems and expectations to ensure proper notification[5] and communication with families at the start of, and throughout, the intervention process. ☐ The district has a clear system of academic and nonacademic supports, resources, and materials available for classwide, Tier 2, and Tier 3 interventions that are documented in an MTSS manual or plan and clearly communicated to staff and families. ☐ The district ensures that progress monitoring is conducted consistently to identify the possible need for evaluation for a disability, intensification of supports, or removal from or reduction of interventions. ☐ The district provides access to the MTSS tiers for all students, including those eligible for special education services. ☐ The district supports the creation of campus-level MTSS teams (i.e., problem solving team, student support team) comprising individuals with expertise in diverse areas who routinely collaborate to review data (e.g., universal screening, progress monitoring, climate surveys) and make informed decisions about needed supports or interventions at the school, classroom, and individual student levels.	☐ Documented processes and compliance with parent notification requirements are evident. ☐ Evidence of notification letters and progress updates in the appropriate language for families. ☐ Published MTSS manual or plan is available and includes how MTSS supports those eligible for special education services, as well as the resources, materials, supports, and services available to use for intervention. ☐ Documented system and process for progress monitoring data for all areas of intervention support (e.g., academic, behavior, mental health/wellness) is evident. ☐ Artifacts of MTSS team meeting agendas, notes, and support plans identify district-supported interventions.

[5] Texas Education Code (TEC), Section 26.0081 requires local educational agencies (LEAs) to provide parents of children not receiving special education with notice whenever their child begins to receive intervention strategies.

Key Practices	Success Criteria	Sources of Evidence
3.1.3: Data-Based Decision Making The district establishes procedures for using data (e.g., universal screening data, state assessment, progress monitoring data) to identify the tier of support needed for students and for moving students between tiers.	☐ The district has a manual or plan documenting procedures for the identification, implementation, and removal from or reduction of interventions and supports at Tiers 2 and 3, including guidelines for understanding when it is necessary to refer students for special education evaluation (while continuing intervention). ☐ The district provides guidance and training for the administration, scoring, and interpretation of data from appropriate, validated assessments used to make decisions about moving students between tiers. ☐ The district provides specific guidance on data-based considerations for students who are emergent bilingual (EB), ensuring that language differences are distinguished from academic deficits. This includes conducting universal screenings in the appropriate language and comparing progress against a similar peer group.	☐ MTSS identification and participation procedures are part of MTSS manuals and plans. ☐ Trainings on data-based decision-making artifacts (e.g., presentation handouts, sign-in sheets) show objectives of training and interpretation of assessment data. ☐ Data meetings include protocols for reviewing and analyzing student data, including EB students' data. ☐ Data reports are available and reviewed with stakeholders (e.g., staff, school board, families). ☐ District-identified data sources such as screeners, curriculum-based assessments, and progress monitoring tools are considered in decision-making.
3.1.4: Professional Learning (PL) The district provides PL to all educators delivering Tier 1 instruction, interventions, and supports to ensure fidelity of implementation for all MTSS-related programming and strategies.	☐ The district ensures that all educators, including special educators, have access to materials and are included in training on academic and nonacademic universal strategies and Tier 1 instructional materials adopted by the district. ☐ The district ensures that all educators implementing interventions and supports participate in training and receive implementation support as needed. ☐ The district provides differentiated PL and implementation supports to educators based on data identifying staff needs.	☐ Curriculum material orders show special education classrooms and teachers have access to Tier 1 instructional materials. ☐ Trainings on universal academic and nonacademic strategies and curriculum materials artifacts (e.g., presentation handouts, sign-in sheets) show objectives of ensuring fidelity of implementation. ☐ Intervention training artifacts (e.g., presentations, sign-in sheets, certificate of completion) document that educators receive training in adopted interventions. ☐ Coaching schedules or logs demonstrating implementation support are provided. ☐ Completed coaching protocols, observation notes, provided models, and consultation documentation.

Essential Action 3.2: Child Find

The district implements policies, procedures, and public awareness activities to facilitate a comprehensive Child Find effort to locate, identify, and evaluate all children residing in their jurisdiction who have or are suspected of having a disability and, as a result, require special education and related services.

Key Practices	Success Criteria	Sources of Evidence
3.2.1: Comprehensive and Compliant Child Find Procedures The district develops affirmative, ongoing, and comprehensive Child Find procedures.	☐ The district adheres to all federal and state rules and regulations when a disability is suspected. ☐ The district communicates and provides information on Child Find requirements and procedures to all stakeholders, including families (in their primary language) and personnel in private schools, including homeschools, as well as residential facilities, hospitals, and jails. ☐ Child Find requirements and procedures are included within MTSS manuals and materials, including intervention notifications that go to families. ☐ All educators and key staff who serve as primary contacts for families, such as front office staff, participate in training on Child Find requirements and procedures at least annually.	☐ The district has up-to-date operating procedures for Child Find. ☐ District Child Find information is transparent, easily accessible, and publicly posted. ☐ Processes and forms for documenting and addressing student needs prior to special education referral are consistent with Child Find procedures. ☐ Child Find information materials (e.g., leaflets, forms, checklists) for school staff to share with families are available in multiple languages. ☐ Training artifacts (e.g., presentation handouts, sign-in sheets) indicate objectives of Child Find processes and procedures. ☐ Evidence that the district has reached out to private schools and various facilities is recorded. ☐ Student handbooks include an explanation of the options and requirements for providing assistance to students who have learning difficulties or who may need special education, including that a parent may request an evaluation at any time.[6]

[6] TEC §26.0081 requires TEA to provide school districts with a written statement of the options and requirements for providing assistance to students who have learning difficulties or who need, or may need, special education services. Parents must receive the statement in a written format every year in the handbook or through another means.

Key Practices	Success Criteria	Sources of Evidence
3.2.2: Child Find Activities The district implements proactive, transparent, and publicly accessible Child Find activities to ensure that families, caseworkers, and other community partners are aware of the district's referral and identification procedures and supports that are available for students who may have a disability.	☐ The district conducts a variety of Child Find activities in the community, such as private schools, including homeschools, daycares, residential facilities (minimum 2x per year[7]), hospitals, clinics, and jails. ☐ The district communicates their Child Find referral and identification procedures to the public (e.g., families, caseworkers, other community partners) using multiple formats (e.g., public meeting, press release, newsletter, website, classroom communications) and in multiple languages. ☐ The district engages with community-based partners to conduct Child Find activities.	☐ The district's Child Find procedures are publicly available. ☐ Public notices regarding Child Find are posted in private schools, residential facilities, hospitals, jails, and any other necessary locations, in multiple languages. ☐ Written procedures for how families request a Full and Individual Initial Evaluation (FIIE) are available in multiple languages. ☐ Artifacts such as meeting calendars, notes, and electronic communications demonstrate the presence of community partnerships to share Child Find information.

[7] Texas Administrative Code (TAC) §89.1001(c) states that the district shall, at minimum, contact the residential facility at least twice per year to conduct Child Find activities and to offer services to eligible students with disabilities.

Key Practices	Success Criteria	Sources of Evidence
3.2.3: Referral Systems The district has a clear referral system and process to support the Child Find process.	☐ The district has written procedures for receiving referrals for an initial evaluation, including from families, and staff have been trained in these procedures. ☐ The district's referral system and process are connected to the overall MTSS framework, and the district ensures intervention is never used to delay or deny an evaluation when a disability and need for special education are suspected. ☐ The district provides procedures and expectations related to the analysis of data to determine whether they will agree or refuse to evaluate. ☐ The district has processes and procedures to track the progress of campus referrals to ensure a timely response (15 school days recommended). ☐ The district has processes and procedures to track the progress of parent referrals to ensure a timely response (written request = 15 school days required[8]).	☐ District operating procedures identify clear campus and staff responsibilities. ☐ Forms or checklists used in the referral and identification process are available in multiple languages. ☐ Documents clearly indicate who staff or families can contact at the campus or district level regarding special education referrals. ☐ MTSS plans, manuals, and forms provide information and guidance about suspicion of disability and referral process. ☐ District procedures or guidance details expectations for analyzing data and responding to referral requests. ☐ Data are available from regular universal screening, targeted and intensive progress monitoring, and these data are used to inform intervention, as well as potential need for referral. ☐ Guidance or training documentation is provided to campus intervention teams that clearly describe Child Find requirements, including that interventions are not used to delay or deny a referral when a disability and need for special education are suspected. ☐ District data system tracks compliance with referral timelines.

[8] TAC § 89.1011(b) requires that if a parent submits a written request to a school district's director of special education services or to a district administrative employee, such as a campus principal, for an FIIE of a student, the school district must respond to the request not later than the 15th school day after the date the district receives the request.

Key Practices	Success Criteria	Sources of Evidence
3.2.4 Child Find IDEA Part C Early Childhood Intervention (ECI) Coordination The district and ECI agencies have a coordinated Child Find system for children from birth through age 2, including for students who may be deaf or hard of hearing, deaf-blind, or have a visual impairment.	☐ The district and ECI have clear policies and procedures, aligned to the state's early transition Memorandum of Understanding (MOU), in effect to identify, locate, and evaluate children ages 0 to 2 who need early intervention. ☐ The district refers all children ages 0 to 2 discovered through Child Find to ECI within seven days. ☐ The district coordinates with ECI to conduct evaluations for students suspected of being deaf or hard of hearing, deaf-blind, or with a visual impairment. ☐ The district coordinates with ECI to provide services for students who are deaf or hard of hearing, deaf-blind, or who have a visual impairment, including providing Teachers for the Visually Impaired, Certified Orientation and Mobility Specialists, and Teachers for the Deaf and Hard of Hearing.	☐ Guidance documents and procedures outline the coordination procedures between the district and ECI. ☐ Documents clearly indicate roles and responsibilities of district and ECI personnel for coordination of evaluations and meetings. ☐ Logs and records show referrals to ECI from the district. ☐ Logs and records reflect district staff participation in applicable evaluations and Individualized Family Services Plan (IFSP) meetings. ☐ Documentation shows regular communication and interaction between ECI and district staff.

Key Practices	Success Criteria	Sources of Evidence
3.2.5: Early Childhood Transition The district has established policies and procedures for students transitioning from Part C Early Childhood Intervention (ECI) to Part B Early Childhood Special Education (ECSE) prior to the student's third birthday.	☐ The district and ECI have clear policies and procedures, aligned to the state's early transition MOU. ☐ The district establishes and provides clear information and guidance to families about what to expect during the transition process from ECI to ECSE, including timelines, required documentation, and available supports. ☐ The district ensures that transition conferences are completed at least 90 days before the child's third birthday and are attended by district staff. ☐ The district has processes, procedures, and monitoring in place to ensure that any necessary evaluations are complete to ensure an individualized education program (IEP) is developed and implemented by the child's third birthday for eligible children. ☐ The district establishes procedures to respond to ECI transition needs and ECSE referrals during periods in which the district is closed or during the summer. ☐ The district has processes and procedures to ensure the Child Outcomes Summary (COS) process is documented and completed by a team familiar with the child (including parents) using multiple sources of information upon entry and exit from ECSE. ☐ The district ensures that the transition and employment designee (TED) receives appropriate training and information necessary to support building transition connections in early childhood.	☐ Policies, procedures, interagency agreements, local Memorandum of Understanding (MOU), and service contracts that demonstrate coordination with ECI. ☐ Brochures, pamphlets, and information regarding early childhood transition services are available in multiple languages and shared with parents. ☐ Forms and checklists used to track referrals from early childhood intervention providers. ☐ Attendance logs and other documentation demonstrating participation in transition conferences, including evidence that meetings were held at least 90 days prior to the child's third birthday. ☐ Processes, procedures, and training artifacts on ECI to ECSE transition process include content covering family communication, requirements, and the COS process. ☐ District tracking and monitoring systems demonstrate completion of evaluations and IEP meetings within timelines. ☐ Artifacts such as job descriptions, responsibilities, training, and supports provided to the transition and employment designee (TED) regarding early childhood transition.

Essential Action 3.3: Initial Evaluation

The district implements policies and procedures to ensure a comprehensive and high-quality full and individual initial evaluation (FIIE), addressing all state and federal requirements, is conducted prior to determining whether a student has a disability that requires special education and related services.

Key Practices	Success Criteria	Sources of Evidence
3.3.1: Commitment to High-Quality, Compliant Evaluations The district is committed to implementing well designed policies, procedures, and practices that not only comply with federal and state requirements, but also promote quality, timely, student-centered evaluations.	☐ The district has internal systems and processes in place (e.g., regular professional learning, mentors, legal training) to support both the district's compliance with state and federal evaluation requirements and current best practices. ☐ The district uses real-time progress tracking and provides necessary support (e.g., adequate staffing, resource allocation, systems to request assistance) to ensure evaluations are completed within timelines. ☐ The district has written procedures and processes to onboard new evaluators (including contractors) to the district's evaluation expectations, such as how to collaborate with other members of the multidisciplinary evaluation team to produce a compliant, comprehensive, and understandable evaluation report.	☐ Policies and operating procedures related to evaluation are publicly available. ☐ Professional learning, training plans and other artifacts demonstrate that systems are in place to support compliance and best practices in evaluation. ☐ Evaluation timeline tracking processes and data demonstrate 100% compliance with timelines. ☐ Onboarding procedures and training plans for new and contract evaluators are available, along with evidence of their implementation.

Key Practices	Success Criteria	Sources of Evidence
3.3.1: Commitment to High-Quality, Compliant Evaluations (continued)	☐ The district has procedures to ensure Prior Written Notices (PWNs) include all required elements (including an explanation of why the district proposes to take the required action and a description of all evaluation procedures and data), are provided in the family's primary language, and are written in plain language for families to understand (i.e., minimized jargon or acronyms). ☐ The district maintains up-to-date Independent Educational Evaluation (IEE) procedures and information (e.g., IEE criteria, lists of evaluators, process for contracting IEE providers) to support a timely response to parent requests for an IEE. ☐ The district has systems and processes to ensure and document that parents are provided with Procedural Safeguards, Overview of Special Education form, and Parent's Guide to the ARD process in their primary language.	☐ Progress monitoring systems are in place for conducting file reviews to ensure the inclusion of all required elements of notices. ☐ IEE policies are in place and responses to parents are documented. ☐ Special Education Artifacts Review Tool or other relevant file review data demonstrates quality implementation of federal requirements. ☐ Signed procedural safeguard notices and overview of special education forms are documented and maintained.

Key Practices	Success Criteria	Sources of Evidence
3.3.2: Comprehensive Full Individual and Initial Evaluation (FIIE) The district establishes policies and procedures to ensure that students receive a comprehensive FIIE that addresses all areas of academic, behavioral, functional, and/or developmental concern.	☐ The district convenes a multidisciplinary evaluation team that includes all the required members reflecting areas of suspected disability and student need (e.g., Language Proficiency Assessment Committee (LPAC) or person knowledgeable in dyslexia). ☐ The district sets expectations, provides training and guidance specific to collaboration between members of the multidisciplinary evaluation team, including using evaluation planning meetings, timely communication between members (particularly when additional areas of suspected disability are identified), discussing inconsistent data, and drafting conclusions and recommendations. ☐ The district allocates resources (training and materials) to ensure that members of the multidisciplinary evaluation team can interpret and use existing evaluation data when available and select and administer the most appropriate assessments that are most likely to yield accurate information on what the student knows and can do academically, developmentally, and functionally based on the student and referral questions.	☐ Documentation of multidisciplinary evaluation team participation and collaboration such as planning agendas, sign-in sheets, and FIIE signature pages. ☐ Evaluator staff surveys show satisfaction with communication processes from other multidisciplinary evaluation team members. ☐ Assessment inventories reveal that current, appropriate, validated evaluation tools and assessment are available that address the needs of a variety of learners (including language and communication considerations).

Key Practices	Success Criteria	Sources of Evidence
3.3.2: Comprehensive FIIE (continued)	☐ The district has systems and processes to track the timely completion of the evaluation and the submission of the written report of the FIIE to the parent as soon as it is completed, but no less than five school days before the initial admission, review, and dismissal (ARD) meeting.[9] ☐ The district establishes training and guidance for producing a comprehensive and understandable evaluation report that uses multiple sources of data and complies with all state and federal requirements, including any disability specific requirements, and clearly explains: ○ how the disability condition meets the criteria or does (and the identification criteria used); ○ the individualized impact of the disability condition on the student's access to and progress in the general curriculum; ○ the student's strengths and needs, including baseline levels of performance and challenges faced in the general curriculum; and ○ recommendations for evidence-based interventions, accommodations and progress monitoring.	☐ Personnel are qualified to interpret existing evaluation data and administer assessments, as shown by holding proper credentials and completion of applicable updated professional learning. ☐ Data tracking and file reviews document timely submission of written reports to families. ☐ Regular, systematic reviews of FIIEs, using the Special Education Artifacts Review Tool or other relevant FIIE review rubric, and finds that content is consistently high-quality and compliant.

[9] TEC §89.1011(h) states "a copy of the written FIIE report must be provided to the parent as soon as possible after completion of the report but no later than five school days prior to the initial ARD committee meeting, which will determine a student's initial eligibility under subsection (g) of this section, or not later than June 30 if subsection (e)(1) of this section applies."

Key Practices	Success Criteria	Sources of Evidence
3.3.3: Multiple Data Sources The district establishes guidance to ensure that multiple data sources are considered part of the evaluation process.	☐ The district has clear written procedures and regular professional learning opportunities to ensure a multidisciplinary evaluation team is collecting and considering multiple sources of data, such as a review of existing data (REED), classroom- and teacher-based information, norm-referenced and criterion referenced measures, observations and interviews, including data or outside evaluations presented by the family, and language proficiency data (when the student is emergent bilingual (EB)). ☐ The multidisciplinary evaluation team actively solicits and incorporates input from families as a key component of the evaluation process. This includes seeking and documenting family observations, concerns, and insights regarding their child's development, behavior, and learning needs. ☐ The district clearly communicates the procedures and expectations for collecting input and data from multiple sources to families and school staff.	☐ Written district procedures and training artifacts (e.g., presentations, workshops, case reviews, agendas) show district expectations and procedures for using multiple sources of data. ☐ Systematic reviews of evaluation reports, using quality rubrics or checklists demonstrate consistent implementation of district expectations including: o Multiple sources of data are collected, reported, and used in drawing conclusions. o Documentation within evaluation reports demonstrate efforts to include family input in the evaluation process and includes forms or tools used to solicit family observations and concerns. o Observations conducted during the evaluation are documented within the evaluation reports. o Disability conditions are never based on a single measure. ☐ Family and staff feedback (e.g., surveys) regarding their experience with providing input during the evaluation process.

Key Practices	Success Criteria	Sources of Evidence
3.3.4: Disproportionality in Identification The district regularly monitors referral data to ensure that identification for special education services, including identification for specific disability categories, does not differ substantially among racial and ethnic groups and implements targeted strategies to address any identified instances of disproportionality.	☐ The district has developed procedures for conducting linguistically diverse evaluations and have identified staff and/or procedures for providing evaluations in a student's primary language. ☐ The district provides regular professional learning (e.g., case studies, training, article reviews on linguistically diverse evaluation practices) to evaluation teams. ☐ The district regularly reviews and discusses campus referral data disaggregated by race and ethnicity to identify and address any areas within the MTSS process that may need revision. ☐ The district has processes and procedures to facilitate participation of bilingual evaluators and LPAC representatives on the multidisciplinary evaluation team when considering English language acquisition and evaluating emergent bilingual (EB) students.	☐ Policies and procedures for evaluation include guidelines on disproportionate identification. ☐ Artifacts of professional learning on linguistically diverse evaluation practices are available. ☐ Documentation exists of a district annual review of data disaggregated by racial and ethnic groups to ensure that district practices are not resulting in under identification or overidentification, including an analysis of the district's Results Driven Accountability (RDA) data and/or that year's significant disproportionality status. ☐ Documentation exists of any changes or updated guidance or training to MTSS processes and procedures following data reviews. ☐ Bilingual evaluators and LPAC representatives are members of a multidisciplinary evaluation team for EB students.

Essential Action 3.4: Reevaluation

The district implements reevaluation policies and procedures aligned to state and federal requirements to ensure continued eligibility for special education and related services and to support appropriate IEP development.

Key Practices	Success Criteria	Sources of Evidence
3.4.1: Commitment to High-Quality, Compliant Reevaluations The district is committed to implementing well designed policies, procedures, and practices that not only comply with federal and state requirements, but also promote quality, timely, student-centered reevaluations.	☐ The district has processes and procedures in place to ensure compliance with all federal and state rules and regulations for reevaluations including, but not limited to: ○ ensuring that all students eligible for special education have a reevaluation every three years, at a minimum, unless the families and the district agree that a reevaluation is unnecessary (in which case the date of the review of existing evaluation data (REED) establishes the new 3-year reevaluation date); ○ ARD committee members review and consider existing evaluation data (e.g., FIIEs, present levels, goal progress) prior to determining the need for additional assessments as part of the reevaluation; ○ ensuring that no student who is eligible for special education services is reevaluated more than once per year unless the family and the district agree otherwise; ○ providing prior written notice and obtaining informed consent for reevaluation, including procedures to use when parents fail to respond to requests for consent; and ○ notifying parents of their right to request additional assessment when not recommended following a REED.	☐ Required district operating procedures are up to date and posted. ☐ Policies, operating procedures, and guidance related to reevaluation are aligned with federal and state requirements and best practice recommendations. ☐ Timeline reports and data demonstrate compliance with 3-year reevaluation timelines. ☐ Personnel qualified to administer assessments, including personnel who are bilingual, are identified. ☐ Folder reviews of reevaluation reports (including REED process documents) demonstrate consistent quality and compliance. ☐ Documentation provides a record of attempts to obtain parent consent for reevaluation.

Key Practices	Success Criteria	Sources of Evidence
3.4.1: Commitment to High-Quality, Compliant Reevaluations (continued)	☐ The district has internal systems and processes in place (e.g., regular professional learning, mentors, legal training, case reviews) to support both the district's compliance with state and federal evaluation requirements and current best practices. ☐ The district maintains a real-time tracking system and provides necessary support to ensure all reevaluations, including any assessments requested outside of the 3-year cycle, have a timely completion based on the 3-year reevaluation date or date established by ARD committee when other than the 3-year reevaluation.	
3.4.2: Review of Existing Evaluation Data (REED) The district establishes guidance to ensure that existing evaluation data, including progress on previous goals and any externally conducted evaluations, are considered before determining whether to administer additional assessments as part of the reevaluation.	☐ The district establishes processes and procedures to ensure that ARD committee members, including the parent or adult student, participate in the Review of Existing Evaluation Data (REED) process as part of the reevaluation, even when conducted outside of an ARD committee meeting. ☐ The district provides procedures and training for REED processes that allow for data-based decision making regarding the need for additional assessments and data to inform IEP development or continued eligibility.	☐ Policies, operating procedures, and guidance related to reevaluation are aligned with federal and state requirements and best practice recommendations. ☐ Training and guidance artifacts (e.g., presentations, case studies, sign-in sheets) documenting review of existing evaluation data.

Key Practices	Success Criteria	Sources of Evidence
3.4.2: Review of Existing Evaluation Data (REED) (continued)	☐ The district sets expectations and establishes monitoring systems to ensure the REED process is conducted prior to the due date of the three-year reevaluation with enough time for any requested evaluation to be completed and report written by the reevaluation due date. ☐ REEDs establishing the new 3-year reevaluation date contain information from a variety of sources, update student functioning, and contain information to determine educational need (i.e., the REED is comprehensive enough to stand alone without additional reports when it becomes the reevaluation). ☐ The district establishes systems for regularly reviewing REEDs to assess compliance and quality indicators, including the use of: ○ relevant current and historical data, including previous evaluations, progress on goals, services and accommodations, disruptions in service, progress in the general curriculum, and language proficiency data, for EB students; ○ information provided by the student's parents or the adult student; ○ classroom-based local and state assessments, and classroom-based observations; and ○ teachers' and related service providers' observations of the student.	☐ Records demonstrate that the REED is conducted well enough in advance (TEA recommends 45 school days as a best practice) of the due date of the reevaluation to ensure that additional data, when needed, can be obtained prior to the reevaluation due date in alignment with district expectations. ☐ Records of team meetings and decision-making processes demonstrate relevant data sources are used in the REED process and family involvement. ☐ Guidance or checklist documents are used to ensure the REED includes all the necessary information. ☐ REED participation by ARD committee members is documented. ☐ Folder reviews of REED process documents demonstrate consistent quality and compliance.

Key Practices	Success Criteria	Sources of Evidence
3.4.3: Completing Reevaluation Process The district ensures that reevaluation results are used to review and revise the student's IEP.	☐ The district has established guidance and procedures to ensure timely review and use of the reevaluation by the ARD committee. ☐ Reevaluation reports contain individualized recommendations for ARD committee consideration. ☐ Reevaluations are used to inform adjustments to students' IEPs, including present levels of academic achievement and functional performance (PLAAFP), annual goals, accommodations, modifications, related services, and schedule of services.	☐ Policies, procedures, or guidelines related to using reevaluation results to inform adjustments to students' IEPs. ☐ Analysis examines the time frame between completion of reevaluation and consideration by the ARD committee in order to inform the IEP. ☐ Folder reviews of reevaluation demonstrate consistent quality and compliance.

Lever 4: Individualized Education Program Development

A high-quality, student-centered individualized education program (IEP) for each student with a disability is required in accordance with the Individuals with Disabilities Education Act (IDEA) and state law. In Texas, the team responsible for developing, reviewing, and revising a student's IEP is known as the admission, review, and dismissal (ARD) committee. The ARD committee functions collaboratively and includes the student's parent(s), educators, and administrators.

The admission phase involves determining a student's eligibility for special education services. The review phase is an ongoing, iterative process, where the ARD committee meets at least annually to review the student's progress toward their IEP goals and to revise the IEP as necessary. Dismissal from special education services through the ARD committee process occurs when the committee uses evaluation data and progress to determine that a student no longer requires special education services.

The Essential Actions in Lever 4: Individualized Education Program Development are as follows:

- Essential Action 4.1: ARD Committee
- Essential Action 4.2: IEP Content
- Essential Action 4.3: IEP Goal Progress

Essential Action 4.1: ARD Committee

The district ensures that properly constituted ARD committees meet to develop an appropriate individualized education program (IEP) for each student and each committee monitors implementation of that program.

Key Practices	Success Criteria	Sources of Evidence
4.1.1: ARD Committee Participation The district's procedures related to ARD committee membership, roles, and responsibilities for all required members (e.g., students, parents, educators, district representatives) are designed to foster meaningful participation.	☐ The district provides guidance and professional learning on ARD committee membership, including dual roles, required members in different circumstances, and situations where including non-required members may be helpful. ☐ The district has processes to ensure parents receive written notice of the ARD committee meeting at least 10 calendar days before the meeting, unless the parent agrees to a shorter timeline. ☐ The district has clear processes demonstrating efforts to decide on a mutually agreed time and place with parents for ARD committee meetings. ☐ The district has clear processes to ensure parents can meaningfully participate in ARD committee meetings through alternative means (e.g., virtual, phone) if they cannot attend in person. ☐ The district has a process and forms that meet requirements and document when meetings proceed without a required member (i.e., excusal processes). ☐ The district has processes to verify presence of required members at every ARD committee meeting.	☐ The district's policies, procedures, processes, training, and guidance related to ARD committee membership demonstrate knowledge of required members, describe roles of each ARD committee member, and encourage participation of all members. ☐ Written notifications are dated and include evidence that they were provided to parents at least 10 calendar days before the scheduled meetings. ☐ ARD committee member attendance, including documentation of required members, is recorded in the IEP (e.g., sign-in sheets). ☐ Parent feedback (e.g., surveys) indicates they are given opportunities to schedule ARD committee meetings at mutually agreeable times and that they have meaningful opportunities to participate. ☐ Artifacts include written documentation showing that the district and parent agreed a member was not required to attend, when the member's area of curriculum or service was not being discussed. ☐ ARD committees demonstrate shared decision-making, with evidence that parent and student input meaningfully influences IEP decisions.

Key Practices	Success Criteria	Sources of Evidence
4.1.1: ARD Committee Participation (continued)	☐ The district provides guidance, strategies, training, resources, and other supports, such as language interpreters, to support the active participation of all ARD committee members, including parents.	☐ Artifacts include written informed parent consent for the excusal of a member, along with written input provided to the ARD committee from the excused member, when the member's area of curriculum or service was being discussed. ☐ Multiple documented attempts to contact and notify parents are made when scheduling their attendance at an ARD committee meeting. ☐ A calendar or scheduling process is used to ensure the availability of all required participants. ☐ Documented evidence, such as meeting deliberations and present levels, confirms the active participation of all ARD committee members in meetings. ☐ Methods for gathering input from parents are provided in multiple formats and languages, including the use of interpreters.

Key Practices	Success Criteria	Sources of Evidence
4.1.2: Use of Data The district ensures that ARD committees use data-based findings from multiple sources to identify specific areas of need to address in the IEP.	☐ The district provides guidance, professional learning (PL), and resources on using multiple sources of data (e.g., evaluation, academic, behavioral, functional, goal progress, teacher and parent input) to identify specific areas of need to address in the IEP. ☐ The district establishes processes, expectations, and tools (e.g., input and feedback forms, draft IEP reviews) to collect and include meaningful input from all the student's teachers and providers, regardless of whether they will be present at the ARD committee meeting (i.e., non-required members provide input and feedback). ☐ The district provides procedures and training on the collection and reporting of progress monitoring data, including documented use and results of implementation of required accommodations or modifications, a student's behavioral intervention plan (BIP; when applicable), and tracking of IEP goal progress. ☐ The district sets clear expectations that ARD committees review discipline or other behavioral data such as restraints, behavioral goal tracking, and manifestation determination reviews (MDRs) to understand behavioral needs and the effectiveness of any current supports.	☐ The review of district policies, procedures, and guidance demonstrates the expectations and requirements for an ARD committee's use of multiple sources of data. ☐ District templates, forms, and tools are used for gathering input from the student's teachers. ☐ IEP documents demonstrate that ARD committees use data from multiple sources in their meetings and decision-making. ☐ Present levels of academic achievement and functional performance (PLAAFP) sections of IEPs use multiple sources of data to identify areas of need that are aligned with IEP goals. ☐ Training and professional learning artifacts, such as presentation handouts and sign-in sheets, are directly related to IEP data collection and use. ☐ Evidence that feedback from team members assessing the quality and scope of data collected and reviewed at ARD committee meetings is used to adjust policies, procedures, professional learning, and guidance as necessary.

Key Practices	Success Criteria	Sources of Evidence
4.1.3: Communication The district ensures that processes are in place to communicate decisions made by the ARD committee to parents and all relevant personnel who work with the student.	☐ The district sets clear expectations, procedures, and timelines regarding communicating ARD committee decisions and next steps to parents (e.g., family-facing communication in the parent's home language, clearly written prior written notices, copies of IEP). ☐ The district provides guidance and professional learning to support communication with parents both during and after ARD committee meetings (e.g., strategies to ensure parents understand ARD committee proceedings and decisions, plain-language examples). ☐ The district sets clear expectations, procedures, and timelines, for both annual and review meetings, regarding communicating ARD committee decisions and instructional implications with all personnel who work with a student. ☐ The district provides forms or other resources (e.g., IEP implementation summary templates, communication checklists) to support and document ARD committee communication with all personnel who work with a student.	☐ Evidence demonstrates that copies of students' IEPs are provided to parents at no cost and in a timely manner (i.e., no later than 10 school days) following an ARD committee meeting. ☐ Internal communication artifacts demonstrate compliance with notification of ARD committee decisions to all personnel who work with a student, as appropriate based on his or her need to know. ☐ Training/PL artifacts on best practices for family communication (e.g., presentation handouts, sign-in sheets) demonstrate that all relevant staff are aware of the practices and expectations around communication. ☐ ARD committee documents such as deliberations and prior written notices provide evidence of parent explanations and communication about the ARD committee decisions. ☐ Documented evidence shows that feedback from staff and families is used in the revision of processes when necessary. ☐ Teacher-facing IEP implementation summaries, completed communication checklists and logs, or other documentation demonstrate that ARD committee decisions are consistently shared with all team members.

Essential Action 4.2: IEP Content

The district develops high-quality, standards-based IEPs for students, addressing all state and federally mandated requirements, to meet students' individually identified needs.

Key Practices	Success Criteria	Sources of Evidence
4.2.1: Advance Input The district ensures that ARD committees solicit input from each team member, including parents and all relevant school personnel, in advance of drafting components of the IEP.	☐ The district has developed processes and standard tools (e.g., input forms, draft templates, data review protocols) for ARD committee use in gathering and reviewing input on student's strengths, needs, and barriers related to academics, behavior, and functional performance from general and special education teachers, other school personnel, and parents (in multiple languages). ☐ For annual ARD committee meetings, the district ensures that draft IEP components created from advance input (e.g., present levels, goals) are shared with parents in advance of the meeting (at least five school days recommended). ☐ For review ARD committee amendments or meetings convened for a specific purpose, the district ensures that input is collected from all relevant team members and that parents receive any draft proposals or amendment considerations prior to the meeting. ☐ Full and individual initial evaluations (FIIEs) are shared with parents as soon as available, but at least five school days prior to the initial ARD committee meeting.[10] ☐ Parent input forms, draft IEP documents, and FIIEs are shared with parents in their home language, communicated through an interpreter, and/or translated as applicable.	☐ District-developed ARD preparation processes and tools, such as input forms, draft templates, or data review protocols, are used to support gathering and reviewing input from staff and parents. ☐ Completed forms or checklists from ARD committee members, relevant school personnel, and parents document that their input on academic strengths and needs was considered in IEP development. ☐ IEP documents demonstrate that input was gathered from various sources and used to draft PLAAFP and other sections of the IEP as relevant. ☐ Documentation (e.g., emails, copies of letters) showing draft IEP components and evaluation reports is provided to parents in advance of meetings. ☐ District policies, procedures, forms, and documents support gathering input from various team members (e.g., parents, school staff). ☐ Parent and staff surveys report strong agreement with questions related to opportunities to provide input to student IEP development.

[10] 19 TAC §89.1011(h) requires that a copy of the written FIIE report must be provided to the parent as soon as possible after completion of the report but no later than five school days prior to the initial ARD committee meeting.

Key Practices	Success Criteria	Sources of Evidence
4.2.2: Special Considerations The district ensures that ARD committees proactively gather, review, consider, and document any information needed for special considerations and additional requirements applicable to each student as part of developing the IEP.	☐ The district provides guidance, processes, resources, and professional learning on additional IEP considerations and/or requirements applicable for specific student populations and scenarios. These would include, but not be limited to: ○ Consideration of Extended School Year ○ Consideration of Assistive Technology ○ Consideration of behavior and need for a behavioral intervention plan ○ Considerations for emergent bilingual students ○ Additional requirements for students who are deaf or hard of hearing or deafblind or have a visual impairment ○ Additional considerations for students with autism (i.e., autism supplement) ○ Additional requirements for transition (based on age) ○ Additional requirements for dyslexia or dysgraphia ☐ ARD committees seek input, collaboration, and participation from relevant specialists or service providers to support special consideration areas when required or as appropriate for IEP planning and decision making. ☐ IEP documentation reflects individualized consideration of all applicable additional requirements or special considerations that explains why each is or is not needed and goes beyond checklist compliance.	☐ District guidance, processes, resources, and training artifacts address various special considerations or additional requirements. ☐ IEP reviews reveal participation and input from appropriate staff related to areas of special consideration or requirements. ☐ Staff surveys and feedback on collaboration demonstrate working together for IEP development. ☐ District forms, tools, or checklists are used to help support gathering and sharing of information across team members. ☐ Service data reviews reveal no patterns that indicate special considerations (e.g., extended school year or assistive technology) are limited to only certain disability categories. ☐ Reviews of ARD committee documents (e.g., deliberations, meeting notes, IEPs, supplements, prior written notices) demonstrate individualized consideration through clear, individualized descriptions of considerations, discussion, rationale, and decisions for each applicable special consideration.

Key Practices	Success Criteria	Sources of Evidence
4.2.3: Present Levels of Academic Achievement and Functional Performance (PLAAFP) The district provides guidance and professional learning for ARD committees to develop the PLAAFP statement with robust data and information that provides a clear picture of strengths, needs, and how the disability impacts the student in the school setting, which provides the foundation for programming and services.	☐ The district's processes, procedures, guidance, and training for PLAAFP statements set clear expectations for drafting detailed, individualized, data-based statements that ○ describe the student's strengths, needs, and skill gaps across academic and functional areas using a variety of data sources ○ identify clear and objective baseline performance data from a variety of sources that describe the student's current academic skills and skills or behaviors in functional areas ○ explain how the student's disability affects the student's involvement and progress in the general education curriculum (or participation in appropriate activities for preschool children) in an individualized way (i.e., not based on general disability characteristics) ○ address all disability conditions and related service needs ○ identify what the student is expected to do in the general education curriculum in academic areas ○ are written in clear, parent-friendly language (i.e., free of jargon, acronyms, easy to read) ☐ The district provides a variety of implementation supports (e.g., training, coaching, checklists/rubrics, quality checks) for staff that ensure IEPs contain high-quality and compliant academic and functional PLAAFP statements. ☐ PLAAFP statements include clear descriptions (i.e., frequency of support, level of adult support, student response to varying levels of support) of instructional, behavioral, functional, and support needs that directly inform the intensity of services required.	☐ District policies, operating procedures, or guidance related to IEP development address quality PLAAFP statements. ☐ District templates, rubrics, forms, or checklists used in IEP development (including software) address quality PLAAFP statements. ☐ Training or coaching artifacts demonstrate the district provides professional learning on developing high-quality PLAAFP statements (e.g., presentation handouts, sign-in sheets, coaching logs, or session notes). ☐ Randomized IEP reviews, using a standard rubric, reveal systemic adherence to both quality and compliance components of PLAAFP statements.

Key Practices	Success Criteria	Sources of Evidence
4.2.4: Goals and Objectives The district provides guidance and training for ARD committees to develop specific and measurable goals and objectives aligned to academic standards (when applicable), baseline data, and needs identified in the PLAAFP.	☐ The district's processes, procedures, guidance, and training for IEP goal development set clear expectations for drafting meaningful and measurable academic and/or functional goals that: ○ include all four required components:[11] timeframe, condition, behavior, and criterion. ○ clearly connect to critical needs, barriers due to the disability, and baseline data outlined in the PLAAFP statement. ○ are not a restatement of the enrolled grade level knowledge and skills but are directly linked to progressing toward enrolled grade-level content standards or Pre-K guidelines (academic goals) or to skills that assist the student in accessing the enrolled grade-level content standards (functional goals). ○ include at least two short-term objectives with all four components for students taking alternate assessments and for any student with an IEP when determined appropriate to include by the ARD committee. ○ identify the methods used to measure progress toward goal mastery and the frequency of reporting progress. ☐ The district provides a variety of implementation supports (e.g., training, coaching, checklists/rubrics, quality checks) for staff to ensure that all IEPs contain high-quality and compliant goals designed to enable the student to be involved in and make progress in the general curriculum. ☐ Randomized IEP reviews, using a standard rubric or checklist, reveal systemic adherence to both quality expectations and compliance components of goal development.	☐ District policies, operating procedures, or guidance documents provide expectations for IEP development, including the creation of measurable goals and objectives. ☐ Rubrics, forms, or checklists are provided for teachers and ARD committees to support the drafting of IEP goals and objectives. ☐ Training and professional learning artifacts, such as presentation handouts and sign-in sheets, demonstrate that staff received instruction on developing high-quality, standards-based or functional IEP goals and objectives. ☐ Coaching logs, schedules, and notes document ongoing support provided to staff in implementing effective goal-setting practices within the IEP process. ☐ Data from district IEP reviews or audits demonstrate quality goal development across campuses.

Key Practices	Success Criteria	Sources of Evidence
4.2.5: Instruction and Related Services The district provides guidance and training to support ARD committees to individually identify specially designed instruction, related services, accommodations, and modifications aligned to each student's needs and goal areas.	☐ The district has developed and disseminated clear, comprehensive guidance and professional learning to ARD committees on aligning specially designed instruction, related services, accommodations, and modifications to support student IEP goals. ☐ Specially designed instruction and/or related services support each goal and are clearly described in the IEP using frequency, location, duration, and beginning date. ☐ Special education services, accommodations, and modifications clearly support areas of need described in the PLAAFP statement, including linguistic supports for emergent bilingual (EB) students. ☐ Related services are identified as required by the ARD committee to assist the student in benefiting from special education. ☐ Special education and related services are not determined based on category of the student's disability, availability of special education programs or related services or personnel, current availability of space, administrative convenience, or how the district (or school) has configured its special education service delivery system. ☐ Special education services are delivered in both general and special education settings, as appropriate to each student's LRE. ☐ IEPs clearly document specially designed instruction and related services in a manner that supports identification of intensity of services related to special education funding.	☐ District policies, operating procedures, guidance documents, and training or coaching materials related to specially designed instruction, related services, accommodations, and modifications are disseminated to support ARD committees. ☐ Professional learning artifacts (e.g., presentation handouts, sign-in sheets, coaching logs, meeting notes) document staff participation in professional learning on specially designed instruction and/or related services. ☐ Randomized IEP reviews were systematically conducted and results demonstrate adherence to the listed success criteria. ☐ Data and IEP reviews support that patterns of services based on eligibility or other factors are not present. ☐ Data and IEP reviews reveal that special education services occur in both general and special education settings. ☐ Results from randomized IEP reviews indicate that school staff are readily able to identify the appropriate tier of intensity and service group based on information described in the IEP.

[11] 19 TAC §89.1055(b) states that to be considered a measurable annual goal under 34 CFR, §300.320(a)(2), a goal must include the components of a timeframe, condition, behavior, and criterion.

Key Practices	Success Criteria	Sources of Evidence
4.2.6: Supplementary Aids and Services The district has established guidance for ARD committees in determining the supplementary aids and services necessary to support students in the general education setting and in extracurricular and nonacademic settings.	☐ The district has developed and disseminated clear, comprehensive guidance for ARD committees that outlines procedures for identifying necessary supplementary aids and services (e.g., assistive technology, paraprofessional, interpreter, teacher training, special equipment) for students with disabilities to be educated to the maximum extent appropriate with non-disabled students in the least restrictive environment possible. ☐ This guidance includes processes to ensure consistent, equitable decisions across all schools within the district. ☐ Students with disabilities receive supplementary aids and services identified by the ARD committee, facilitating their full participation and achievement in general education classrooms as well as extracurricular and nonacademic activities. ☐ The effectiveness of supplementary aids and services is monitored through goal progress, observations, improved accessibility, and participation, and adjustments are made based on student response. ☐ All relevant staff, including general and special education teachers, administrators, and ARD committee members, receive adequate training to ensure that they are knowledgeable about how to effectively identify and implement supplementary aids and services to support the inclusion of students with disabilities. ☐ IEPs clearly document supplementary aids and services in a manner that supports identification of intensity of services (tier and service group) for special education funding purposes.	☐ District policies, operating procedures, and guidance are available for ARD committees to guide them in determining appropriate supplementary aids and services. ☐ Randomized IEP reviews reveal evidence of considerations, discussions, (i.e., deliberations) assessments, and records of ARD committee decisions regarding supplementary aids and services for individual students in enough clarity to readily identify intensity of services (tier and service group) for special education funding purposes. ☐ Student outcome data show evidence of increased access, participation, and progress in general education settings (e.g., behavior data, participation in extracurriculars). ☐ Evidence such as training artifacts, sign-in sheets, and presentation handouts documents professional learning for relevant staff on identification and implementation of supplementary aids and services.

Key Practices	Success Criteria	Sources of Evidence
4.2.7: State Assessment The district provides ARD committees with guidance related to state assessment determination and participation, including the identification in the IEP of any individual appropriate accommodations for the specific assessment. (e.g., STAAR, STAAR Alternate 2, TELPAS, TELPAS Alternate).	☐ The district provides guidance and professional learning on state assessment determination, participation, identification of appropriate accommodations, and LPAC collaboration (for emergent bilingual students). ☐ Participation in the general assessment is the first consideration and ARD committee decisions about participation in alternate assessments are always supported by data and aligned with TEA participation requirements.[12] ☐ Accommodations documented in the IEP are consistent with those used during instruction and reflect the student's disability-related needs. ☐ The district has systems in place to regularly monitor and support appropriate decision-making and alignment between the IEPs of students that take the alternate assessment and state participation requirements.	☐ Evidence such as resources, guidance documents, and training artifacts (e.g., sign-in sheets, presentation handouts) document guidance and professional learning on state assessment participation, accommodations, and LPAC collaboration. ☐ Randomized IEP reviews reveal systemic adherence to state requirements and district guidance regarding state assessment participation and accommodation documentation in the IEP. ☐ Justification forms are properly completed and included with the IEP when required. ☐ There is alignment between student IEP and participation requirements for students taking alternate assessments.

[12] 19 TAC §89.1055(d)(2) requires that when the ARD committee determines that the student will participate in an alternate assessment that the Texas Education Agency's alternate assessment participation requirements form, if one is made available to the school districts, must be included in the student's IEP to document required statements.

Key Practices	Success Criteria	Sources of Evidence
4.2.8: Routine IEP Review The district systematically and regularly conducts detailed reviews of IEPs to ensure that they are compliant, high quality, and reflective of each student's unique needs.	☐ The district establishes a procedure and regular schedule, at least annually, to engage in a randomized, adequate representative sample of IEP reviews. ☐ The district has expectations and processes for less formal, but regular, IEP reviews, such as training ARD facilitators and administrators to recognize and correct compliance or quality issues before or during ARD committee meetings, using lead or mentor teachers to support draft IEP development, etc. ☐ The district follows established procedures to quickly and transparently correct any issues of noncompliance identified during IEP reviews (e.g., make corrections, retrain staff, notify parents, address compensatory services). ☐ The district verifies that the instruction and services specified in the IEPs are delivered as planned. This verification includes ensuring that accommodations, modifications, and supports are provided consistently to students across all relevant settings (i.e., academic, extracurricular, and nonacademic).	☐ Tools used for IEP reviews such as checklists, rubrics, and discussion questions are used during IEP reviews to guide evaluators in assessing quality and compliance. ☐ Documentation from the IEP review process, including notes, checklists, rubric ratings, and summaries, details the findings of each review. ☐ Calendars and documented procedures outline the processes for random selection and IEP review. ☐ Training artifacts and/or process documents are used to support regular IEP reviews and checks on campuses. ☐ Records of classroom observations/walk throughs and service delivery monitoring verify the implementation of IEP provisions with fidelity. ☐ Student schedules and teacher schedules align with the schedule of service in the IEP. ☐ District data and reports document IEP corrections, retraining or coaching for staff, and compensatory services for students that stem from finding and correcting noncompliance issues.

Key Practices	Success Criteria	Sources of Evidence
4.2.9: LRE Decision Making The district ensures not only that ARD committees are equipped to comply with federal and state regulations, but also that educational settings provide the best possible balance between the need for support and the right to meaningful access.	☐ The district's school-level placement decisions adhere to federal and state regulations concerning LRE. ☐ The district regularly reviews and assesses placement decisions to ensure ongoing compliance and identify areas for improvement in implementing LRE principles. ☐ The district provides guidance and professional learning to support LRE decision making. ☐ Annual IEP reviews include assessment of LRE to determine if placement is still appropriate.	☐ Documentation and records from IEP meetings illustrate how federal and state regulations informed team decisions about placement. ☐ Randomized IEP reviews reveal systemic adherence to requirements and district guidance regarding LRE decision making. ☐ Evidence such as training artifacts, sign-in sheets, and presentation handouts document professional learning for relevant staff on LRE decision making.

Essential Action 4.3: IEP Goal Progress

The district monitors the implementation of IEPs to ensure that students' special education supports and services are delivered with fidelity, resulting in students making progress towards goals.

Key Practices	Success Criteria	Sources of Evidence
4.3.1: Case Manager The district ensures that students with IEPs have a designated case manager to facilitate program implementation and fidelity, organize communication within the ARD committee, and monitor progress and revisions of the student's program.	☐ Every student with an IEP has a qualified special educator assigned as the designated case manager. ☐ All special education case managers receive clear expectations, training, and support to understand and fulfill their role. ☐ The district has established support systems for new case managers (e.g., training, assignment of a mentor teacher, coaching). ☐ Routine and necessary communication and collaboration occur between team members, including parents and general education teachers, and is documented when necessary. ☐ Program implementation data is collected, documented, and reviewed regularly to identify any need for changes. ☐ All parents receive quality (e.g., clear, data-based, aligned to goal criterion) progress reports at the frequency designated within the IEP.	☐ Forms and records provide evidence that a qualified case manager has been assigned for every student with an IEP. ☐ Guidance and training documentation, forms, and checklists provide evidence that responsibilities and expectations for case managers are clearly communicated. ☐ New case manager training and support artifacts and documents (e.g., presentations, sign-in sheets, mentor logs) provide evidence that new case managers are supported in their role. ☐ Staff surveys and responses provide evidence of collaboration and ARD committee communication. ☐ Guidance documents and communication forms are used to support communication within the ARD committee. ☐ Documentation demonstrates that ARD committee communication is shared with all team members, including parents. ☐ Sampling of students' school schedule, goal data, work production, and staff records (e.g., service and accommodation logs) demonstrate evidence of progress monitoring and program implementation. ☐ Randomized student folder reviews show completed, quality, timely progress reports that were shared with parents.

Key Practices	Success Criteria	Sources of Evidence
4.3.2: Monitoring IEP Goal Progress The district ensures that processes are in place and staff are trained to document the delivery of services, monitor progress toward IEP goals, and use data to inform and adjust IEP goals and services.	☐ The district sets clear expectations for documenting IEP service delivery and collecting IEP goals and objective progress data. ☐ Data is consistently collected, and progress is measured in accordance with the prescribed methods documented in the IEP. ☐ IEP goal progress monitoring and service documentation responsibilities are communicated to relevant staff and systems are in place to regularly collect progress in alignment with the students' IEPs. ☐ The district provides guidance, professional learning, and resources to support ARD committees in using progress monitoring data to assess the effectiveness of IEP services (e.g., when ARD committees should reconvene; consider revisions to IEPs). ☐ The district provides guidance and professional learning to clarify what to do when student progress is insufficient to reach IEP goals, including the following: ○ Convening the ARD committee to discuss adjustments to the student's program. ○ Documenting contributing factors (e.g., student absences, school closures, staffing interruptions). ○ Documenting changes in service, such as changes in the interventions used, or changes in the duration, intensity, frequency, or location of services. ○ Documenting the student's language proficiency progress, for students who are emergent bilingual.	☐ District policies, procedures, and training artifacts exist and serve as evidence that processes are in place, and staff are trained. ☐ There is evidence that checklists, forms, data collection sheets, training, and other resources were used by staff to support IEP goal progress monitoring. ☐ Randomized reviews of student progress monitoring data and reports demonstrate adherence to the IEP. ☐ There is evidence that progress monitoring logs or data collection tools are used by teachers. ☐ Case managers maintain documentation of communication with team members regarding monitoring of progress. ☐ Documentation shows that ARD meetings are held to review data and discuss lack of progress for students. ☐ District guidance and training artifacts demonstrate support for effective IEP goal progress reporting. ☐ District guidance provides procedures for the use of IEP goal progress data. ☐ File reviews demonstrate adherence to district procedures and expectations for reconvening the ARD committee and adjusting the student's program (e.g., amendments, intensification of services or supports, fidelity adjustments) when students are not progressing.

Key Practices	Success Criteria	Sources of Evidence
4.3.3: Reporting IEP Goal Progress The district ensures that IEP goal progress is communicated to parents as required and with other educators, as appropriate.	☐ The district sets clear expectations and provides professional learning on how teachers should document and share IEP annual goal and objective progress reports. ☐ Progress reporting consistently aligns with the criteria that are written in the IEP goals (e.g., progress data and comments aligned to goal measurement) and is provided at the frequency indicated in the IEP. ☐ The district has procedures in place to monitor and ensure clearly written and easy to understand progress reports are provided to parents, in their home language, in accordance with the IEP. ☐ Parents and relevant staff members are familiar with the students' IEP goals and progress.	☐ District policies, procedures, and training artifacts demonstrate that processes are in place and staff are trained in IEP goal reporting. ☐ Randomized reviews of student progress monitoring data and reports demonstrate adherence to the IEP. ☐ The district provides guidance, forms, samples, etc. that support teachers with communicating IEP goal progress to parents. ☐ Progress report reviews demonstrate regular, clear, and timely communication of IEP progress. ☐ Parent feedback such as survey results indicates they receive clear and timely progress reports.

Lever 5: Special Education Service Delivery

A foundational tenet of the Individuals with Disabilities Education Act (IDEA) is free appropriate public education (FAPE) for students with disabilities. FAPE ensures that students with disabilities can attend school and receive educational services tailored to their specific needs at no cost to families. A student's individualized education program (IEP) outlines the specific educational goals, services, accommodations, and supports that the student will receive under FAPE.

FAPE is grounded in the understanding that students with disabilities must have access to an education, equivalent in quality and opportunity, to what is offered to their nondisabled peers. This means that students with disabilities must have access to the same academic curriculum, extracurricular activities, and other school functions as their peers. Another key component of FAPE is that the education provided must be appropriate for the student. An "appropriate education" means that students with disabilities are offered meaningful opportunities to access and progress in the curriculum.

FAPE also requires that a student's education occurs in the least restrictive environment (LRE). This means, to the maximum extent appropriate, that students with disabilities are educated with their nondisabled peers. Separate schooling or removal from the general educational environment should occur only when the nature or severity of a student's disability requires an alternative placement or instructional procedures for them to make adequate progress.

The Essential Actions in Lever 5: Special Education Service Delivery are as follows:

- Essential Action 5.1: Free Appropriate Public Education (FAPE)
- Essential Action 5.2: Least Restrictive Environment (LRE)
- Essential Action 5.3: Specially Designed Instruction and Related Services
- Essential Action 5.4: Behavioral Services, Intervention Plans, and Discipline
- Essential Action 5.5: Transition Planning and Services

Essential Action 5.1: Free Appropriate Public Education (FAPE)

The district guarantees the provision of FAPE to all eligible students with disabilities.

Key Practices	Success Criteria	Sources of Evidence
5.1.1: FAPE Guidance and Monitoring The district has established guidance and practices for ensuring that FAPE is available to each eligible student.	☐ The district communicates information for providing FAPE, including designing master schedules with special education services in mind and sharing legal requirements with both general and special educators. ☐ The district's FAPE guidance is grounded in the concept that implementation of the student's uniquely designed Individualized Education Program (IEP) with fidelity is necessary to achieve meaningful educational benefit for each eligible student. ☐ The district conducts regular (at least annual) program reviews (i.e., sampling IEPs and observing to verify program implementation) to ensure that they are providing appropriate educational services in accordance with the IEP. ☐ The district tracks and monitors special education service delivery, including implementing procedures to prevent (e.g., master scheduling) and address patterns of missed services (e.g., chronic student absenteeism, special educator leaves or absences). ☐ The district collects, analyzes, and acts on student progress monitoring and outcome data to assess the effectiveness of special education services and ensure continuous improvement.	☐ District guidance (e.g., master scheduling), training artifacts, and legal information about FAPE is developed and communicated to educators. ☐ Training/professional learning artifacts demonstrate that general and special educators have received role-specific training related to FAPE, including the delivery of specially designed instruction as outlined in the IEP. ☐ Program reviews or audits document that services are provided in accordance with students' IEPs. ☐ District procedures, guidance, and templates for tracking service provision, including preventing and addressing (when it occurs) missed special education services due to either student or staff absences, are in place. ☐ Artifacts such as service trackers and provider logs demonstrate that the provision of services is routinely tracked and reviewed. ☐ Academic progress and achievement tracking systems measure students' progress and achievement.

Key Practices	Success Criteria	Sources of Evidence
5.1.2: Prior Written Notice (PWN) The district ensures that parents (or adult students) are clearly and fully informed whenever it proposes, or refuses, to initiate or change the provision of FAPE.	☐ The district maintains a comprehensive system for documenting and tracking the distribution and quality of PWNs to ensure that all eligible students' parents (or adult students) receive clear information about the proposed or refused actions related to special education. ☐ The district provides training and resources (e.g., examples and non-examples, checklists) to ensure that staff responsible for drafting PWNs meet compliance and quality expectations. ☐ District staff responsible for drafting PWNs consistently demonstrate understanding of expectations, including but not limited to: ○ Situations when PWN must be provided. ○ Providing PWN in the native language. ○ Timeframe requirements (i.e., five school days). ○ Required content. ○ Individualized, clear, well-written descriptions.	☐ Randomized reviews of PWNs as part of student folder reviews consistently demonstrate that both compliance and quality components are present across district samples. ☐ Training artifacts and documentation (e.g., presentations, videos, sign-in sheets) and resources document that staff are provided with the support needed to develop quality PWNs. ☐ There is evidence of staff understanding, such as completed quality and compliant PWNs, interviews, surveys, or post training quiz results. ☐ Parents (or adult students) report (e.g., surveys, interviews, focus groups) that they understand what the PWN documentation means without additional explanation.

Essential Action 5.2: Least Restrictive Environment (LRE)

The district facilitates processes for educating students with disabilities in the LRE, including the provision of a continuum of special education services.

Key Practices	Success Criteria	Sources of Evidence
5.2.1: LRE Guidance and Monitoring The district has established guidance and practices to ensure that each student with a disability is served in their least restrictive environment (LRE).	☐ The district communicates information and expectations for determining LRE with admission, review, and dismissal (ARD) committee members in a variety of ways (e.g., written guidance, professional learning). ☐ The district maintains specific LRE guidance for services for 3- to 5- and 18- to 22-year-olds, with natural environments and community settings as the starting point. ☐ The district ensures that students with disabilities who are emergent bilingual (EB) have full access within their LRE to their bilingual or English as a second language (ESL) program services as well as appropriate special education services. ☐ The district regularly (at least annually) conducts IEP reviews to ensure that ARD committees follow district guidance related to data-driven LRE determinations and documents their reasoning for placement decisions. ☐ ARD committees, including school administrators, are trained to monitor days out of placement and actions that can equate to a change of placement.	☐ District guidance, training artifacts, and information about LRE were communicated to educators. ☐ Artifacts show district guidance specific to 3- to 5- and 18- to 22-year-olds reflects community considerations. ☐ Students with disabilities who are EB are included in district LRE guidance documents. ☐ Evidence such as survey results and IEP documentation demonstrates staff understanding of LRE guidance. ☐ Results of randomized IEP reviews demonstrate application of district LRE guidance by ARD committees. ☐ District guidance, training artifacts, and processes for monitoring change of placements are provided to administrators.

Key Practices	Success Criteria	Sources of Evidence
5.2.2: Continuum of Services The district offers a continuum of special education placements and services that cater to the varying needs of students with disabilities to ensure that, to the maximum extent appropriate, every student with a disability is educated with students who are nondisabled.	☐ To ensure that individual student needs are aligned with appropriate services, the district provides a range of special education placements and service options, including general education classrooms, Career and Technical Education (CTE), bilingual or English as a Second Language (ESL) settings, supplemental support services, and more specialized settings when necessary. ☐ Each student's IEP reflects consideration of the continuum of services, with placements and services tailored to their unique needs, strengths, and educational goals, ensuring that decisions are made based on the principle of providing FAPE in the LRE. ☐ Student outcome data (e.g., academic achievement, postsecondary readiness, behavior and discipline data) demonstrate that the district's special education services appropriately support students' educational needs.	☐ Records and catalogs of the special education services and placements offered by the district demonstrate the continuum of options available. These records could include descriptions of each type of placement, the support services provided, and how these options are tailored to meet the diverse needs of students. ☐ IEP reviews and placement data demonstrate evidence of how the continuum of services is used. These data should show a distribution of placements that reflect the commitment to educating students in their LRE while also providing more specialized environments when necessary. ☐ Data reviews demonstrate progress in closing achievement and outcome gaps between students with and without disabilities.

Key Practices	Success Criteria	Sources of Evidence
5.2.3: Disproportionality in Placement The district regularly monitors data for disproportionate placement of students in more restrictive educational settings and implements targeted strategies to address any identified instances of disproportionality.	☐ The district has a robust system for regularly monitoring and analyzing placement data to identify patterns of disproportionality among students in special education settings, on the basis of race, ethnicity, language, socioeconomic status, or disability. ☐ If disproportionality is identified, the district effectively implements targeted strategies designed to address and reduce these disparities. Success in this area is measured by the formulation, execution, and adjustment of interventions aimed at ensuring equitable placement decisions. ☐ If significant disproportionality for three years in a row is identified, the district must: ○ Review and (if appropriate) revise policies, procedures, and practices; ○ Reserve the maximum amount of IDEA B funds (15%) to provide comprehensive coordinated early intervening services (CCEIS); and ○ Report publicly on the revision of policies, procedures, and practices. ☐ Across time, the district demonstrates a measurable reduction in instances of disproportionality (or maintains status when disproportionality is not identified) in student placements.	☐ Data analyses and reports about student placement highlight any trends or patterns of disproportionality. ☐ Records or plans show strategies and interventions implemented by the district to address identified disproportionality, including, for example, professional learning, changes in the environment to better support students in less restrictive settings, community engagement initiatives, and any other targeted actions taken to promote equitable placements. ☐ If three years of significant disproportionality was identified, records of policy review and revision to include legal framework assurance, publicly reported communication (e.g., website, school board announcement) and completed TEA Significant Disproportionality and CCEIS survey demonstrate compliance with required actions. Comparative data shows a decrease (or maintenance when disproportionality is not identified) in rates of disproportionality before and after the implementation of targeted strategies, as evidenced by more equitable distribution of students across educational settings.

Essential Action 5.3: Specially Designed Instruction and Related Services

The district ensures the provision of specially designed instruction (SDI), related services, and supplementary aids and services with fidelity according to each student's individually identified needs.

Key Practices	Success Criteria	Sources of Evidence
5.3.1: Commitment to High-Quality, Compliant Delivery of Specially Designed Instruction (SDI) The district is committed to implementing well-designed policies, procedures, and practices that not only ensure compliance with state and federal requirements, but promote the provision of meaningful, high-quality SDI for each student with an IEP.	☐ The district develops, annually reviews, revises, and disseminates guidance, policies, and procedures that are reflective of both legal compliance and best practices that support the effective delivery of SDI, including related and supplementary aids and services. ☐ The district has processes in place to regularly monitor and evaluate the delivery of SDI to ensure ongoing compliance with federal and state regulations, ensuring that students receive the services and support to which they are legally entitled, as outlined in the IEP. ☐ Staff, including campus administrators, within the district receive ongoing training and updates on legal requirements and best practices in special education, including training on their legal responsibilities for SDI.	☐ Written district guidance, policies and procedures incorporate best practice recommendations from national and state guidance related to SDI, related services, and supplementary aids and services. ☐ Annual guidance and policy and procedure reviews, with evidence of applicable updates and dissemination, are documented. ☐ Summaries of classroom observations conducted by the district include data on the delivery and quality of provided SDI and alignment with the services outlined in the IEP. ☐ Internal or external reports from audits, monitoring, or program reviews document the district's compliance with IDEA and other legal standards pertaining to SDI. ☐ Training artifacts and documentation show that professional learning on SDI, legal requirements, and best practices has been provided to a variety of staff, including administrators.

Key Practices	Success Criteria	Sources of Evidence
5.3.2: Monitoring SDI Implementation The district collects and analyzes data on student performance and progress—including frequency of service delivery, academic achievements, behavioral changes, students' progress toward goals, language proficiency progress (as applicable), and other indicators—that reflect the effectiveness of the SDI and related services.	☐ The district has a robust system for the ongoing collection of data on various aspects of student performance and progress, including information related to frequency of service delivery, academic achievements, behavioral changes, students' progress toward goals, language proficiency progress (as applicable), attendance, social-emotional development, and participation in extracurricular activities. ☐ The district effectively analyzes data to identify trends, patterns, and areas of need to assess the effectiveness of the SDI and related services provided to students with disabilities. This informs decisions about instructional strategies, interventions, and supports. ☐ IEPs and lesson internalization plans reflect an integrated approach to delivering SDI and related services. This involves reviewing how goals are addressed within the context of the classroom and how teachers are collaborating with service providers to implement strategies that support these goals in both general and special education settings. ☐ Service minutes are logged by providers, match student IEPs, and are verified by administrators. Issues with missed service are brought to the ARD committee to review and rectify as appropriate (e.g., compensatory services provided when necessary). ☐ The district has a structured observation and feedback process for all educators that includes providing action steps to enhance the delivery of SDI and related services.	☐ Reports compile and summarize the data collected on student performance and progress, highlight trends, and allow for the assessment of the effectiveness of SDI and related services. ☐ Documentation is maintained for any changes that are made to instructional practices, interventions, or support strategies based on data analysis, such as revisions to IEPs, the adoption of new instructional methods or materials, or the implementation of targeted behavioral interventions. ☐ Service delivery reports, IEP, and/or lesson internalization plans show examples of how special education and related services have been integrated into educational settings, including general education environments. ☐ Survey or interview results from general and special education teachers and related service providers agree that services are being meaningfully incorporated into the daily educational experiences of students and report effective collaboration between educators. ☐ Service log reviews match student schedule of services and documentation of ARD committee discussions when services are missed. ☐ Observation and feedback (i.e., coaching logs) are provided with evidence that educators receive specific action steps designed to enhance the provision of SDI and related services.

Key Practices	Success Criteria	Sources of Evidence
5.3.3: Resource Allocation The district monitors the allocation of resources, including instructional materials, technology, and personnel, to ensure that they are adequate and effectively used to support the provision of related services and SDI.	☐ The district ensures that all necessary resources, such as high-quality instructional materials, supports for behavior and functional needs, technology, and personnel, are provided in sufficient quantity and quality to meet the diverse needs of students receiving SDI. ☐ Staff and family input is used as part of identifying resource needs and allocations. ☐ The district ensures that high-quality resources are not only available but also used effectively in classrooms and other learning environments, relevant to educational goals. This includes ensuring that technology is accessible and functional for students with disabilities and that personnel are appropriately trained to maximize impact on student learning (including allowing for general and special educator collaboration). ☐ The district has a system for the ongoing monitoring of resource allocation to ensure that resources continue to meet the evolving needs of students. Adjustments are made on the basis of this monitoring to address any gaps or inefficiencies in resource utilization. ☐ The district prioritizes allocation of resources in alignment with identified priorities and goals for special education.	☐ Documented inventory (e.g., purchase orders and delivery records or reports) and tracking of the allocation of high-quality instructional materials (including special education access to Tier 1 curriculum), resources to support behavior and functional needs, technology, and personnel across the district demonstrate equitable student and teacher access to necessary materials and supports. ☐ Artifacts demonstrate that results of staff and family needs assessments, classroom material audits, and other documented methods are used to identify gaps or needs in current resources. ☐ Records and data support effective use of resources such as logins and minutes for technology-based platforms, classroom observation data (e.g., are instructional or support materials being used as designed?), or staff support logs (e.g., do campuses and teachers have equal access to specialists and coaches?). ☐ Survey or other qualitative feedback from administrators and teachers regarding access to and use of resources is collected and reviewed to continuously improve resource use. ☐ Budget reports and financial statements demonstrate that funds are directed toward district's identified priority areas and goals.

Key Practices	Success Criteria	Sources of Evidence
5.3.4: IEP Review The district conducts thorough reviews of IEPs and evaluates the specially designed instruction (SDI) and related services provided to assess the quality and appropriateness of the services in relation to students' needs.	☐ The district establishes a procedure and regular schedule, at least annually, to engage in a randomized, adequate representative sample of IEP reviews. ☐ SDI and related services align to student needs and support academic and functional performance (i.e., clear connections between present levels, baseline data, goals, and services). ☐ SDI and related services are integrated within general education and special education instruction to the extent appropriate. ☐ For EB students, related services are delivered in each student's primary language, as applicable.	☐ Calendars and documented procedures outline the processes for random selection and IEP review. ☐ Documentation from randomly sampled IEP reviews demonstrates how specially designed instruction and related services are tailored to the specific needs of each student, with clear connections between the services provided and the educational goals outlined in the IEP. ☐ Classroom observations and data such as service logs and staff and student schedules are consistent with the services outlined in students' IEPs, demonstrating appropriate provision of services.

Essential Action 5.4: Behavioral Services, Intervention Plans, and Discipline

The district ensures that behavioral services and behavior intervention plans (BIPs) are implemented with fidelity according to students' individually identified needs and that student discipline-related actions follow procedural safeguards.

Key Practices	Success Criteria	Sources of Evidence
5.4.1: High-Quality, Compliant Behavior Intervention Plans (BIPs) The district ensures that the development and implementation of BIPs are not only compliant, but reflective of current best practices for supporting student behavior.	☐ The district sets expectations and provides training and guidance specific to who, when, and how to complete Functional Behavioral Assessments (FBAs) as part of developing high-quality BIPs. ☐ The district's processes, procedures, guidance, and training for BIP development and implementation provide a clear set of expectations for not only compliant but meaningful and measurable plans to improve student behavior. ☐ The district facilitates collaboration between educators, behavioral specialists, and mental health professionals to develop and implement effective behavioral intervention strategies. ☐ The district ensures that a student's BIP is reviewed, and any necessary training is conducted with the student's teachers, service providers, and staff who work with the student, including other school staff who may need to be aware of or implement the BIP (e.g., cafeteria monitors, bus drivers, special area teachers, campus administrators).	☐ Documents outline the district's policies, procedures, guidance, and training related to FBAs and their importance to developing BIPs. ☐ District guidance, policies, procedures, and training artifacts document expectations that follow legal requirements and best practices. ☐ Reports from internal or external audits or compliance reviews related to BIPs demonstrate the district's adherence to legal standards and guidance (e.g., BIP quality reviews). ☐ Artifacts such as collaboration meeting schedules and notes and specialist consultation logs document multidisciplinary participation in BIP development, implementation, and reviews. ☐ Documentation (e.g., staff surveys, signatures) shows that district staff received the BIP, understand how to implement it, and know who to contact if they have questions.

Key Practices	Success Criteria	Sources of Evidence
5.4.2: BIP Review and Monitoring The district conducts thorough reviews of BIPs to ensure that they are tailored to the individual needs of students and are implemented with fidelity.	☐ The district ensures that BIPs are reviewed annually by ARD committees (including parents) or more frequently and as required by law to address changes in circumstances that may impact student behavior. ☐ The district ensures that BIPs are based on functional behavioral assessments and conducted by properly trained professionals with relevant direct and indirect data regarding the individual student's needs. ☐ The plans are developed with specific behavior goals and strategies tailored to support each student's success. ☐ The district employs a systematic, data-driven approach to monitor the fidelity of BIP implementation across schools, including collecting quantitative and qualitative data on how BIPs are executed and whether they are implemented as designed. ☐ The district reviews student data to determine the efficacy of BIPs at improving student behavior. ☐ The district implements structured mechanisms for receiving and using feedback on the effectiveness of behavioral services and interventions, including processes for collecting feedback from staff, service providers, students, and families, as well as using this feedback to inform continuous improvement of services.	☐ Detailed records of BIP reviews demonstrate high-quality function-based plans. ☐ Parent or guardian involvement is documented as part of ARD committee meeting participation and deliberation notes. ☐ Evidence such as artifact reviews, regular attendance in behavior-oriented professional learning, and survey results indicate that staff understand expectations for when and how to conduct an FBA and develop a BIP. ☐ Monitoring and evaluation reports track the implementation fidelity and effectiveness of BIPs, including data on student progress, feedback from implementers, and any adjustments made to the plans. ☐ Detailed logs and documentation of BIP implementation include notes on the delivery of interventions, adjustments made, and contextual factors affecting implementation. ☐ Progress monitoring reports provide data on student progress and behavioral outcomes in relation to BIPs. These reports should show trends across time and highlight areas in which adjustments are needed. ☐ Reports detail the feedback mechanisms in place, along with summaries of the feedback received and how the feedback was used to adjust behavioral services and interventions.

Key Practices	Success Criteria	Sources of Evidence
5.4.3: Disproportionality in Discipline The district regularly monitors data for disproportionality of disciplinary removals across groups of students and implements targeted strategies to address any identified instances of disproportionality.	☐ The district systematically and regularly reviews disciplinary data to identify any patterns of disproportionality in disciplinary actions, such as suspensions or expulsions, across different groups of students (e.g., by race, language, ethnicity, disability status, gender). ☐ Upon identifying instances of disproportionality, the district promptly implements evidence-based, targeted strategies (e.g., use of tiered prevention and intervention models) aimed at addressing and reducing these disparities. These strategies include interventions at the student, classroom, school, and district levels that are tailored to the specific needs and contexts in which disproportionality has been identified. ☐ If significant disproportionality for three years in a row is identified, the district must: ○ Review (and if appropriate) revise policies, procedures, and practices; ○ Reserve the maximum amount of IDEA B funds (15%) to provide comprehensive coordinated early intervening services (CCEIS; and ○ Report publicly on the revision of policies, procedures, and practices. ☐ Across time, the district demonstrates a measurable reduction in instances of disproportionality (or maintains status when disproportionality is not identified) in student placements.	☐ Disciplinary data reports analyze disciplinary actions, disaggregated by subgroups, and report trends across time for evidence of disproportionality. ☐ Records, plans, or reports document efforts to mitigate disproportionality and the extent to which those efforts impacted progress in reducing the disparate data. ☐ If three years of significant disproportionality was identified, records of policy review and revision to include legal framework assurance, publicly reported communication (e.g., website, school board announcement) and completed TEA Significant Disproportionality and CCEIS survey demonstrate compliance with required actions. ☐ Comparative data shows a decrease (or maintenance when disproportionality is not identified) in rates of disproportionality before and after the implementation of targeted strategies, as evidenced by more equitable distribution of students across educational settings.

Key Practices	Success Criteria	Sources of Evidence
5.4.4: Manifestation Determination Review (MDR) The district ensures that all aspects of the MDR process are clearly understood by staff and conducted in compliance with IDEA and state laws and regulations.	☐ The district ensures that ARD committee members conducting an MDR are trained to review all relevant data (e.g., IEP, evaluations, behavior plans, service logs, observations, parent information) and engage in the process to determine if a student's behavior is a manifestation of the disability.[13] ☐ The district communicates clear guidance on district processes including tracking disciplinary removals and legal requirements on when and how to conduct MDRs to all relevant staff, including specific information for campus administrators. ☐ The district regularly reviews documentation from MDR meetings to identify areas for continuous improvement and needed support for staff.	☐ Training artifacts document regular training and support provided to staff involved in MDRs (e.g., presentations, sign-in sheets, supporting resources and consultation support for teams). ☐ District guidance and procedures are documented, with evidence of dissemination to staff, including campus administrators. ☐ Evidence demonstrates staff understanding of MDR processes and procedures (e.g., survey results, file reviews of MDR documentation and notes). ☐ Documentation of MDR process includes parental notification of meetings, parent attendance, and completion within the required timeframe. ☐ Guidance or training artifacts are provided on tracking days of removal and necessary actions for when a change of placement takes place.

[13] 34CFR 300.530 (e) requires that the behavior must be determined to be a manifestation of the disability if the conduct in question was caused by, or had a direct and substantial relationship to, the child's disability; or if the conduct in question was the direct result of the district's failure to implement the IEP.

Essential Action 5.5: Transition Planning and Services

The district ensures that secondary transition services are specified in the IEP and implemented with fidelity according to students' individually identified needs.

Key Practices	Success Criteria	Sources of Evidence
5.5.1: High-Quality and Compliant Transition Services The district ensures that the development and delivery of secondary transition services are not only compliant, but reflective of current best practices for supporting meaningful student outcomes.	☐ The district ensures that secondary transition services are in compliance with all regulations for transition planning, assessment, service delivery, and Transition and Employment Designees (TEDs) as outlined by federal and state requirements.[14] ☐ The district provides training and support to ensure that postsecondary transition plans within the IEPs are personalized, based on a variety of formal and informal transition assessments, and fully align with the individual needs, strengths, preferences, and interests of students. ☐ The district has a process to regularly verify that IEPs include appropriate and measurable postsecondary goals related to education/training; employment; and, when appropriate, independent living. IEPs also specify the transition services and supports necessary to achieve these goals. ☐ The district provides multiple opportunities for meaningful family participation to ensure that transition planning includes input from families.	☐ Reports from internal or external audits or program reviews include evaluation of the district's transition services for compliance with legal requirements. ☐ Transcripts and/or training logs document TED completion of required training. ☐ District website includes a link to the Texas Transition and Employment Guide. ☐ District professional learning artifacts such as training materials, attendance records, and coaching and mentoring logs demonstrate that transition training and support is provided to district staff. ☐ Outcome data from randomized student IEP reviews demonstrate that transition plans align with students' needs and aspirations, include appropriate measurable goals, and include support for reaching those goals. ☐ Results of State Performance Plan Indicator 13 data collection and reporting demonstrate that the district meets targets. ☐ Artifacts (e.g., student surveys, anecdotal records of community outreach and experiences, and teacher and family input) demonstrate that postsecondary goals and relevant information from the family are included in the IEP.

[14] See The Texas Legal Framework Transition Services for a review of Federal and State requirements.

Key Practices	Success Criteria	Sources of Evidence
5.5.2: Monitoring Transition Plan Implementation The district collects and analyzes data on the implementation of postsecondary transition plans, including students' progress toward goals, the frequency of service delivery, and student outcomes, including postsecondary education enrollment, employment rates, and independent living status.	☐ The district provides guidance and expectations to ensure that a systematic and effective method for tracking students' progress toward their postsecondary goals, including reconvening when necessary, is implemented. ☐ The district tracks relevant postschool outcomes for students as a result of implementing transition plans. This tracking includes metrics such as postsecondary education enrollment, employment rates in integrated settings, and the achievement of independent living skills or status, when applicable. ☐ The district ensures that resources allocated for transition services, including materials, technology, and trained personnel (e.g., Transition and Employment Designee [TED) are sufficient to meet the needs of students preparing for postsecondary life.	☐ District guidance and expectations for monitoring student progress toward postsecondary goals are developed and disseminated ☐ Evidence (e.g., ARD notices, staff and family report) show that ARD committees reconvene and make adjustments when data indicate that students are not progressing on their goals as expected. ☐ Evidence such as reports, meeting agendas, and notes demonstrate that data on student outcomes (e.g., education, employment, and independent living) beyond exit from the secondary education, including local, regional, and statewide reports for State Performance Plan Indicator 14 and/or locally developed alumni tracking systems are compiled, evaluated, and discussed. ☐ Staff feedback indicates adequate resources and time to support transition planning.

Key Practices	Success Criteria	Sources of Evidence
5.5.3: Collaborative Partnerships The district establishes partnerships with community agencies, vocational rehabilitation services, higher education institutions, and employers to provide comprehensive support for students' transitions.	☐ The district ensures that a properly trained Transition and Employment Designee (TED is designated to ensure communication and collaboration with students, families, staff, and appropriate agencies. ☐ The district has established partnerships with a range of external organizations, including community agencies, vocational rehabilitation services, higher education institutions, and employers. These partnerships aim to expand the resources and opportunities available to support students' transitions. ☐ The district actively coordinates with partner organizations to ensure that services are integrated, with a seamless support system for students.	☐ Records document consistent appointment of a TED who has received proper training for the role. ☐ Documentation of partnerships with external organizations, such as written agreements and local procedures, clearly outlines roles, responsibilities, and expectations of each party in support of transition planning. ☐ ARD committee meeting notices provide evidence of appropriate agency involvement, including consent from the parent or adult student prior to sending the invitation.

SPD Key Practice Self-Assessment Rating Scale

The Special Education Performance Diagnostic (SPD) framework, along with this rating scale, is used to self-assess the extent to which a district is implementing a key practice. District teams collaboratively examine sources of evidence and success criteria to determine a key practice rating according to the following scale:

1. **Planning or Launching Practice:** This practice is at a foundational or beginning stage. Initial compliance for a required practice has been established, such as embedding within district policies, but success criteria that would solidify or enhance the quality of implementation are missing. Some schools may employ the practice with high quality on their own, but there is recognition of the need for more intentional effort by the district to employ or enhance the key practice. For practices in this category, the focus is on discussion or planning for further implementation of the practice.

   Rating Guidance: Sources of evidence demonstrate that most success criteria beyond those required for compliance are not in place across the district. Implementation is likely informal, isolated, or misaligned to the full intent of the practice. A score of 1 indicates a need for further planning, development (i.e., system design), and capacity building.[15]

2. **Emerging Practice:** The key practice is in place, but consistent application of all success criteria with fidelity is lacking. Further development, supports, or resources are needed to ensure consistent and effective implementation. For success criteria in this practice, the focus is on district leadership strengthening the factors that support systemic implementation, such as building buy-in, providing training and coaching, providing feedback and reinforcement, and addressing barriers. There is notable room for improved quality and sustainability (e.g., processes and capacity for routine, efficient execution).

   Rating Guidance: Sources of evidence demonstrate that half or more of the success criteria listed within the key practice are not in place across the district. System design elements (i.e., district structures, expectations) may be present, but consistent implementation or execution of the practice is not yet consistent or fully in place across the district.

[15] If a district determines that required compliance components are not in place and the practice does not meet the Planning or Launching level, the district should contact the Division of Review and Support for guidance and technical assistance.

3. **Expanding or Strengthening Practice:** There is an expanded level of implementation of the key practice that is evident across the district. Additional effort is needed to ensure the practice is implemented consistently, with full fidelity, or reflective of all criteria of the practice. The key practice does not yet meet the full need or currently lacks the quality or sustainability that is expected at full systemic implementation. For practices in this category, the focus is on refinement, ongoing quality improvement strategies, and establishing structures to support sustainable success.

   Rating Guidance: Sources of evidence demonstrate that most (i.e., more than half) success criteria within the key practice are in place across the district, though some variability in implementation may still exist. Districts should have a range of documentation, observations, or feedback demonstrating system-wide implementation of the key practice.

4. **Sustaining Practice:** The key practice is implemented consistently at the highest level of implementation. The key practice is demonstrated through sources of evidence and results in desired outcomes. The implementation of this practice signifies a robust approach to responding to evolving needs. Systems in place ensure continuous and effective operation even with changes in district needs. The focus is on ensuring the key practice is sustained and ongoing quality and outcomes are monitored for continuous improvement.

   Rating Guidance: Sources of evidence demonstrate that all success criteria within the key practice are implemented with fidelity across the district and evident at scale. This rating reflects sustained, system-wide effectiveness resulting in desired outcomes.

General Rating Guidance and Considerations:

- The rating process is designed to be collaborative, requiring consensus among team members. Ground your discussions in data, evidence, and success criteria to reach consensus on your rating. When debating between two ratings without consensus, defaulting to the lower rating is recommended. This maintains credibility and ensures ratings are grounded in solid evidence.
- Success criteria should only be indicated as present when there is supporting evidence. The SPD framework lists a variety of sources of evidence for each key practice that aligns with the success criteria. In addition to this listed evidence, district teams may also consider other local artifacts, data, and information as part of determining the presence or absence of success criteria and assigning a key practice rating.
- When evidence for success criteria is ambiguous or lacking, you may need to use additional district or SPD tools to collect more data or information. For example, the *SPD Question Bank* helps gather feedback from various groups, including staff and families.

- When gathering additional sources of evidence, consider the context in which the work is being implemented. This includes the size of the district, the total student population served, and the number of campuses supported. Larger districts or those serving more students and campuses may require more complex coordination with stakeholders and a greater reliance on sampling across campuses versus gathering evidence from all. As a result, sources of evidence may look different based on district context.
- Before finalizing a key practice rating, consider the quantity and quality of evidence, the success criteria met, and if the practice in your district is in a design or system implementation stage. A system design stage is when the district is intentionally planning, building, or has built the structures, expectations, and tools needed to support effective practice across campuses. Key practices in this stage likely warrant a rating of 1 when they are still in planning or development and a rating of 2 when they have been built (i.e., exist on paper) but are not yet consistently implemented. System implementation moves beyond intent or documentation to consistent and effective execution of the practice. In this stage, district and campus staff are using the designed system as intended, and student outcomes are being impacted, which generally warrants a rating of 3 or 4.