

Autism in Tennessee: Part 2 - Education

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Introduction

The number of children diagnosed with autism spectrum disorders (ASDs) has steadily increased over the last two decades. Because numerous government agencies provide services to children with autism, and to their families, this increase has led to public policy discussions at the federal, state, and local levels.¹ The federal Individuals with Disabilities Education Act (IDEA) classifies autism as a developmental disability, and therefore requires state education agencies (SEAs) and local education agencies (LEAs) to provide free and appropriate public education services to students with the disorder.² There are still significant issues regarding how to determine if a child has autism, the best approaches for educating students with autism, and, for the medical community, which research pathways to pursue to determine causes of the disorder.

Over the last decade, stakeholders and advocates of autism services have studied autism in Tennessee outside this report series. The Autism Services Proposal of 2002 is an interagency study of autism services in Tennessee conducted by approximately 60 stakeholders throughout the state. The proposal, released in December 2002, is the result of Senate Joint Resolution 567 of the 102nd General Assembly; it was the first comprehensive study of services for those with autism in Tennessee. This study is referenced frequently throughout the report. (See Appendix B for more information on the study and a brief history of autism research in Tennessee.)³

Report Scope and Objectives

This report focuses on public education services for students with autism; it is the second in a three-part series⁴ on public services for infants, children, and youth with autism in Tennessee. (See Appendix A:

Legislative Inquiry on Tennessee's Children with Autism.) The medical community classifies ASDs as pervasive developmental disorders, which include a complex and diverse range of diagnoses and characteristics. Specifically, these diagnoses include Asperger's syndrome, autistic disorder, and pervasive developmental disorder – not otherwise specified. Rarer and more extreme diagnoses on the spectrum of pervasive developmental disorders include childhood disintegrative disorder (CDD) and Rett syndrome.⁵ The needs of each child with an ASD vary; however, throughout this report, "autism" refers to any diagnosis within ASDs, unless otherwise indicated.

This report includes several terms that are commonly referred to by acronym. Appendix C contains a glossary of acronyms and other terms used in the report.

Methodology

The contents of this report are based on:

- A review of the major federal and state education laws concerning autism and disability services;
- A review of national and state-specific research on autism spectrum disorders;
- Interviews with staff from the Tennessee Department of Education (TDOE), Division of Special Education;
- Interviews with staff from Tennessee's University Centers of Excellence in Developmental Disabilities (the Vanderbilt Kennedy Center for Human Development and the Boling Center for Developmental Disabilities) and autism advocacy groups (the Autism Society of America and Easter Seals).

See Appendix D for a complete list of persons contacted.

Special Education and Autism

The majority of laws concerning educational services for those with autism cover all developmental disabilities.⁶ Since the 1970s, federal laws have required local and state governments to provide early intervention and related services for children and youth with all disabilities.⁷ The Individuals with Disabilities Education Act (IDEA) is the federal law requiring special education and early intervention services.⁸ Under IDEA, child age is a key factor for determining the governmental entity responsible for providing educational and early intervention services.⁹ Exhibit 1 describes the Tennessee entity responsible for services by age-eligibility and federal reference for Part B and C services.¹⁰

Early intervention services

Part C of IDEA allows children with autism and their families to receive early intervention and related services through statewide programs from birth until children reach age three.¹¹ The main objective of early intervention programs is to identify children with disabilities and their families, and provide them with customized guidance and support. Early

As this report was nearing publication, OREA learned that the Tennessee Department of Education reorganized administrative offices to reflect Race to the Top and Tennessee First to the Top goals. The former Division of Special Education is now housed within the Division of College and Career Readiness, and early intervention services within the Division of School Readiness and Early Learning.

Exhibit 1: IDEA Services by Statute, Age, and Tennessee Entity

	Early Intervention	Early Education	K-12 Education
Responsible State Entity	Tennessee Early Intervention System	Local Education Agency	Local Education Agency
IDEA Statute	Part C	Part B Section 619	Part B Section 611
Age of Child	Birth to 3	3 through 5	6 through 21

Source: OREA compilation of Tennessee laws, regulations, and reports.

intervention personnel use an Individualized Family Service Plan (IFSP) to identify the specific needs of the child and family, and create and implement an intervention strategy. Service coordinators also help families identify and access various community resources (e.g., legal aid, advocacy groups, and healthcare networks).¹²

Tennessee’s IDEA early intervention services are administered and monitored within the Department of Education’s Division of Special Education. The TDOE Division of Special Education provides early intervention services for infants and toddlers with autism from birth to the third birthday through a statewide program called the Tennessee Early Intervention System (TEIS).¹³

Under the 2004 revision and reauthorization of IDEA, rather than fully transition a child at age three to special education services, states may allow a child’s early intervention services to continue along with an educational component from age three until kindergarten. These extended early intervention plans are available only if the child is already receiving early intervention services and is eligible for special education; plans must include an educational component that covers basic preschool skills. This allows parents to continue receiving services like service coordination and home-based family supports that are guaranteed under IDEA early intervention, but may not be offered under special education.¹⁴

This is one of many policy initiatives designed to allow flexibility for state and family options in meeting IDEA compliance. As of 2007, at least eight states¹⁵ allow federal early intervention funding to provide services to children after age three. For example, Nebraska allows a child to receive Part C funding up to August 31 of the year the child turns three.¹⁶ New York allows children in early intervention programs who are eligible for special education to remain in early intervention for the remainder of the school year in which they reach age three.¹⁷ An option similar to these is not offered in Tennessee.

Transitioning from early intervention to special education services

As children and youth with autism progress through the IDEA process they experience major transitions into and/or out of services from birth through age 21. Transition points correspond to entrance into preschool, kindergarten, and adulthood.¹⁸ Ensuring smooth transitions is particularly important in the education process of children with autism; if support is not given throughout transitions, skills developed in earlier interventions may be lost and difficult to recover.¹⁹ IDEA includes a detailed administrative process to ensure early childhood transitions are as seamless as possible.²⁰

TEIS and LEAs are jointly responsible for providing eligible children with a smooth transition from early intervention to special education services.²¹ A transition conference including the child's parents, representatives from TEIS, the LEA, and others with information about the child's development must take place at least 90 days before a child's third birthday. According to TDOE's *Special Education Manual*, the purpose of the transition conference is to:²²

- discuss the child's current and potential future service providers with the family;
- identify and document an outlined plan as needed to receive these services; and
- ensure there is ample time to complete the outlined plan by the child's third birthday.

Exhibit 2 depicts a timeline flowchart of this transition period.

TEIS and the Office of Early Childhood Services are developing online training opportunities for LEA personnel and early intervention personnel directly involved in this transition period.²³ The Office of Early Childhood Services also provides written information to families through a transition brochure disseminated by TEIS.²⁴ The Division of Special Education provides education personnel with transition training at the Annual Special Education Conference. Additional training, technical assistance, and guidance are available for LEAs as needed. LEA officials are not required to attend specific trainings unless identified for noncompliance.²⁵

According to the Division's *2005-2010 State Performance Plan*:²⁶

[Past analyses of early childhood preschool data] point to the need for continued improvement of transition processes from the perspectives of early intervention programs, LEAs, and families. Collaboration of these three groups is often challenging because there are a variety of scenarios that may hinder transition processes when children turn three; however, Tennessee looks forward to the development of improvement activities, through its stakeholders, that will continue to address these challenges.

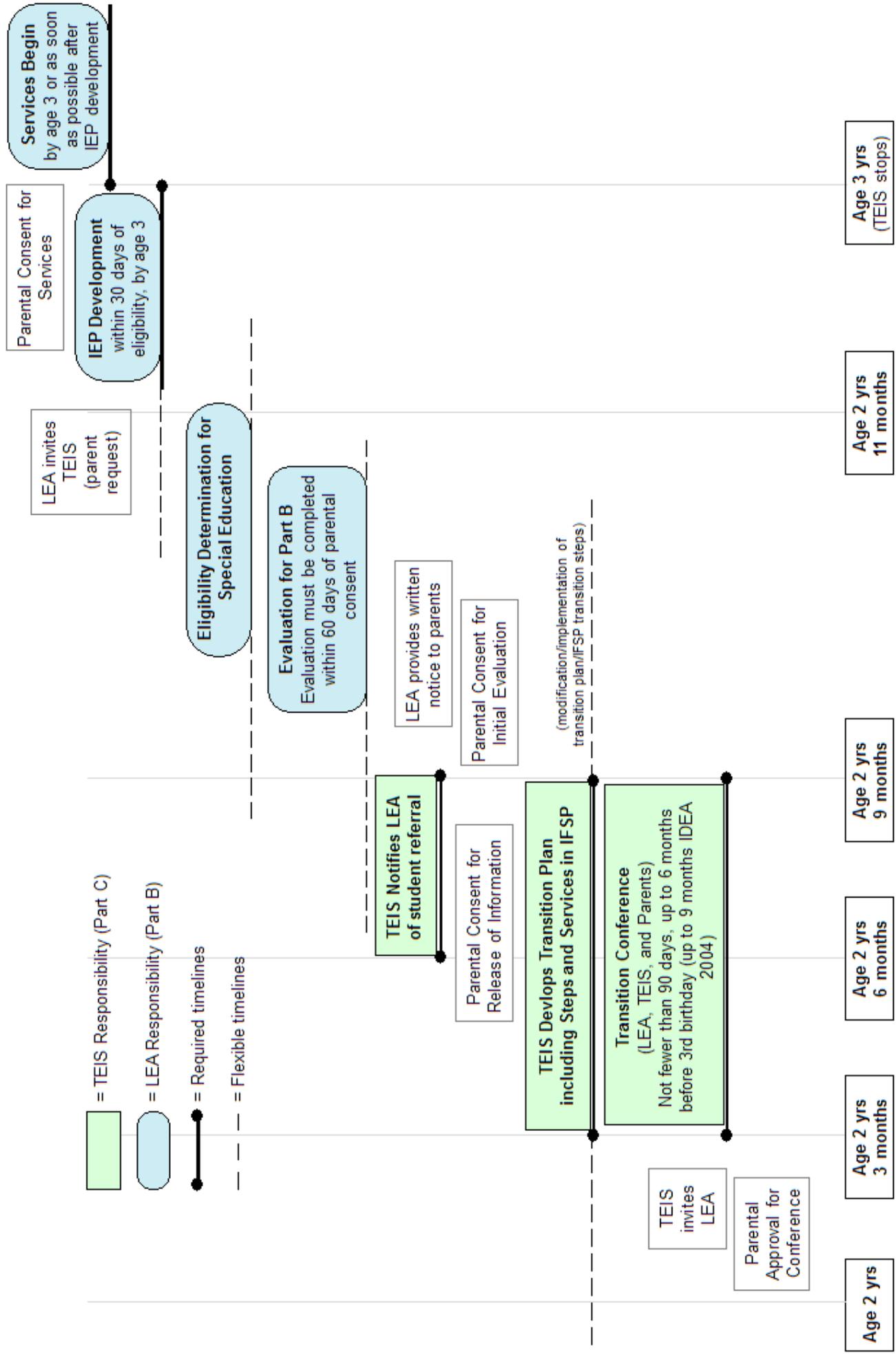
Early childhood transition (from early intervention to special education services) is often a challenge for children with autism and their parents for the following reasons:

A medical diagnosis of autism guarantees eligibility for early intervention but not for special education. Diagnosis of a developmental delay or identification of a specific diagnosis or condition makes a child eligible for services under the Tennessee Early Intervention System (TEIS). In contrast, eligibility for special education is a dual criteria process that includes a diagnosed disability and documented proof that the disability inhibits the child's ability to learn.²⁷ (See Exhibit 3.)

TDOE's Division of Special Education and the Autism Society of America (ASA) have also reported difficulty in obtaining an autism diagnosis from LEAs for Part B eligibility. The following are possible causes:

- *Parental or LEA hesitance:* Parents and LEAs may be wary of the effect the autism "label" may have on a child's future once it becomes part of a student educational record. Also, many physicians feel that autism diagnoses prior to age three may be unstable. Historically, there have been many false negatives, and some physicians are unwilling to diagnose a child with autism as this label can follow a child throughout life. Some advocates indicate that as a result children with autism are identified too late.²⁸

Exhibit 2: Transition from Early Intervention (Part C) to Special Education (Part B)



Sources: Tennessee Department of Education, *Special Education Manual*, 2008, pp. 7, 16-17; Tennessee Department of Education, *TEIS Operations Manual*, 2008, pp. 42-46; National Early Childhood Technical Assistance Center (NECTAC), *Early Childhood Transitions from Part C to Part B Timeline Requirements*, April 21, 2008.

- *Special education may be delivered through an alternative disability diagnosis:* Children with comorbid conditions, including autism, may not require an autism diagnosis to receive special education; they may instead receive services under such disability categories as Speech or Language Impairment, Developmental Delay, or Other Health Impairment.²⁹

According to TEIS officials, approximately 40 percent of children in Part C who were referred to Part B were found ineligible for services.³⁰ However, IDEA compliance monitoring data is not disaggregated by disability; thus data on the number of children with autism referred to Part B from Part C is not reported.

According to TEIS officials, early childhood transition can be a difficult process for children with autism, since a full autism diagnosis is not typically given until approximately age two.

Families of children with autism often enter TEIS at the period when children are being phased out of the program and into special education services. The Autism Services Proposal of 2002 reported that early childhood transition for children with autism can be abrupt and uncoordinated and that TEIS services are generally very brief.³¹

Early intervention services focus on the entire family and are provided in home-based settings, whereas special education services focus on the needs of the individual and are delivered in educational settings. Family-focused early intervention services, such as in-home interventions and healthcare coordination, end on the child’s third birthday as families transition into special education. Additionally, early intervention services are provided at the state level while special education services are provided locally. The differences in these systems often leave families dissatisfied with services.³²

Exhibit 3 is a comparison of early intervention and special education services and demonstrates the differences in eligibility, service provider, receiver, setting, and services provided.

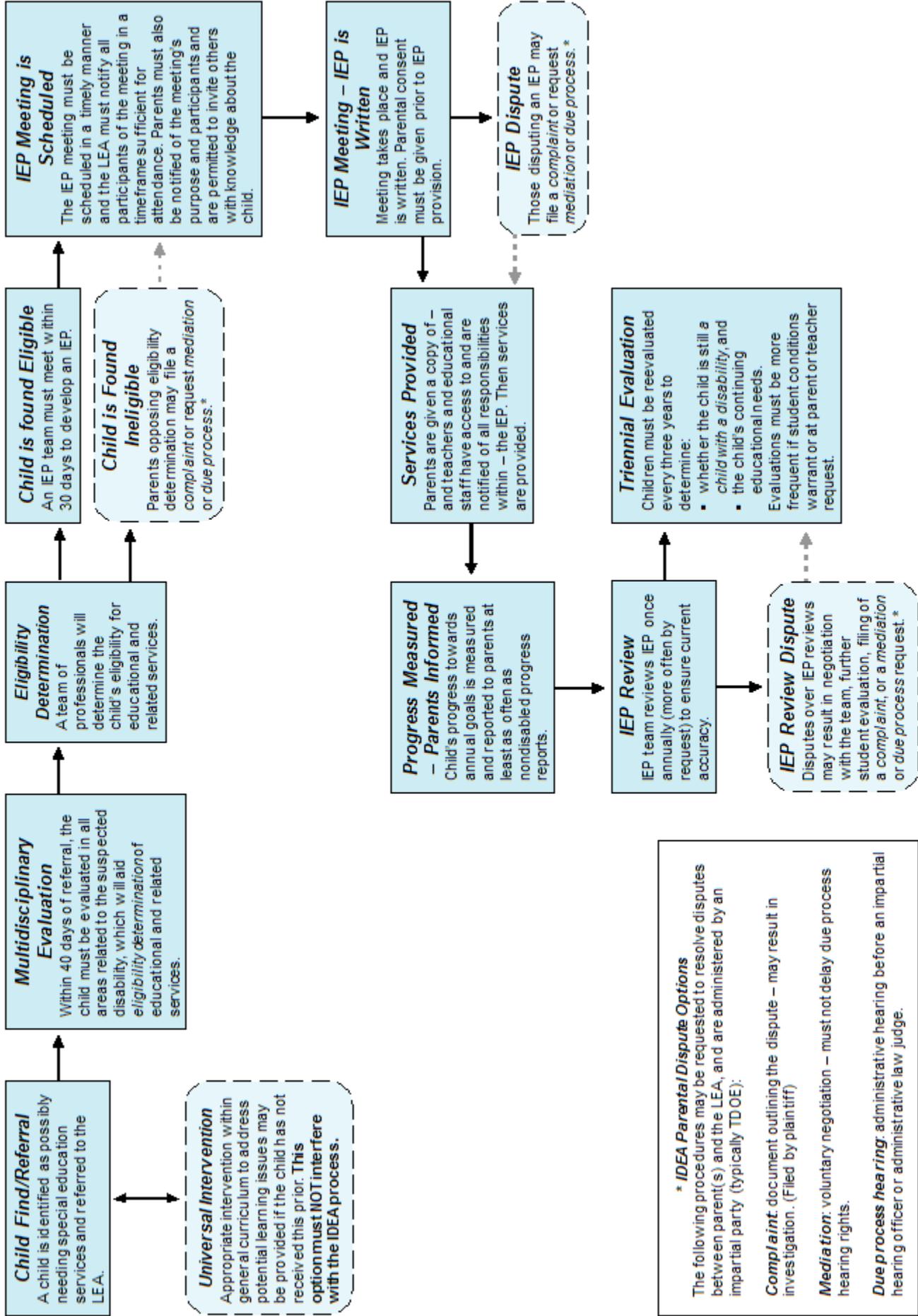
Special education from age three through 21
After a child is determined eligible for special education, services must begin at age three. Services are provided by the child’s LEA and monitored at the state level by the Division of Special Education in TDOE. IDEA requires public schools in every LEA to ensure that each diagnosed child receives free and appropriate public education interventions so that they receive an education as equal as possible to that of their typically developing

Exhibit 3: System Differences in Early Intervention and Special Education Services

	Early Intervention	Special Education Services
Service Provider	Tennessee Early Intervention System <i>Provided at the state level</i>	Local Education Agencies (with supervision and guidance from the Division of Special Education) <i>Provided at the local level</i>
Eligibility Determination	Birth to age 3 <ul style="list-style-type: none"> ▪ presence of a developmental delay, or a specific diagnosis or condition 	Ages 3 through 21 <ul style="list-style-type: none"> ▪ diagnosed disability and ▪ documented proof that the disability impedes the child’s ability to learn, thus requiring special education services
Receiver of Services	Focused on the entire family: Individual Family Support Plan (IFSP)	Focused on the child: Free and Appropriate Public Education (FAPE) through an Individualized Education Program (IEP)
Service Delivery Setting	Home or community-based settings	Educational environments

Sources: Tennessee Early Intervention System, “Parents and Community: Eligibility,” <http://www.tennessee.gov/education/teis/eligibility.shtml> (accessed May 27, 2010); Tennessee Department of Education, *Special Education Manual*, 2008, pp. 7, 36-37.

Exhibit 4: A Guide to the IDEA Special Education Process



Source: Office of Special Education and Rehabilitative Services, U. S. Department of Education, *A Guide to the Individualized Education Program*, July 2000, pp. 2-4, <http://ed.gov/parents/needs/speced/iepguide/iepguide.pdf>.

peers. LEAs must also promote the awareness of special education services among the general public and document efforts to locate and identify children eligible for special education through a process called “Child Find.”³³

Exhibit 4 depicts a flowchart of the K-12 special education process as outlined in IDEA.

Special education law includes the following requirements for states and school districts in providing special education services:

- **Develop an Individualized Education Program (IEP) with goals and milestones tailored to fit the unique specific learning needs of the student. The IEP must be created by a multidisciplinary team that is organized by the LEA.**³⁴ The IEP process includes numerous steps such as initial evaluation, eligibility determination, and IEP development. A student’s IEP must specifically address these factors:³⁵
 - o parental concerns and priorities;
 - o the best methods for enabling the student to learn curriculum similar to and in a time frame similar to that of children without disabilities;
 - o the most appropriate educational setting (e.g., how much time the student should spend in the classroom versus the amount of one-on-one time with a teacher); and
 - o the total school environment, including access to educational facilities, which may include transportation services.

Although federal and state laws provide a detailed process for developing the IEP, neither requires IEP team members to have expertise in the specific diagnosed disability of the child. The Autism Services Proposal of 2002 recommends that multidisciplinary IEP teams should include members with autism-specific expertise.³⁶ (See Appendix E for members of an IEP team.)

- **Place students with disabilities in the general classroom to the fullest possible extent.** Students with disabilities must be placed in educational settings that allow them to be educated with their typically developing peers as often as

possible, but only when appropriate to an individual student’s specific learning needs.³⁷ The practice of placing students receiving special education within a regular education classroom is referred to in federal law as *least restrictive environment* (LRE), but is sometimes inaccurately referred to as *inclusion*.³⁸ However, federal law does not define inclusion.³⁹

Identifying the most appropriate educational setting for students in special education is an ongoing struggle for the autism and education communities.⁴⁰ Development of social and communication skills are keystones of autism education. When appropriate, IEP teams should help develop the behavioral and social skills of children with autism by placing them in regular education classrooms with their non-special education peers.⁴¹ However, educators must take great care to ensure that the student placed in the regular classroom realizes social benefits and continues to make educational progress. The Autism Services Proposal of 2002 notes that children with autism can sometimes be included in the regular education classroom at the cost of maintaining student engagement in specific education programs, explaining:

Some children are put in “inclusive” settings and then are given services that appear to be more like typical “childcare” rather than active autism-specific curriculum. Thus, an aide may be involved all day with a child to ensure his/her safety, but the child is not adequately stimulated and thus is not progressing.⁴²

The IEP Team may place a student in an alternative setting (e.g., residential facility or private school) if this is needed to meet the student’s needs. The IEP team continues to monitor the student’s educational progress within the alternative placement and must periodically reevaluate whether the alternative placement remains the best setting to meet the student’s needs.

The rate of inclusion (the percent of time students receiving special education spend in a classroom

with typically developing peers) is annually monitored by TDOE as required by federal law.⁴³ According to the Division of Special Education, “Each student with [autism] is different. Students with [autism] are included whenever they are able to be included, with the supports that they need in order to succeed in the general [education] setting.”⁴⁴

- **Plan for and prepare each student to transition out of the K-12 education system and into adulthood; this period is referred to as secondary transition.**⁴⁵ As is the case with IEPs in general, there is no standard secondary transition plan, and each plan must reflect the unique needs and circumstances of the individual student. An effective transition plan begins with IEP team members addressing such questions as: “Where will this individual be upon turning 21? What skills will this individual have? What contexts will be the best for him/her to apply these skills?”⁴⁶ Several federal requirements and recommendations apply to the development of a secondary transition plan. One requirement is that secondary transition plans include both educational and vocational goals. For example, one student’s goal might be to attend a community college following high school graduation while another student’s goal might be to transition directly into the workforce. Transition plans also often include development of independent living and social skills.⁴⁷ Tennessee requires special education plans to include secondary transition components by the student’s 14th birthday.⁴⁸

Federal law and state regulation strongly encourage student participation in the secondary transition planning process, when appropriate. Exposure to and participation in the planning process can help students develop the decision-making skills and personal responsibility characteristics necessary for independent daily life. Secondary transition plans also incorporate goals for social and community involvement and independent adult living.⁴⁹

Secondary transition plans must reflect the student’s needs and interests. The Division of

Special Education’s manual states:

Capturing student interests and aspirations and developing a unified plan for working toward an achievable academic/vocational goal can dramatically improve the future for students who have special needs and can make school time more productive and enjoyable for everyone involved.⁵⁰

According to the National Longitudinal Transition Study-2 (NLTS2)—an ongoing 10-year study commissioned in 2001 by the U.S. Department of Education’s Institute of Education Sciences to study youth with disabilities based on surveys of parents and school staff—the secondary transition plan goals for students with autism were:⁵¹

1. *more likely* to emphasize supported or sheltered employment⁵² provided through government- or community-funded programs over competitive employment; and
2. *less likely* to include postsecondary education plans, which likely indicates students’ plans placed a greater emphasis on functional independent living and social skills.

The NLTS2 also examined parental approval of and student participation in the secondary transition process. These findings showed that parents of children with autism are less satisfied with the transition process than are parents of children with other disabilities. Fewer than three in 10 parents of students with autism described transition planning as very useful.⁵³

Students with autism showed low levels of student participation in the process. The study showed that a high percentage of students do not play a major role in transition plan meetings—45 percent of students with autism are “simply present but provide little input” in transition meetings, while three percent take leadership roles. Those with autism were also the least likely to display a moderate level of participation in the IEP and transition development process.⁵⁴

State education agencies annually report some secondary transition plan data through APRs to the U.S. Office of Special Education Programs; however, this data is not disaggregated by disability. In May 2007, TDOE reported data on 733 students in special education who exited Tennessee high schools. The data was collected through phone surveys of students who exited (including graduates and dropouts) secondary education in school systems selected by TDOE to represent a statewide average. The 2007 secondary transition data estimates that:⁵⁵

- o 302 (41.2 percent) students in special education who exited were enrolled in postsecondary education;
- o 526 (71.8 percent) were employed; and
- o 114 (15.6 percent) were employed and enrolled in postsecondary education.

TDOE secondary transition data counts some students more than once in categories (i.e., enrolled, employed, or enrolled *and* employed), and surveys a relatively small portion (733 in 2007) compared to the estimated 8,000 annually exiting students. TDOE plans to improve the process and obtain more accurate results by contracting out the survey in the 2009-10 school year. Improvements will include a mailed survey sent to approximately 2,250 of the estimated 8,000 annually exiting students in approximately 30 school systems.⁵⁶

Federal law requires interagency collaboration at the state and local levels to provide students with evaluation, training, and job placement services. Interagency collaboration for transition in Tennessee includes TDOE, LEAs, and the Division of Rehabilitation Services (DRS) within the Department of Human Services. Examples of secondary transition services available in Tennessee include vocational assessment, assistive technology evaluation, postsecondary training, and job placement. Postsecondary training might include on-the-job training, training at the Tennessee Rehabilitation Center in Smyrna, or training at the vocational/technical or college/university levels.⁵⁷

Approaches to Educating Children with Autism

Research indicates the most effective way to manage autism is through early identification followed by coordinated and comprehensive interventions that address a child's educational, behavioral, and medical needs. The U.S.

Government Accountability Office reports "the general agreement is that early diagnosis followed by appropriate treatment can improve outcomes for later years for most children with [autism]."⁵⁸

Educational services are a critically important element in any autism treatment approach, but education professionals are still learning how to work with autism. The Tennessee Autism Services Proposal of 2002 identified the education system as vitally important for children with autism:

Because children with [autism] need intensive, consistent, behaviorally-based learning, the educational system bears the primary responsibility for the developmental progress of children with [autism].⁵⁹

Officials at Vanderbilt's Treatment and Research Institute for Autism Spectrum Disorders (TRIAD) indicate that a multisystemic approach—including educational, behavioral and medical treatment—is most effective in helping those with autism reach their potential.⁶⁰ When appropriately and effectively implemented, special education services accelerate students' social and cognitive development and ultimately prepare them for independent adulthood.⁶¹

In comparison to other special education disability reporting categories, autism is a relatively new and extremely broad diagnosis. An LEA's capacity to provide special education services for a child with autism varies according to the unique needs of the child and educators' experience with autism. OREA analysis of K-12 education services for students with autism suggests that:

- IEPs and methodologies used for autism special education, though often innovative, are extremely complex and can be difficult for teachers to implement;
- Determining and providing appropriate educational setting(s) and the level of inclusion

in the general classroom are complex issues and vary with each individual; and

- Student transition into adulthood is typically difficult for children with autism.

Educational plans for students with autism require complex methodologies, which address development of various student skills.

The Autism Services Proposal of 2002 recommends educational plans for children with autism should address multiple areas of development when appropriate, including development in the areas of social, communication, motor, behavioral, adaptive skills, and cognitive development.⁶² Likewise, TDOE officials indicate:⁶³

The two most important objectives [for children with autism] are Social Skills Instruction and Communication. Parent Training, Attending Skills, Behavior and Adaptive Skills are other important objectives and the need for each should be determined on a child by child basis with the decisions made by the IEP Team.

The Autism Services Proposal of 2002 recommends an incorporation of several “autism-specific services” when appropriate to address developmental areas. These include:

- behavioral intervention;⁶⁴
- speech and language therapy;
- occupational therapy;
- consistent use of data collection and monitoring.⁶⁵

According to the 2001 National Research Council report, *Educating Children with Autism*, the general purpose of educational services for children with autism is to provide students with exposure to the regular curriculum, while also providing supports in the areas of socialization, communication, and behavior. Educators should focus simultaneously on students’ academic progress and the development of skills needed for daily living (e.g., the ability to socialize and effectively communicate with others).⁶⁶

Although there is no standard approach for educating children with autism, experts in the medical and education fields are working to develop evidence-based best practices. The National Autism Center (NAC)—a nonprofit organization for evidence-based practices in the field—

began the National Standards Project in 2005 to determine effective evidence-based practices for treating autism. In 2009, the project released the *National Standards Report*, which identifies a number of evidence-based strategies studied by at least 50 nationally recognized experts in the autism field (e.g., scholars, researchers, and others working in the study of autism treatments). The report aims to clarify the scientific efficiency of numerous strategies for treating autism and is expected by the NAC to aid parents and educators in the IEP decision-making process.⁶⁷

Federal oversight and state accountability

The federal government requires state education agencies, such as the TDOE, to monitor special education and early intervention services for compliance with federal laws and regulations. To meet federal requirements, the TDOE submits an Annual Performance Report (APR), to the U.S. Office of Special Education Programs (OSEP), which shows how the state and its LEAs have performed over the past year relative to specific performance indicators. Tennessee’s APRs can be accessed by the general public online. Additionally, states develop State Performance Plans (SPP) for OSEP, which outline short- and long-term goals for achieving excellence in IDEA services.

States are not required by federal law to disaggregate most APR indicators by disability.⁶⁸

The lack of disaggregated data means policymakers are unable to use monitoring data to analyze autism-specific services or special education benchmarks, such as secondary transition plans.

LEAs disaggregate data in specific disability categories, including autism, but only in cases regarding disproportionate representation of racial or ethnic groups. To ensure proper assessment and identification of children with autism, IDEA requires states to annually monitor LEAs for compliance with assessment and diagnostic practices. Once an LEA is identified as having disproportionate representation, the TDOE investigates to ensure compliance with disability identification standards set by state and federal guidelines. The 2007-08 APR reports that no LEAs were identified with disproportionate representation because of improper identification of autism.⁶⁹

Developing data disaggregated by disabilities in other APR categories may aid policymakers to:

- Identify and analyze gaps in areas of special education services reported in the APR and SPP, including transitions (e.g., early childhood and secondary transitions, graduation and dropout rates, state assessments, and parental involvement).
- Develop data on LEA capacity to provide services for students with autism and other disabilities.
- Identify geographic areas in need of workforce development on skills needed to educate children with autism.⁷⁰

Options for Parents Dissatisfied with Special Education Services

Different philosophies about how to most effectively educate children with autism have emerged over the last decade. Differences typically center on the optimum level of inclusion in the general education classroom and the best method or approach to educate students with autism.⁷¹

Teachers frequently lack the capacity to provide the complex approaches and therapies often used to work with autism.⁷² Also, parents of children with autism, perhaps seeking any promising approach, may recommend a method that is not appropriate. According to the Southern Legislative Conference of the Council of State Governments, “Those who approach schools seeking specific therapies with which the school has limited or no experience, or in which they have no confidence, is a source of conflict and frustration on the part of both parties.”⁷³

If parents wish to contest LEA compliance with the federal special education law, IDEA outlines procedures administered through the state’s Division of Special Education:⁷⁴

- *Complaint:* Parents must file a document with the Division of Special Education Legal Services that outlines the dispute. This may result in investigation of the LEA by the Division.
- *Mediation:* This is a voluntary negotiation for all parties, and must not delay due process hearing rights.

- *Due process hearing:* This refers to an administrative hearing before an impartial hearing officer, administrative law judge, or Division of Special Education Legal Services.
- *IEP Review:* This follows disagreement over an IEP or IEP review, and may result in negotiation with the IEP team, further student evaluation, or the above options.

Also, if an IEP team determines that a student is better served through another public school or a private provider, IDEA allows for alternative placement while protecting all other special education rights.⁷⁵

Continuing disagreement may result in adjudication through the court system. According to the Tennessee Division of Special Education, there is no general precedent for special education hearings, and approximately 95 percent of special education cases end in out-of-court settlement. As the judicial process for special education cases may be time-consuming and taxing for all parties, the Division encourages families to negotiate with their IEP teams prior to litigation.⁷⁶ See Appendix F for an example of autism case law in Tennessee.

Five states allow students with disabilities to enroll in special education voucher programs, which offer alternative services to those provided under public special education programs. A voucher is a set amount of funding typically issued by states to parents for student tuition at an out-of-district public school, private school, or private education provider.⁷⁷ States with voucher programs for special education students include Arizona, Florida, Georgia, Ohio, and Utah. Ohio’s program is limited to students with autism.⁷⁸ Tennessee does not have a special education voucher program.

According to a 2007 survey by the National Association of State Directors of Special Education (NASDSE), policymakers in states with special education voucher programs have historically supported other forms of school choice and nontraditional school options, such as charter schools. Survey results also showed that support from special education advocates has been instrumental in the creation of special education voucher programs.⁷⁹

Existing special education voucher programs vary in size, funding, and participation rates for both students and voucher providers, as displayed in Appendix G.

Voucher programs remain a widely debated topic among education policymakers and advocates. Proponents claim that broadened school choice options under vouchers are the only opportunity for economically disadvantaged students to access appropriate education.⁸⁰ Special education voucher proponents cite high parental satisfaction rates and rising student participation rates as evidence of voucher programs' success. Parental satisfaction levels with special education voucher programs have been assessed in Ohio and Utah.⁸¹ Survey results in Utah indicated high levels of parental satisfaction with services received through the voucher program. Similarly, an evaluation of Ohio's autism-specific voucher program found high levels of parental satisfaction with their children's education services.⁸² Student participation rates have risen in each of these programs following their inception. For example, Florida added approximately 15,000 students to its program over a five-year period, and Ohio's program grew by approximately 700 students between school years 2004-05 and 2007-08.⁸³

Opponents of vouchers object to the general concept of allocating public education funds to private providers.⁸⁴ (Voucher programs examined by OREA use state and local, but no federal, funds.) Several other concerns have also been raised. Parents must waive IDEA rights when opting into special education vouchers. The National Education Association cautions that waiving IDEA protections means voucher providers may choose not to accept a student based on his or her disability; may segregate students with disabilities from typically developing students; may choose not to abide by IEPs without parental recourse; do not have to provide education in inclusive settings; and may suspend or expel students without continuation of needed educational services.⁸⁵ Policy Matters Ohio, a nonprofit research group, identified several concerns with Ohio's autism program, including selective admission (i.e., the majority of providers choose to limit eligibility to students with less severe needs), lack of providers in rural areas, and disproportionate use by upper-income households.⁸⁶

Some opponents argue that vouchers used to pay tuition at religious institutions violate separation of church and state constitutional guarantees. In 2002, the U.S. Supreme Court rejected this argument in *Zelman v. Simmons-Harris*, although the issue remains unsettled under many state constitutions.⁸⁷

Special education voucher programs differ from publicly provided special education programs in the following ways:

- **Students in voucher programs are not required to participate in annual assessments.** None of the states with state special education voucher programs examined for this report require students with vouchers to participate in state annual testing programs, as required by the No Child Left Behind Act. However, upon parental request, Arizona and Florida require school districts to allow students with vouchers to participate in annual testing at public schools. Florida also requires private schools to inform parents of their children's academic progress in writing (e.g., a report card).⁸⁸
- **Voucher providers are not required to undergo monitoring by state education agencies for compliance with special education laws, rules, and regulations.**⁸⁹ When a parent chooses to place a child in a voucher program, the child is categorized under IDEA as parentally placed in private schools. IDEA provisions (e.g., due process rights, placement in the least restricted environment, free and appropriate education) no longer apply to that child.⁹⁰

Existing state oversight and due process options for parents under state voucher programs are limited to monitoring and enforcement of federal antidiscrimination laws. For example, Georgia's Special Needs Scholarship program includes a complaint process for parents who believe a voucher provider is not complying with federal antidiscrimination laws. Providers that are out of compliance may be removed from the state's approved provider list. Providers may also be removed from the approved provider list for not meeting the state's eligibility criteria or failing to reimburse the state in the event of voucher overpayments.⁹¹

The limitations of oversight in areas of quality, costs, and effects on participating children's academic progress preclude a comprehensive evaluation of voucher programs. Ultimately, parents must determine whether voucher programs are the best choice for their children.⁹²

Outside voucher programs, IDEA already allows IEP teams to place a student in a private school or program, called "alternative placement," on determining that such placement serves the student's needs better than the public school. For example, if an IEP team determines a private school can provide better services than the public school where the student is enrolled, the LEA may contract with the private school to provide the services. In contrast to voucher programs, students placed in alternative placements under IDEA maintain special education rights and the IEP's accountability measures outlined in the law.⁹³

- **Parents are responsible for paying costs that are in excess of a state's per pupil voucher amount.** A 2008 analysis of Ohio's voucher program found the costs of most providers (26 of the 40 interviewed) fell within the \$20,000 annual cap; however, the costs of some providers (14 of the 40 interviewed) exceeded the cap.⁹⁴ Under IDEA, parents are not required to pay for special education services provided in the public school system.

- **Parents may be responsible for transporting their children to and from the voucher provider's site.** Parents are responsible for providing transportation in the voucher programs of Arizona, Florida, and Utah. This is also the case under Ohio's autism-specific program, with two exceptions:⁹⁵
 1. if transportation is part of the child's educational plan from the previous year, private providers may use vouchers for transportation services; and/or
 2. if the LEA already provides transportation for one or more students to the private provider, the LEA must also provide transportation to that location for students in the voucher program.

Public school systems are required to provide transportation to and from educational facilities for students in special education programs covered by IDEA and/or the Americans with Disabilities Act (ADA).⁹⁶

Developing School and District Capacity to Educate Students with Autism

LEAs are responsible for ensuring that teachers receive adequate training. A school district's teacher training needs vary according to several factors, including existing staff members' previous experience in educating students with autism and the unique needs of the district's current special education population. All licensed general and special education teachers may teach students with autism; no autism-specific teaching license is required. Some teachers may possess autism-specific knowledge through higher education or professional development.⁹⁷

Federal and state laws do not require LEAs to provide specific special education interventions until needed by a student residing within that school system. For example, LEA personnel are not required to be trained in behavioral interventions like applied behavior analysis until a child within the system requires that specific method.⁹⁸ Moreover, an LEA's ability to access training is affected by the training sites' geographic location and the amount of funding for professional development.

According to TDOE's Division of Special Education, LEAs regularly request professional development on how to educate students with autism. In response, TDOE provides school districts across the state with training resources through a contract with the Vanderbilt Kennedy Center's Treatment and Research Institute for Autism Spectrum Disorders (TRIAD). TRIAD's autism education methodology and characteristic identification trainings are available to general and special education teachers, and some training courses are also available for parents, administrators, and other educational staff (e.g., paraprofessionals). According to the Division of Special Education, the TRIAD program has provided training for nearly every request since its inception.⁹⁹

TRIAD's basic and advanced teacher trainings, provided in school settings, are intensive and hands-on. Trainings focus on the applied behavior analysis (ABA) methodology and on methods for supporting and reinforcing positive student behavior, building measurable autism-specific IEP goals that incorporate data collection and analysis, and facilitating social interaction and peer-prompted interventions between students with autism and typically developing peers. According to the Division of Special Education, intensive hands-on trainings are more beneficial for teachers and are preferred over broader, more general statewide trainings.¹⁰⁰

TRIAD trainings are voluntary and participation varies by LEA. Appendix G includes a list of LEAs most often utilizing TRIAD trainings, the number of trained participants from FY2008-09, the approximate number of participants since the program's inception per training, and annually contracted budget amounts from 2006 through 2009.¹⁰¹

TDOE's partnership with TRIAD also offers support to LEAs by providing follow-up visits to schools participating in courses (i.e., the TRIAD Advanced and Basic Teacher Trainings, and Summer and Winter Institutes). During follow-up visits, school teams demonstrate strategies previously learned in TRIAD trainings. A TRIAD consultant then provides written recommendations for improvement. In the 2008-09 school year, 78 follow-up visits were conducted.¹⁰²

TRIAD also annually offers the Autism Team Partnership Program, a school-specific team training program. In addition to existing TRIAD trainings, each participating team receives two full-day and two half-day consultations conducted by a TRIAD mentor. Mentors help school teams to:

- identify strengths of the current school program;
- develop and implement a plan for improvement including specific goals;
- provide ongoing supports, resources, and technical assistance to meet the needs of the plan;
- evaluate and record outcomes; and
- develop and implement a leadership plan among staff.¹⁰³

In the 2008-09 school year, schools in six LEAs participated in the Autism Team Partnership Program.¹⁰⁴

Additional autism-specific training opportunities include:

- **Training in scientific and research-based behavioral intervention methods:** Programs such as Statewide Positive Behavioral Support (SWPBS) promote proactive identification of behavioral disorders throughout entire school populations, and prepare teachers to provide autism-specific interventions (e.g., ABA) outside the special education process. TDOE contracts with seven universities, including the Connections for Education Outreach (CEO) at UT Knoxville (formerly the Partnership for EdExcellence), to provide LEAs with training and technical assistance in behavioral supports.¹⁰⁵
 - **Private Service Providers:** LEAs may seek training from private special education service providers. This may include LEA-specific training contracts with TRIAD or other higher education institutions.¹⁰⁶
 - **Regional Resource Centers:** TDOE funds one Regional Resource Center (RRC) in each grand division of the state. RRCs are charged with providing LEAs with special education-related guidance, technical assistance, and training. One RRC official indicates that the centers function more as a referral service for LEAs for autism trainings rather than as direct providers.¹⁰⁷
- Some RCC positions related to behavioral education have been eliminated in recent years. Prior to 2008-09, each RRC employed a behavioral education consultant whose responsibility was to provide requesting LEAs with guidance and written recommendations to address school- and student-specific problems. An RRC official interviewed for this project said that many of the requests handled by the behavioral education consultants involved students with autism.¹⁰⁸
- **In-house training and supports:** Some LEAs, including Knox County and Williamson County, are

able to provide in-house autism-specific training to their teachers and other school personnel.¹⁰⁹ Training teams in these districts provide services that range from basic training to school-specific, and sometimes student-specific, supports in coordination with autism specialists.

Knox County Schools has established an Autism Review Team (ART), which consists of supervisors, a speech/language pathologist, psychologist, special education teacher, occupational therapist, and autism support teacher. Once a month, the ART meets with up to six school teams to provide guidance and support. Any school team referred to ART includes the special education administrator (who made the ART referral), school building administrator, a general and special educator, paraprofessionals, and related service providers.¹¹⁰

In instances where the ART provides individual student support, school officials submit a referral packet to the ART describing the student's strengths, areas of concern, and current and past strategies used in the student's education. The ART then holds an in-depth discussion with the school team, creates an educational strategy, and provides the school team with a written strategic plan for the student. If school officials need further training, the ART will provide a full-day Student Specific Autism Training (SSAT), which includes an overview of autism characteristics and an intensive study of student-specific needs. School teams leave SSAT with an implementation plan to address the concerns of providing an IEP.¹¹¹

Although Knox and Williamson counties have in-house supports, both LEAs also regularly access autism trainings through TRIAD.

- **The TDOE Annual Special Education Conference:** TDOE's 2010 spring conference included at least six autism-specific sessions, up from four offered in 2009. Conferences also include a variety of sessions with emphasis on behavioral support; the 2010 conference offered at least 19.¹¹²

Some states, including North Carolina and Florida, have developed statewide autism support systems with regional contacts; other states, including Alabama, are beginning to create similar systems.¹¹³ Statewide support systems include social and health supports in addition to educational services. The Treatment and Education of Autistic and Related Communication-Handicapped Children (TEACCH) program at the University of North Carolina at Chapel Hill is the longest established statewide support system for autism services. Created in the early 1970s, TEACCH's regional centers provide a variety of services including professional development for those working with autism. Other services outside of education include early intervention and supportive employment services. TEACCH is funded through state and federal appropriations and grants, and increasingly through private donations.¹¹⁴

In 1993, the State of Florida, through the University of South Florida, developed the Center for Autism and Related Disabilities (CARD). CARD provides regional autism-related educational supports and staff training at no cost to schools. Parents may also access referral and registry services. The program is funded through the Florida Department of Education.¹¹⁵

Other states have created statewide support programs or comprehensive oversight agencies for children with autism and their families. For example, the Pennsylvania Autism Task Force created the Bureau of Autism Services in 2007 to more efficiently provide families with guidance through the process of accessing and understanding needed services.¹¹⁶

Other states, like Alabama, have begun the process of developing a similar statewide system of care. In spring 2009, the Alabama General Assembly approved legislation to create regional autism centers that would be overseen by an Alabama Interagency Autism Coordinating Council (AIACC) to plan for and enhance comprehensive autism supports and services statewide. Though still in development as of spring 2010, Alabama's plan calls for the development of regional autism centers. Each center must:

- Develop, provide, and evaluate trainings for professionals working with autism;

- Provide individual and family home, community, and/or school support; services already guaranteed must not be supplanted by this support (i.e., schools must continue to provide IDEA services);
- Provide technical assistance and consultation services in all appropriate settings (e.g., home and school); and
- Develop a public awareness campaign to educate the public about autism, behavioral and sensory impairments, and other related disabilities.¹¹⁷

The Alabama State Autism Coordinator (a position created by the 2009 legislation), explains that the AIACC expects the regional centers to provide information to families and service providers as opposed to providing services. The centers are expected to provide families with counseling and service coordination, and providers and professionals in networking and collaboration at the local level. The AIACC is currently focusing on other statewide autism issues, such as proper training for first responder public safety officials (e.g., police and firemen) to approach and manage people with autism.¹¹⁸

Tennessee's Autism Services Proposal of 2002 recommends a statewide autism support model with a total estimated budget of \$6,571,500. The proposed model includes an education component with eight regional autism support teams. Each team would include a special educator, a speech and language therapist, and a behavior interventionist; teams would receive continuous training and support from TRIAD. The estimated budget for the education component was \$1,623,000, with an estimated salary of \$56,250 for each staff person.¹¹⁹

Higher education institutions play a key role in preparing and providing professional development to teachers who educate children with autism. State education agencies often collaborate with higher education institutions when implementing autism-specific support or training programs.

Higher education institutions can provide prospective teachers with an understanding of the disorder's characteristics, the latest research on how to effectively handle the unique classroom challenges posed by

such students, and hands-on experience working with students with autism. The Tennessee Division of Special Education indicates that increased general education teacher exposure to special education and autism-specific educational methods during college builds a well-trained workforce.¹²⁰

The Tennessee Higher Education Commission (THEC) annually administers the Improving Teacher Quality Grants, which are funded through NCLB, Title II, Part A. These competitive grants allow higher education institutions to provide teacher training in subjects that are hard to teach and difficult to staff, including special education. The special education-related grants:¹²¹

...fund projects that provide special education teachers in Tennessee with an opportunity for professional development. These initiatives should address increasing teacher content knowledge or pedagogical skills in areas such as: speech and language pathology, behavioral disorders, autism, and the emotionally disturbed.

In 2010, one of 14 "Improving Teacher Quality" grants was awarded to Lee University to provide autism-specific trainings.¹²²

According to results from a 2009 OREA survey, most Tennessee higher education institutions plan to increase autism-specific educational opportunities.

In spring 2009, OREA surveyed University of Tennessee Board of Trustee institutions and those Tennessee Board of Regents (TBR) institutions offering four-year degrees in education about their autism-related degree, program, and course offerings. Analysis of survey responses showed:¹²³

- At most institutions, subject matter dealing with autism is typically available within general special education courses; autism-specific courses are offered at a few institutions, including Tennessee Technological University (Tennessee Tech), Austin Peay State University, and the University of Tennessee at Chattanooga (UTC), either as required courses or electives.¹²⁴

- None of the respondents offers a Masters Degree in Autism Education, but Middle Tennessee State University is in the process of creating one with the intention to eventually expand the program to the doctorate level.¹²⁵
- Tennessee Tech and UTC have received grants (federal and nonprofit, respectively) to expand autism curriculum opportunities and conduct behavioral research. In addition, UTC, through a grant from the Siskin Children's Institute, offers a program for prospective early education teachers to participate in educating children with autism through specific methods.¹²⁶

A copy of the survey and summary of the responses can be found in Appendix I.

State data is limited regarding each LEA's teacher training program, capacity, and needs, as well as the number of teachers trained to educate children with autism. An LEA is not required to provide or train personnel to implement autism-specific services or methodologies unless these are needed by a student within that school system. While TDOE does collect data on the number of LEAs that choose to participate in TRIAD trainings, this information does not provide a complete picture of each LEA's capacity to address the educational needs of students with autism. LEAs may access training through other providers.¹²⁷

Although Tennessee does not track the number of teachers with autism-specific expertise, THEC annually reports the number of teachers in hard-to-staff and hard-to-teach subjects in Tennessee, including special education. Exhibit 5 shows the number of teachers

Exhibit 5: Tennessee Graduates with a Special Education Degree

Year	Number of graduates with a degree in special education
2005-06	391
2004-05	403
2003-04	406

Source: Tennessee State Board of Education and Tennessee Higher Education Commission, *2008 Annual Joint Report on Pre-Kindergarten through Higher Education in Tennessee*, 2008, pp. 19, <http://www.tennessee.gov/thecl/Legislative/Reports/2008/JointReport2008.pdf> (accessed August 24, 2010).

graduating in Tennessee with a degree in special education.¹²⁸

THEC officials indicate plans to publish data reports in 2010 on the number of teacher graduates with an expertise or focus in specific subject areas, including autism. The information will be included in an employment database designed to report the number of teacher education students retained in Tennessee after graduating from in-state higher education institutions. The database will also enable THEC to retrieve information on different types of higher education degrees, including special education, offered in the state.¹²⁹

Considerations for Policy Discussion

Policy discussions regarding educational services for students with autism should take into consideration the following:

- Fiscal resources may be limited due to expected reductions for the FY 2009-10 state budget.
- The federal Individuals with Disabilities Education Act (IDEA) stipulates special education requirements for state and local education agencies.
- Most laws concerning autism services affect all children with developmental disabilities; therefore, any policy change to those laws—unless specified otherwise—would alter all developmental disability services.
- Autism spectrum disorders include a range of complex diagnoses. The needs of each child with autism are unique, and educational interventions must be individualized.
- State and local educational agencies work collaboratively with higher education institutions for teacher training and preparation
- No comprehensive record is collected on the methods of training and supports for LEAs statewide.

TDOE and LEAs may wish to investigate options for providing more training and supports for families of students with autism regardless of special education eligibility. Parents and families with eligible children under the age of three receive

home-based training and supports through the state-administered TEIS; this family-focused assistance ends on the child's third birthday. Following this transition, families often turn to advocacy groups and nonprofit organizations (e.g., Autism Society of America and Easter Seals) for training on how to navigate the K-12 education system and provide appropriate behavioral and other interventions at home. While some TRIAD trainings are available to families through the TDOE contract, access is limited and does not include home supports. During a breakout session presented by Knox County's ART and SSAT at the 2009 Annual Special Education Conference, local special education officials identified family training and supports as a challenge for their LEA.¹³⁰

Some children with autism may not be eligible for special education, but require behavioral or social interventions outside of the classroom. Resources for families of these children are limited, especially between the ages of three and five, due to the lack of statewide early education opportunities.

Federal law requires TDOE to monitor and report on the efficiency of IDEA services for children with autism; however, data is not required to be disaggregated by disability, and an autism-specific assessment of services is lacking. Access to autism-specific data on educational benchmarks and requirements under IDEA (e.g., early childhood and secondary transitions, educational settings) may help policymakers make more informed decisions about autism educational services.

TDOE provides a variety of resources for teacher professional development in working with autism; however, the level of training, support, and capacity to work with students with autism varies regionally and locally. The Division of Special Education may wish to assess the supply of autism-specific teacher preparation opportunities in public institutions in relation to the demand for teacher training in each LEA. Such a needs assessment could enhance statewide understanding of how LEAs in different parts of the state approach training and supports for teachers educating students with autism, allowing policymakers to make more informed decisions about autism-related professional development.

TDOE and the Division of Special Education may wish to consider providing autism-specific online learning opportunities for educational professionals and parents of children with autism. Online learning should not be a substitute for complex subject matter better suited to onsite training (e.g., TRIAD trainings in ABA). However, OREA observation of TRIAD's Full Day Regional Workshops indicated that while effective and in-depth, these lecture-style instructional trainings concern methodology and characteristic identification and may translate well to online tutorials. Enhanced online learning would make trainings readily accessible for teachers and cost-effective for the Division and LEAs.

Endnotes

- ¹ Nationally and in Tennessee, the number of children ages three to 21 receiving special education services related to autism tripled between 2001 and 2007. For more information on data and an introduction to autism policy issues, see Comptroller's Offices of Research and Education Accountability, *Autism in Tennessee: An Introduction to Issues and Data Collection Methods*, Oct. 2009, p. 4, <http://www.comptroller1.state.tn.us/Repository/RE/AutismPart1Sources%20-%202010%20Update.pdf> (accessed Aug. 24, 2010).
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- 124 APSU offers one diversity course on children with special needs, while grade K-6 and 4-8 teacher education students are required to take one course on inclusion; ETSU offers a K-12 physical education course focusing on atypical populations; and TSU's instructional strategies courses include differentiated instruction to meet all learners' needs. The UT Health Sciences Center, which houses the Boling Center for Developmental Disabilities (BCDD), does not offer a teacher education program, and did not provide a response to the survey.
- 125 MTSU is developing a graduate program in autism with intention to extend the program to the Doctoral level in the future. Additionally, MTSU expressed interest in working with the Tennessee Department of Education to develop an add-on endorsement for teachers in this area. UTK did not provide a response to this survey question.
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Senate Chamber State of Tennessee

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EDUCATION

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EDUCATION LOTTERY CORPORATION

REPUBLICAN CAUCUS SECRETARY

May 2, 2008

Comptroller John Morgan
State Capitol, 1st Floor
Nashville, TN 37243

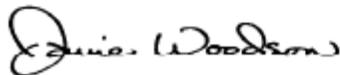
Dear Comptroller Morgan:

We would like to request a report be prepared on the children in Tennessee with autism. Please have your office look at the resources available to these children as well as the obstacles that they and their families face. Specifically, please address the following questions:

- What are the ways that children are presently identified who have autism, both by schools and by other providers?
- What services are presently available for children with autism?
- What services do other states provide that Tennessee does not?
- What is the present methodology for estimating the number of children with autism in Tennessee? Are there other methods that should be considered?
- Is the Early Intervention Services program effectively helping identify autistic children at an early age? What other methods might be employed?

We appreciate your taking the time to look into this issue. If you have any questions regarding this request, please feel free to give us a call.

Sincerely,



Jamie Woodson

Sincerely,



Randy McNally

Appendix B: A Brief History of Autism Research and Reviews in Tennessee

Prior to this OREA series, autism has been studied and reviewed in Tennessee through a variety of methods.

Autism Services Proposal of 2002

As required by Senate Joint Resolution 567 of the 102nd General Assembly, an interagency study was conducted by approximately 60 stakeholders throughout the state. The result was a written proposal released in December 2002. The resolution also required the proposal be presented and studied by a joint committee. According to the State Senate Chief Clerk's Office, there is no record of a joint committee having been called for this purpose.

University Centers for Excellence in Developmental Disabilities

Tennessee is home to two national University Centers for Excellence in Developmental Disabilities (UCEDDs): the Vanderbilt Kennedy Center for Excellence in Developmental Disabilities and the Boling Center for Developmental Disabilities at the University of Tennessee Health Science Center. The Vanderbilt Kennedy Center for Excellence in Developmental Disabilities includes an autism-specific component, the Treatment and Research Institute for Autism Spectrum Disorders (TRIAD). Both UCEDD programs actively perform research, outreach, and training on autism.

Tennessee Learn the Signs, Act Early. Summit

In January 2009, Tennessee's university centers hosted the federal Region IVA Learn the Signs, Act Early (LTSAE) Summit. Initially launched in 2004 by the Centers for Disease Control and the National Center on Birth Defects and Developmental Disabilities, the LTSAE campaign aims to broaden the outreach and understanding of autism and provision of services for families and stakeholders. At the 2009 Summit, Region IVA stakeholders from Kentucky, North Carolina, South Carolina, and Tennessee met and developed state plans to improve statewide autism services. As of May 2009, the Tennessee Act Early Team continues semimonthly meetings to discuss plans for service improvement and community awareness. The summit focused on early intervention and related services.

Sources:

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Appendix C: Glossary of Acronyms and Terms

619 Services – a term for early special education services granted to eligible children age three through five, found in IDEA, Part B, Section 619.

ASD – autism spectrum disorder

DD – developmental disabilities – Under federal and state law, the educational diagnosis of autism is classified as a developmental disability. Additionally, fundamental rights to educational services for students with autism are equal to the rights of other developmental disabilities (e.g., Hearing Loss, Vision Impairment, and Cerebral Palsy).

FAPE – Free Appropriate Public Education – a federal requirement that all children with disabilities receive education services in the public education system at no cost to families or students. Special education and related services may be provided to ensure that students receive a FAPE.

IDEA – the Individuals with Disabilities Education Act – the federal code outlining government responsibilities for provision of special education and related services. The law was enacted in 1975 (then called the Education for All Handicapped Children Act) and has since been reauthorized many times, most recently in 2004. Also see Part B and Part C.

IEP – Individualized Education Plan – a detailed educational plan that outlines goals, objectives and outcomes that address the unique educational needs of an individual student in relation to the total school environment. The IEP is the keystone to ensuring provision of FAPE.

Inclusion – a term for the amount of time a child spends in typical education settings. Technically, inclusion is not a federal mandate; but it is part of the continuum of services involved in providing the least restrict environment. Also see LRE.

LEA – Local Education Agency – a school district or system.

LRE – Least Restrictive Environment – an education setting that ensures children with disabilities participate in the education environment(s) with typically developing peers as often as possible. LRE is sometimes called inclusion, though inclusion more directly refers to the amount of time a child spends in typical education settings. Found in IDEA, Part B, Section 612(a)(5).

NLTS2 – National Longitudinal Transition Study-2 – an ongoing 10-year study commissioned in 2001 by the U.S. Department of Education's Institute of Education Sciences to study youth with disabilities. Information is collected from parents, students, and schools to provide a national understanding of student transition into early adulthood. The survey sample includes 1,012 students representing all students with autism (14,637) of a total 11,500 students representing all with disabilities (1,838,848). See www.nlts2.org for more information.

Part B – Part B of the Individuals with Disabilities Education Act outlines government requirements and provision of educational services to children age three through 21 identified as requiring special education services.

Part C – Part C of the Individuals with Disabilities Education Act outlines government requirements and provision of Early Intervention Services for infants and toddlers from birth to the third birthday.

OSEP – Office of Special Education Programs – the federal governmental entity (under the U.S. Department of Education) responsible for oversight of state education agency compliance with IDEA and related statutes.

SEA – State Education Agency – Tennessee's SEA is the Tennessee Department of Education (TDOE).

Appendix D: Persons Contacted

Nicolette Bainbridge Brigham, Ph.D., Director of Outreach and Training, TRIAD; Assistant Professor of Clinical Pediatrics, Vanderbilt University

Bob Blair, Coordinator, Middle Tennessee Regional Resource Center

Jennifer R. Butterworth, Ph.D., Director (former), Partnerships for EdExcellence, University of Tennessee-Knoxville

Linda Copas, Director, Behavioral and Autism Services, Division of Special Education, Tennessee Department of Education

Denny Dukes, Associate Director, Children's Mental Health Services Research Center, University of Tennessee-Knoxville

Bob Duncan, Director (former), Governor's Office of Children's Care Coordination

Patti van Eys, Assistant Professor, Department of Psychological Science, Vanderbilt University

Joe Fisher, Assistant Commissioner, Division of Special Education, Tennessee Department of Education

Caroline Gomez, Ph.D., State Autism Coordinator, Alabama Department of Mental Health

Linda B. Hartbarger, Part C Coordinator, Office of Early Childhood, Division of Special Education, Tennessee Department of Education

Jamie Kilpatrick, Director, Office of Early Childhood, Division of Special Education, Tennessee Department of Education

Kay Clark, Associate Vice Chancellor for Academic Affairs, Tennessee Board of Regents

Terry Long, Director, Office of Data Services, Division of Special Education, Tennessee Department of Education

James M. McCarten, Attorney, White & Reasor, PLC

Joe McGlaughlin, Co-author of the Autism Services Proposal of 2002

Nan McKerley, Director, Administration Services/LEA Allocations and Budget, Division of Special Education, Tennessee Department of Education

Elise McMillan, Co-Director, Vanderbilt Kennedy University Center for Excellence in Developmental Disabilities

Katrina Miller, Director (former), Academic Affairs, Tennessee Higher Education Commission

Nanette Mitchell, Journal Clerk for Chief Clerk of the Tennessee State Senate

Tara Moore, Director, Connections for Education Outreach (formerly Partnerships for EdExcellence), University of Tennessee-Knoxville

Jena Napier, Children's Care Coordinator, Governor's Office of Children's Care Coordination

Jill R. Richardson, M.S., Training and Workforce Development Coordinator, Office of Early Childhood, Division of Special Education, Tennessee Department of Education

Mary Rolando, Policy Analyst, Governor's Office of Children's Care Coordination

Kathi Rowe, Director, Program Management, Division of Special Education, Tennessee Department of Education

Ann Sanders, Associate Director, Assessment, Division of Special Education, Tennessee Department of Education

John Shouse, Board of Directors, Autism Society of America

Steve Sparks, Director, State Reporting and Professional Development, Division of Special Education, Tennessee Department of Education

Wendy Stone, Director (former), TRIAD, Vanderbilt Kennedy Center

Bill Wilson, Attorney, Division of Special Education, Tennessee Department of Education

Robert Winstead, Coordinator, East Tennessee Regional Resource Center

Ruth Wiseman, Public Awareness Coordinator Office of Early Childhood, Division of Special Education, Tennessee Department of Education

David L. Wright, Associate Executive Director of Policy, Planning and Research, Tennessee Higher Education Commission

Bonnie Yegidis, Vice President of Academic Affairs, University of Tennessee Board of Trustees

Appendix E: Members of an IEP Team

LEAs are responsible for ensuring that each IEP team includes, at a minimum, the following members:

- the child's parent(s) or guardian(s);
- the child with a disability, when appropriate (i.e., adolescent children and young adults (ages 14-21) during secondary transition);
- at parental or LEA discretion, other individual(s) with special expertise or knowledge about the child;
- a TEIS representative knowledgeable of the child's needs prior to entering the K-12 system (birth through age five);
- at least one regular education teacher of the child (if the child is, or may be, participating in the regular education environment);
- one special education teacher or provider of the child;
- an LEA representative who is:
 - qualified to provide or supervise the provision of special education;
 - knowledgeable about the general education curriculum; and
 - knowledgeable of the LEA's available resources;
- an individual able to interpret the instructional implications of evaluation results.

IEP teams are not required to include a representative with autism expertise.

Source: "Individuals with Disabilities Education Improvement Act of 2004," Public Law 108-446, Section 632 (5)(A), 635(a)(10), Dec. 3, 2004, <http://idea.ed.gov/download/statute.html> (accessed May 20, 2009); Rules of the Tennessee State Board of Education, "Special Education Programs and Services," Chapter 0520-1-9-.09 (a)-(h), <http://state.tn.us/sos/rules/0520/0520-01/0520-01-09.20100118.pdf> (accessed Aug. 23, 2010); Tennessee Autism Workgroups designated by SJR 567 of the 102nd General Assembly, Autism Services Proposal for the Tennessee Legislature, Dec. 20, 2002, p. 23.

Appendix F: Autism Case Law in Tennessee

Special education legal disputes can be costly and complicated. One example of Tennessee special education case law directly dealing with autism is *Zachary Deal v. Hamilton County Department of Special Education* (HCDE). In this case, the Administrative Law Judge (ALJ) held that HCDE had violated IDEA by failing to provide a number of services to the plaintiff (a student with autism). The court's opinion cites a number of violations including:

- Hamilton County failure to provide “Lovaas-Style ABA” despite Zachary’s showing improvement under the teaching method; and
- LEA failure to provide Extended School Year (services that extend beyond the general school year) services in 1999.

The legal battle was extensive and arduous—a 27-day trial with thousands of pages of documentary evidence and more than 20 witnesses. The court ordered HCDE to reimburse the Deals for a number of out-of-pocket educational costs until an IEP Team (including a Lovaas-style ABA advocate) and IEP (that met certain guidelines outlined by the court) were developed. The court ultimately dictated the implementation and methodology of Zachary’s FAPE.

It is not the intention of OREA to support or dispute the findings of this case, only to identify it as an example of the extremely arduous nature of a special education legal dispute.

Source: Gary Mayerson, Esq., “Analysis of Zachary Deal v. Hamilton County Department of Education,” Wrightslaw, <http://www.wrightslaw.com/advoc/articles/autism.deal.mayerson.analysis.htm> (accessed Jan. 27, 2009); Before the Tennessee State Department of Education, *Zachary Deal v. Hamilton County Department of Education*, A. James Andrews, Administrative Law Judge, Memorandum Opinion and Final Order, Aug. 20, 2001, Wrightslaw, <http://www.wrightslaw.com/law/caselaw/2001/TN.deal.hamilton.dp.pdf> (accessed Aug. 24, 2010).

Appendix G: Selected States with Special Education Voucher Programs

	Ohio	Arizona	Florida	Georgia	Utah
Year of Inception	Special Education Pilot Project (A.K.A. Autism Scholarship Program) 2004	AZ Program for Pupils with Disabilities 2006	McKay Scholarship for Students with Disabilities Program 1999	Georgia Special Needs Scholarship Program 2007	Carson Smith Scholarship Program 2005
Funding	\$15 million (local dollars)	\$2.5 million (state dollars)	\$131 million (state dollars)	\$5.6 million (state dollars)	\$2.3 million (state dollars)
Student Eligibility	Student must have been enrolled in or attended public school the previous year with an IEP, and must have autism.	Public school enrollment or attendance the previous year and a current IEP.			The student must either (a) have been enrolled in public school the previous year and be admitted to an eligible private school for the current year; or (b) have been admitted or enrolled in an eligible private school and have been evaluated to determine eligibility for special education if in public schools.
Provider Eligibility	State-approved private schools and non-school entities* providing IEP services for the student.	State-approved private schools.	State-approved private schools.	Any private school.	Any public school or approved private school.
Number of Participating Providers (2008-09 school year)	148 providers (124 of these are non-school entities providing special education services for the student)	Arizona does not keep count of the number of participating providers	873 private schools	117 private schools	45 private schools
2007-08 Student Participation	1,000 Students	117 Students	19,900 Students	899 Students	482 Students
Per Pupil Voucher Amount	\$20,000 annual cap \$17,000 annual average	\$19,000 annual cap \$8,969 annual average	\$22,000 annual cap \$7,295 annual average	No annual cap* \$6,273 annual average	\$6,442.50 annual cap \$4,800 annual average

* Non-school providers may include approved facilities (e.g. clinics) offering services in a student's IEP (e.g. ,speech language therapy, physical therapy, transportation).

** GA's program's per pupil voucher amount is based on the lesser amount of state funds received for child's special education in previous year, or cost of private school tuition and fees.

Sources: Texas Association of School Boards, *Comparative Analysis of Special Education Voucher programs in Five States*, April 2009; Project Forum at National Association of State Directors of Special Education, inForum: *Special Education Vouchers: Four State Approaches*, April 2007; Kathy Cox, State Superintendent of Schools, Georgia Department of Education, *2007-2008 Georgia Special Needs Scholarship Program (GSNS) Year End Report*, November 18, 2008; Utah Department of Education, *SPECIAL NEEDS SCHOLARSHIP – (2009-2010): PROGRAM OVERVIEW FOR PARENT APPLICANTS*.

Appendix H: Additional Information on TRIAD Trainings

	Description	Eligible Participants	Number of Participants FY 2008-09	Approximate Number of Participants From Inception to FY 07-08 ¹
<p>TRIAD Teacher Trainings (TTT)</p>	<p>Six three-day classroom-based, hands-on trainings including:</p> <ul style="list-style-type: none"> ▪ Basic K-6 training ▪ Basic Middle/High training ▪ Advanced K-12 training² 	<p>School personnel</p>	<p>Total 72 <u>By Region:</u> East – 26 Middle – 34 West – 12 <u>By training:</u> Basic K-6 – 45 Basic Middle/High – 18 Advanced K-12 – 9</p>	<p>1,680 School Personnel Includes: Teachers, Paraprofessionals, Occupational Therapists, Speech and Language Therapists, and Behavior Consultants</p>
<p>Summer & Winter Institutes</p>	<p>Four-day training workshops on “Integrating Different Methodologies for Effective Intervention” in Middle TN</p>	<p>Teams of school personnel and parents</p>	<p>Grand Total 45 <u>By Region:</u> East – 11 Middle – 22 West – 12</p> <p>Summer Total 23 <u>By Region:</u> East – 4 Middle – 11 West – 8</p> <p>Winter Total: 22 <u>By Region:</u> East – 7 Middle – 11 West – 4</p>	<p>144 School Personnel Includes: All educational personnel (may include some TTT Participants) and family members</p>
<p>Follow-Up Site Visits</p>	<p>Follow-up consultations for participants in TTT and Summer and Winter Institutes</p>	<p>Participants of the TRIAD Basic Teacher Trainings and Summer Institute</p>	<p>TTT Visits Total 66 <u>By Region:</u> East – 22 Middle – 32 West – 12</p> <p>Institute Visits Total 12 <u>By Region:</u> East – 3 Middle – 6 West – 3</p>	<p>Not Reported</p>

	Description	Eligible Participants	Number of Participants FY 2008-09	Approximate Number of Participants From Inception to FY 07-08 ³
Full Day Workshops	<p>Regional trainings – three in each region totaling nine annually.</p> <p>Workshop Topics: Fall 2008: "Blueprint for Success: Developing Plans for Students with Autism Spectrum Disorders" (Special Educators) and "Extreme Makeover, General Ed Edition: Making Room for Students with ASD" (General Educators) Spring 2009: "Asperger Syndrome Sailing toward Independence" (Special Educators)</p>	All educational staff and family members.	<p>Grand Total 1,065</p> <p>By Region: East – 500 Middle – 345 West – 220</p> <p>Fall 2008 Total: 459</p> <p>By Region: East – 186 Middle – 170 West – 103</p> <p>Spring 2009 Total: 606</p> <p>By Region: East – 314 Middle – 175 West – 117</p>	<p>20,000 Participants</p> <p>Includes: All educational personnel and family members.</p>
Administrator Academy	Regional 2-day training workshops to provide information on "evaluation purposes and teacher support within... schools"	Geared toward building-level administrators	<p>Total 40</p> <p>By Region: East – 13 Middle – 14 West – 13</p>	180 Principals and Assistant Principals
Para-Educator Workshop	Regional 2-day training workshops	Paraprofessionals who work with students with autism in grades K-12	<p>Total 48</p> <p>By Region: East – 16 Middle – 17 West – 15</p>	288 Paraprofessionals

	Description	Eligible Participants	Number of Participants FY 2008-09	Approximate Number of Participants From Inception to FY 07-08 ⁴
<i>Parent Training Workshop</i>	Regional half-day training workshop	Parents of children with autism	Total 94 By Region: East – 35 Middle – 35 West – 24	
<i>Autism Team Partnership Program</i>	Year-long membership program with ongoing training and support	Teams of school personnel committed to the continuous improvement of educational programming for students with [autism] ²	Six Participating Systems Bradley County Schools (Waterville Community Elementary School), Dickson County Schools (Stuart Burns Elementary School), Giles County Schools (Pulaski Elementary), Lawrence County Schools (Ingram Sowell Elementary), Maryville City Schools (Maryville Middle School), and Murfreesboro City Schools (Scales Elementary School)	
TOTAL			Total 1,332 By Region: East – 491 Middle – 535 West – 30	A total is not reported as approximations may overlap, thus duplicating participants.

Notes: ¹ A temporarily offered two-day workshop for general educators reached approximately 1,000 general education teachers.

² TTT advanced teacher trainings are ABA-based, intensive, and hands-on in school settings.

LEA Participation in TRIAD Trainings

LEA participation in TRIAD training varies and is voluntary. According to the TDOE Division of Special Education, the following LEAs have taken the greatest advantage of these trainings:

Alcoa City	Franklin SSD	Monroe
Anderson	Giles	Murfreesboro City
Blount	Hamilton	Putnam
Campbell	Hancock	Robertson
Cheatham	Hawkins	Rutherford
Claiborne	Houston	Sevier
Cocke	Jefferson	Tipton
Crockett	Knox	Warren
Dickson	Lebanon SSD	Williamson
Fayette	Maryville City	Wilson
	Maury	

The amount of autism training requests per LEA does not indicate LEA capacity for educating children with autism; rather, these LEAs may be receiving training or support for autism through alternative means.

TRIAD Budgets

The TRIAD contract has been annually reviewed and renewed for 10 years as of 2009. The following are annual contracted amounts from 2006 through 2009:

2006-07	\$311,330.00
2007-08	\$319,630.00
2008-09	\$442,636.00

Sources: Nicolette Bainbridge Brigham, Ph.D., *Summary of TRIAD's DOE Contract Activities, Fiscal Year 2008-2009*, submitted August 7, 2009; Tennessee Division of Special Education, Department of Education, interview, Jan. 15, 2009; Linda Copas, Behavioral and Autism Services, Division of Special Education, Tennessee Department of Education, e-mail, February 4, 2009; Linda Copas, Behavioral and Autism Services, Division of Special Education, Tennessee Department of Education, e-mail, Jan. 16, 2009;

Appendix I: Tennessee Board of Regents and University of Tennessee Board of Trustees Survey Questions and Summaries

Survey on Autism Services: Office of the Comptroller

Institution Name:

1. Does your institution receive a grant(s) for special education and/or autism education specifically?
2. Does your institution offer an accredited master’s degree in autism education?
3. To what extent do all teacher education students receive training in special education? How many courses and semester hours of special education are included in teacher education programs?
4. What is the extent of exposure to autism in the special education curricula at your institution?
5. Has your institution expanded autism education considering the steady increase of students with autism in Tennessee?

The following are detailed summaries of a survey of the Tennessee Board of Regents and the University of Tennessee Board of Trustees in spring 2009.

Tennessee Board of Regents Response by Institution

TBR Institution	Is your institution the recipient of any grant specifically related to Autism education?	Does your institution offer a Master Degree in Autism Education?	Number of course(s) and/or semester hours of special education included in teacher education programs	The extent of exposure to autism in the special education curricula	Has your institution expanded autism education considering the steady increase of students with autism in Tennessee?
Austin Peay State University	No	No, Master’s in Curriculum and Instruction with emphasis on Special Education offers an autism course.	Required: Two 3-credit courses <ul style="list-style-type: none"> ▪ one special education introduction course; and ▪ one diversity course discussing special needs students. K-6 and 4-8 teacher education students take an additional course in inclusion.	Covered in introduction of special education course – required for all students.	Yes, added the autism course in response to the increased demand for help in this area.

TBR Institution	Is your institution the recipient of any grant specifically related to Autism education?	Does your institution offer a Master Degree in Autism Education?	Number of course(s) and/or semester hours of special education included in teacher education programs	The extent of exposure to autism in the special education curricula	Has your institution expanded autism education considering the steady increase of students with autism in Tennessee?
<i>East TN State University</i>	No	No	Required: One 3-credit course, Comprehensive special education K-12 Physical education course focuses on providing services to atypical populations.	Program is non-categorical, and autism is covered within several courses.	No
<i>Middle TN State University</i>	In the process of searching for autism-specific grants	MTSU's Elementary & Special Education Department is in the process of developing a graduate program in autism. Dr. Lesley Craig-Unkefer – an autism expert from the University of Minnesota where she developed an autism graduate program – was recently hired. Initially, the program will be offered at the Master level with intent of eventual expansion to the Doctoral level.	Required: One 3-credit course SPED 3010: <i>Characteristics and Teaching of Diverse Learners</i> (In construction to expand on differentiated instruction and sections on autism as of 2009)	SPED 3010 covers autism The publisher has established a website exclusively available to MTSU students. Discussion with the publisher concerning additional case studies, videos, and simulations on autism via the website.	MTSU is in the process of expanding autism education through development of a <i>Master's level program concentrating on Autism Spectrum Disorders</i> . We are also interested in working with the TDOE on developing an <i>add-on endorsement</i> in this area.
<i>TN State University</i>	No	No	Required: One 3-credit survey course. All instructional strategies courses include differentiated instruction to meet all learners' needs.	Autism is covered within several courses.	No, but instructional strategies courses have become more focused on meeting all students' needs.

TBR Institution	Is your institution the recipient of any grant specifically related to Autism education?	Does your institution offer a Master Degree in Autism Education?	Number of course(s) and/or semester hours of special education included in teacher education programs	The extent of exposure to autism in the special education curricula	Has your institution expanded autism education considering the steady increase of students with autism in Tennessee?
<p style="text-align: center;">Tennessee Technological University</p>	<p>Yes, as listed:</p> <ul style="list-style-type: none"> ▪ Improving Teacher Quality Grants (ITQ), <i>Picture This...Success for Teachers and Their Students with Autism (2006-2007)</i>. ▪ <i>Picture This: Even More Success for Students with Autism when General and Special Education Teachers Collaborate (2007-2008)</i>. ▪ <i>Positive Behavior Support Initiative</i> formerly known as The Make a Difference Project which addresses individualized programs for children with autism. ▪ <i>Early Intervention and Mechanical Engineering</i> ▪ <i>Upper Cumberland Healthy Start</i> 	<p>No, but TTU does offer the following in special education:</p> <ul style="list-style-type: none"> ▪ Master's; and ▪ Education Specialist (EdS) Degree 	<p>Required: One 3-credit course</p> <p>SPED 3000: <i>Teaching Students with Special Needs in the General Education Classroom</i></p>	<p>Graduate level course on autism:</p> <ul style="list-style-type: none"> ▪ <i>Introduction and Treatment of Autism Spectrum Disorder</i> <p>Course available in 2009:</p> <ul style="list-style-type: none"> ▪ <i>Teaching Students with Autism Spectrum Disorder</i> <p>Autism is covered within several other courses as well.</p>	<p>Autism education has increased at TTU through the <i>Teaching Students with Autism Spectrum Disorder Course</i> and through the <i>various grants awarded</i>.</p>

TBR Institution	Is your institution the recipient of any grant specifically related to Autism education?	Does your institution offer a Master Degree in Autism Education?	Number of course(s) and/or semester hours of special education included in teacher education programs	The extent of exposure to autism in the special education curricula	Has your institution expanded autism education considering the steady increase of students with autism in Tennessee?
University of Memphis	No	No, but the following are offered: <ul style="list-style-type: none"> ▪ Master of Arts with a concentration in Modified (mild disabilities), Comprehensive, or Early Childhood; ▪ Master of Science with a concentration in ABA (Applied Behavior Analysis); and ▪ Master of Science degree. 	Required: One 3-credit course per degree: <ul style="list-style-type: none"> ▪ Introductory course in Special Education – SPED 2000 for undergraduate, and ▪ SPED 7000 graduate degrees. 	Applied Behavior Analysis (ABA) graduate courses focus on working with children with autism – specifically behavior modification techniques. Autism is covered within several other courses as well.	<i>The ABA Master of Science Program in Special Education.</i> After completion, students are eligible to become Board Certified Behavior Analysts (BCBA).
Summary	TTU reports at least five grants for classes covering autism services. Two classes address autism specifically, while three others cover areas of autism services. No other TBR institutions receive(d) autism-specific grants as of March 2009. MTSU is searching for such grants.	No TBR institutions offer a Masters in Autism Education. However, MTSU is in the process of creating a masters level program with intention to expand the program to doctorate level.	Austin Peay requires two three-hour courses that include some instruction on autism for teacher education students. All other institutions require one three-hour course covering all disabilities, including autism, for teacher education students.	Generally, undergraduate teacher special education students are not required to take autism-specific classes. Rather, autism is covered in several courses.	Responses vary by institution, and each response indicates expansion of opportunities for students to receive autism-specific education.

Source: Compilation of OREA of select four-year universities and colleges at the Tennessee Board of Regents and University of Tennessee Board of Trustees, surveys and Interviews, February 2009.

University of Tennessee Board of Trustees Response by Institution

Board of Trustees Campus	Is your institution the recipient of any grant specifically related to Autism education?	Does your institution offer a Master Degree in Autism Education?	Number of course(s) and/or semester hours of special education included in teacher education programs	The extent of exposure to autism in the special education curricula	Has your institution expanded autism education considering the steady increase of students with autism in Tennessee?
UT Chattanooga*	<p>No autism-specific grants.</p> <p>TDOE Grants:</p> <ul style="list-style-type: none"> ▪ The UTC Teacher Preparation Academy (TPA) receives annual grants to offer a summer Special Education Institute ▪ BASE-TN (Be A Special Educator in Tennessee) from TDOE 	No	<p>Required: Two 3-credit courses:</p> <ul style="list-style-type: none"> ▪ Comprehensive special education, and ▪ inclusive curriculum <p>The UTC PreK-3 degree is a dual licensure program (PreK-3 regular and special education licensure). This degree requires 17 hours on special education.</p>	<p>Required: One 3-hour course on autism</p> <p>Autism is also covered in less depth within a number of other courses</p>	<p>UTC has not increased the number of courses in autism over the past five years.</p> <p>Note: The College of Health, Education and Professional Studies at UTC houses two Chairs of Excellence focused on special education:</p> <ul style="list-style-type: none"> ▪ <i>The McKee Chair of Excellence in Dyslexia and Associated Learning Exceptionalities</i> (focus on Dyslexia); and ▪ <i>The Siskin Children's Institute Chair of Excellence in Early Childhood Special Education.</i>
UT Health Sciences Center	<p>UT Health Sciences Center does not offer a teacher education program and did not provide a response. However, it should be noted that the Boling Center for Developmental Disabilities (BCDD) is located at the University of Tennessee Health Science Center.</p>				
UT Knoxville	No Reply	No	<p>Graduate level offers at least four courses as electives that cover autism, including autism-specific course, <i>Methods of Teaching Students with Autism Spectrum</i></p>	<p>Required courses: Autism is covered in at least seven courses, including Applied Behavior Analysis in School Settings.</p>	<p>Has expanded coursework and educational programs in the area of autism education.</p>

Board of Trustees Campus	Is your institution the recipient of any grant specifically related to Autism education?	Does your institution offer a Master Degree in Autism Education?	Number of course(s) and/or semester hours of special education included in teacher education programs	The extent of exposure to autism in the special education curricula	Has your institution expanded autism education considering the steady increase of students with autism in Tennessee?
<i>UT Martin</i>	A grant for a special education institute to fully license candidates teaching on any type of alternative license.	No	<p>Required: Two 3-credit courses:</p> <ul style="list-style-type: none"> ▪ Survey of Exceptional Children ▪ SPED 440/640 Advanced Methods for Students with Mild Disabilities <p>Autism is also covered in the Classroom Management course.</p>	<p>Required: The following courses (15 hours) include material no autism:</p> <ul style="list-style-type: none"> ▪ Characteristics and Needs of Children with Disabilities ▪ Language Development and Disorders ▪ Early Childhood – Special Education ▪ Educational Procedures for Children with Exceptionalities ▪ Assessment of Exceptional Children 	UTM Psychology department has two professors working closely with autism in West Tennessee – one is ABA - certified. Psychology Majors may complete clinical experiences at <i>The Children’s Center</i> , specializing in autism treatment.
<i>Summary</i>	Responses indicate no autism-specific grants.	Responses indicate no autism-specific degree offered.	<p>Responses indicate six hours of required special education instruction for general education curricula.</p> <p>Additionally, UTC requires 17 hours of special education for the <i>PreK-3 Degree</i> (dual degree in PreK-3 and special education) and autism is covered in the <i>Classroom Management</i> course at UTM.</p>	Generally, teacher special education students are not required to take autism-specific courses; rather, autism is covered in several courses. One exception is UTC, which requires a three-hour course on autism at UTC. UTK did not formally respond to this question.	Responses vary by institution, and each response indicates expansion of opportunities for students to receive autism-specific education.

* Note: Dr. Tom Buggey, Chair, Siskin Children’s Institute UTC, performs ongoing research on children with autism, and administers a program for early education students’ participation in educating children with autism in self-monitoring. He has published a body of work on autism, and numerous families have sought his guidance and treatment on the disorder.

Source: OREA, compilation of surveys of and interviews with select four-year universities and colleges at the Tennessee Board of Regents and University of Tennessee Board of Trustees, Feb. 2009.



PHIL BREDESEN
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TIMOTHY K. WEBB, Ed.D.
COMMISSIONER

September 8, 2010

Director Phillip Doss
Office of Research and Education Accountability
Comptroller of the Treasury
James K. Polk Building, Suite 1700
Nashville, Tennessee 37243-0268

Dear Director Doss:

Thank you for giving the Tennessee Department of Education (TDOE) the opportunity to review and comment on the report: "Autism in Tennessee: Part II, Education" (9-1-2010 draft). With its focus on public education services for students with autism, the report reviews early intervention services available, the transition to school-age services, and those offered to students through the age of 21, including secondary transition and its particular problems. Methodology is addressed with accompanying recommendations by the National Research Council report, as is the general special education process outlined by IDEA and options for parents within this process.

We found the discussion of developing school and district capacity especially beneficial, because of the fact that autism is often a costly disability. Since each student with autism is different, and no one program fits all, we must be ready with a wide array of services to meet the needs of every student.

TDOE appreciates the efforts of the OREA in gathering data and reporting on educational services for students with autism in Tennessee. It helps us immensely to be able to view strengths and weaknesses so that services can continue to improve. We look forward to the publication of Part III of this series.

Sincerely,


Timothy K. Webb, Ed.D.
Commissioner



October 22, 2010

Director Phillip Doss
Offices of Research and Education Accountability
Comptroller of the Treasury
James K. Polk Building, Suite 1700
Nashville, TN 37234-0268

Dear Director Doss:

This letter is to provide the Vanderbilt Kennedy Center and TRIAD's response to the Tennessee Comptroller of the Treasury, Offices of Research and Education Accountability report entitled "Autism in Tennessee: Special Education." This report accurately reflects interviews and information collected from Vanderbilt Kennedy Center and TRIAD faculty and staff.

The Vanderbilt Kennedy Center and TRIAD are appreciative of your important, in-depth review of public education services for students with autism including early intervention services and services for students at the elementary, middle, high school and secondary transition grade levels. We must all work together to more effectively and efficiently expand the training, evidence-based services and supports in this area offered to educators and families.

We at the Vanderbilt Kennedy Center and TRIAD appreciate your department's time and effort in developing this report on autism and education in Tennessee. We look forward to working with you and others in our state to improve the lives of individuals with autism and their families.

Sincerely,

Elise McMillan, JD
Co-Director
Vanderbilt Kennedy Center
for Excellence in Developmental Disabilities



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