

Supplemental Educational Services (SES) Data Requirements

Adjustments to Colorado's Supplemental Educational Services Data in 2015-2016

Data Collection and Submission

The SES data collection is used for program evaluation and federal reporting purposes. The completeness and accuracy of the data will impact how accurately the SES program is represented in Colorado. Districts are responsible for collecting implementation data, using the *SES Data Template*, and submitting that data to CDE at the end of each implementation year. For example, at the end of the 2015-2016 school year, districts will submit data on all students served during that year.

Through 2013-2014, providers submitted all required data through OMNI's online SES tracking system. Every month they were required to enter data for all of the students served during the previous month, including the dates and times each student received SES tutoring. Districts used the system to access student data and obtain the number of hours of tutoring each student received. At the end of the academic year, OMNI compiled all of the data uploaded over the course of the year and securely transferred the data to CDE.

The method for submitting this required data to CDE changed for the 2014-2015 academic year, and OMNI's online SES tracking system is no longer used. As in prior years, the provider, including districts that are serving as their own provider, must maintain a complete and accurate record of all required data elements, including each student's attendance by subject, date, and time. Once the provider has completed all tutoring for the academic year (July 2015 – June 2016), they must complete CDE's *SES Data Template* and submit it to the district(s) they are serving. The district then submits the completed template to CDE. CDE uses the data to evaluate the effectiveness of providers, and SES as a whole, in Colorado.

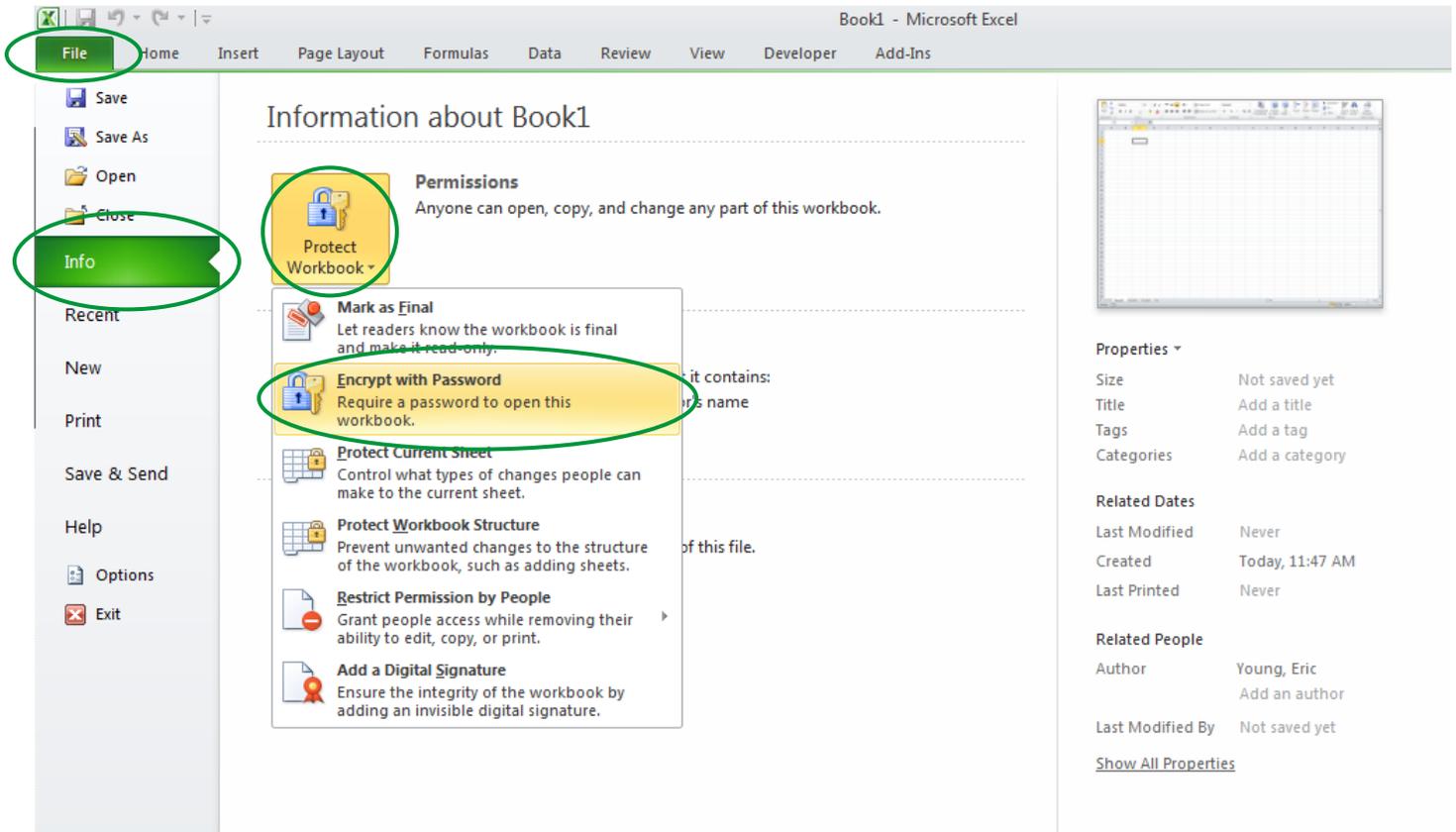
All of the required data elements from 2014-2015 are still required for 2015-2016 and are listed below. There are no new data elements, but descriptions of some elements have changed in an effort to clarify requirements. See the Data Collection section below for details regarding each data element.

Data Security

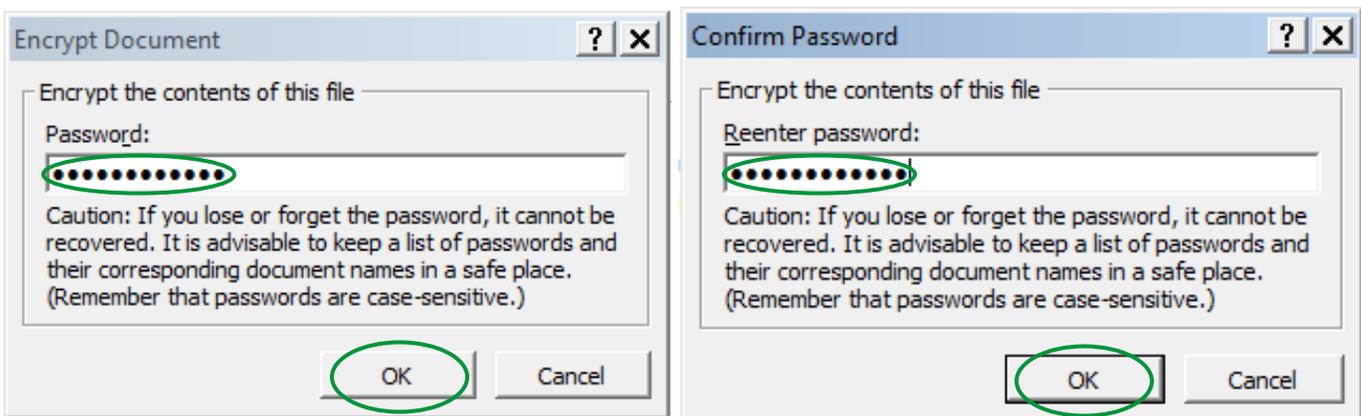
Districts need to communicate with their provider(s) regarding the most secure method for sending and receiving student records to ensure personally identifiable information is protected (e.g., a USB drive with password protected file).

Files must also be stored in a secure manner. Files should be password protected or stored in a password protected file, or both. Storing files on shared computers is discouraged.

To password protect a file in Microsoft Excel 2010, click on “File” in the upper left corner and then click on “Info” in the dropdown menu. Then click on the “Protect Workbook” box and click on “Encrypt with Password” from the dropdown menu.



You will then enter your password twice. After entering the password for the second time, click OK in the “Confirm Password” dialog box and save the file. The file is now password protected and the file will not open unless the password is entered. It is best to make the password at least 10 characters long and include numbers, symbols and upper case letters. Keep your password in a safe place as Excel cannot retrieve lost or forgotten passwords.





Evaluation

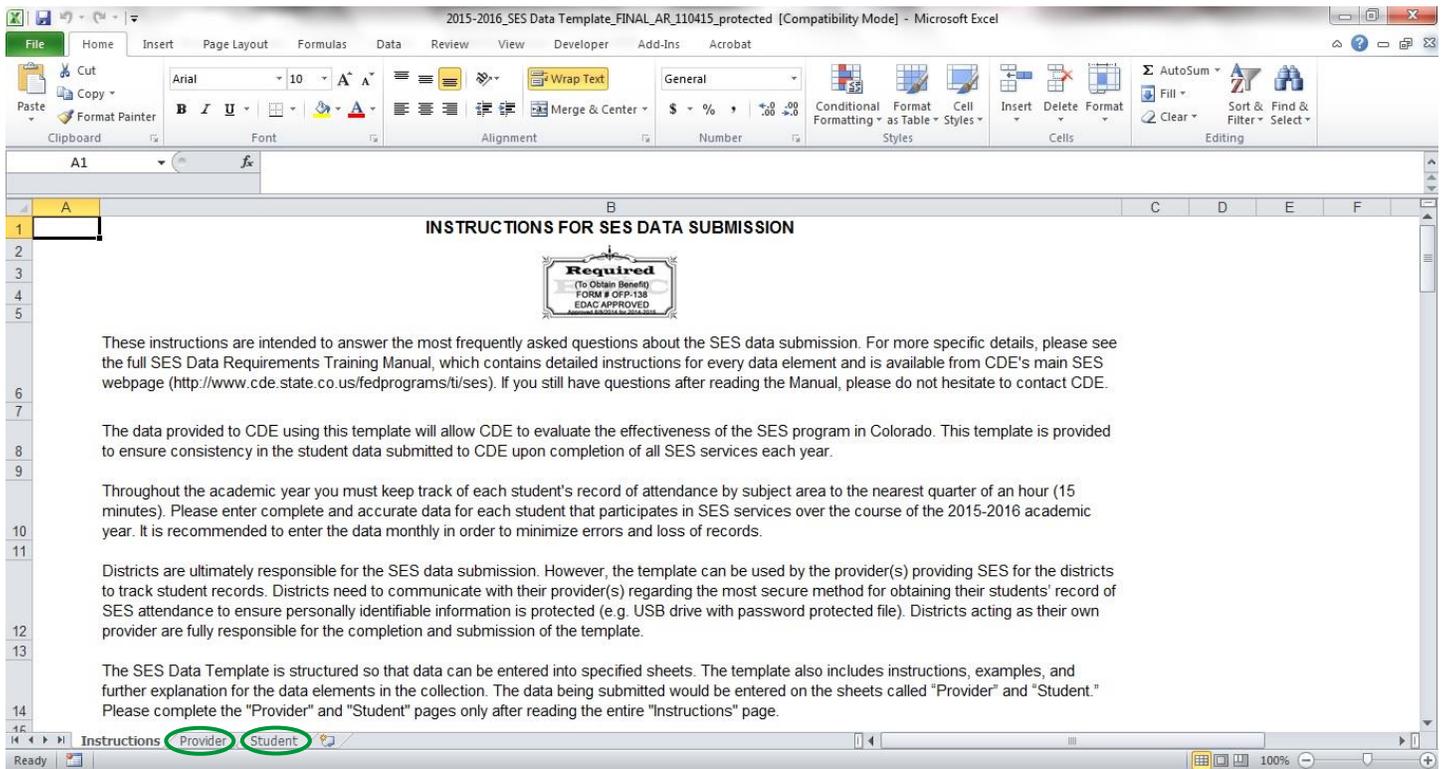
Although CDE no longer maintains a list of approved providers, we continue to use these data to evaluate the effectiveness of the SES program and its relation to improving Colorado students' academic performance as measured by state assessments, as well as the effectiveness of each of the SES providers and programs in Colorado. Districts are encouraged to use the evaluation findings to identify and select providers that have a demonstrated record of effectiveness. Evaluation results from prior years can be found at <http://www.cde.state.co.us/fedprograms/dper/evalrpts#tiases>.

Data Collection

Overview

Districts must have a process in place for disseminating information about this data collection and collecting the required data from staff members implementing the program on the district's behalf or from any external providers. The provider of SES tutoring must have a process in place for maintaining a detailed, accurate and complete record of SES activities so that all required data can be submitted to CDE in a timely manner.

CDE's *SES Data Template* includes all required data elements, separated into two tabs: "Provider" and "Student." Example data, along with descriptions of each data element, are also included at the top of the Provider and Student tabs.



The following two sections detail each required data element by column letter.



Provider Information

| Variable Label | Provider Name | Address | City | State | Zip Code | Phone Number | Fax Number | Website URL | Email Address |
|---|--|-----------------|--------|-------|----------|--------------|--------------|-----------------------|---------------|
| Definition and Description of each Variable | The provider name is the official name of the organization that provided the tutoring. If the LEA provided the tutoring, the provider name is the LEA name and should match the LEA name in column F of the Student tab. | | | | | | | | |
| Example Data | Tutoring In America | 123 Main Street | Denver | CO | 80202 | 303-555-5555 | 303-555-0000 | tutoringinamerica.com | ceo@tu |
| Data entered by the district and/or provider | | | | | | | | | |

B. Provider Name

The provider name is the official name of the organization that provided the tutoring. If the LEA provided the tutoring, the provider name is the LEA name and should match the LEA name in column G of the Student tab.

C. Address

Enter the physical mailing address of the main office of the provider entered in column B.

D. City

Enter the city aligning with the *Address* entered in column C.

E. State

Enter the state aligning with the *Address* entered in column C.

F. Zip Code

Enter the zip code aligning with the *Address* entered in column C.

G. Phone Number

Enter the best phone number at which to reach the provider entered in column B.

H. Fax Number

Enter the fax number of the provider entered in column B. If the provider does not have fax number, enter "N/A."

I. Website URL

Enter the website of the provider entered in column B. If the provider does not have a website, enter "N/A."

J. Email Address

Enter the best email address at which to reach the provider entered in column B.

K. Minutes per Session

Enter the scheduled length of each individual tutoring session. If scheduled sessions vary in length, enter the average session length. For example, if each session is scheduled to last 2 hours, enter 120. Or, if half of the sessions are scheduled to last 1 hour and the other half are scheduled to last 2 hours, enter 90.

L. Sessions per Week

Enter the number of individual tutoring sessions per week that are offered to students. If the number of sessions offered varies by week, enter the average number of sessions offered per week. For example, if 2 sessions are



available to students every week, enter 2. Or, if 2 sessions are available to students during 2 weeks and 3 sessions are available to students during the remaining 6 weeks, enter 2.75.

M. Total Number of Sessions

Enter the total number of sessions available for students to attend during the academic year (July 2015 – June 2016).

N. Total Number of Hours

Enter the total number of hours of tutoring offered to students during the academic year (July 2015 – June 2016). This should correspond to the values entered for *Minutes per Session* (column K) and *Total Number of Sessions* (column M). For example, if the length of each individual tutoring session is 90 minutes (1.5 hours) and 12 sessions were offered during the academic year (July 2015 – June 2016), enter 18.

O. Start Date (mm/dd/yy)

Enter the date on which tutoring was first offered to students during the 2015-2016 academic year (July 2015 – June 2016). For example, if the first SES tutoring session offered to students was on September 21, 2015, enter 09/21/15.

P. End Date (mm/dd/yy)

Enter the date on which tutoring was last offered to students during the 2015-2016 academic year (July 2015 – June 2016). For example, if the last SES tutoring session offered to students was on April 24, 2016, enter 04/24/16. This should not be later than the date of the data submission.

Q. Cost per Hour

Enter the hourly cost, in dollars, the SES provider charged to provide SES tutoring to a single student. The value entered should match the value in the contract between district and provider.

R. Total Cost

Enter the total cost, in dollars, the SES provider charged to provide SES tutoring to a single student. The value entered should align with the values entered for *Total Number of Hours* (column N) and *Cost per Hour* (column Q), and should match the value in the contract between district and provider.

S. Comments

If you have any comments that you feel would help us to interpret your data, please add them here.

Student Information

| Variable Label | Provider Name | SASID (10 digits) | Student's First Name | Student's Last Name | Student's Grade Level (PK - 12) | LEA Name | LEA Code | School Year |
|---|---|--|----------------------|---------------------|---|--|--|-------------------|
| Definition and Description of each Variable | The name of the Provider from which the student received tutoring. The name should align with column A in the Provider Sheet. | State Assigned Student Identification Number. Must be 10 digits (i.e. 1234567890). | | | The student's grade level during the 2015-2016 academic year. | The name of the SES-eligible local education association that the student attended during the 2015-2016 academic year. | The code of the SES-eligible local education association that the student attended in 2015-2016. The value will automatically be entered once you select "LEA Name." | The student year. |
| Example Data | Tutoring In America | 1234567890 | George | Washington | 7 | ADAMS 12 FIVE STAR SCHOOLS | 0020 | Coro |
| Data entered by the district and/or provider | Tutoring In America | 1234567890 | George | Washington | 7 | ADAMS 12 FIVE STAR SCHOOLS | 0020 | Coro |

**B. Provider Name**

Enter the name of the provider from which the student received tutoring. The name should align with the *Provider Name* entered column B of the *Provider* sheet.

C. SASID (10 digits)

Enter the 10-digit State Assigned Student ID (SASID) of the student that received SES tutoring. For example, 1234567890.

D. Student's First Name

Enter the legal first name of the student that received SES tutoring. The name should align with the *SASID* entered in column C.

E. Student's Last Name

Enter the legal surname of the student that received SES tutoring. The name should align with the *SASID* entered in column C.

F. Student's Grade Level

Enter the student's grade level during the 2015-2016 academic year.

G. LEA Name

Select from the drop down the name of the SES-eligible Local Education Agency in which the student is enrolled during the 2015-2016 academic year.

H. LEA Code

The 4-digit code assigned to the *LEA Name* (column G). This will be entered automatically when you select an LEA name in column G.

I. School Name

Select from the drop down the name of the SES-eligible school in which the student is enrolled during the 2015-2016 academic year.

J. School Code

The 4-digit code assigned to the *School Name* (column I). This will be entered automatically when you select a school name in column I.

K. Eligibility Criteria 1 – Assessment or Body of Evidence Used to Identify Student as Eligible for SES

According to SES guidance, the assessment or body of evidence that was used to identify the student as being eligible for SES. For example: TCAP, WIDA ACCESS, etc.

L. Eligibility Criteria 2 – Minimum Criteria

This provides more evidence regarding the previous column ("Eligibility Criteria 1 - Assessment or Body of Evidence Used to Identify Student"). In this column, provide the cut-off score at which students were eligible for SES. For example: Partially Proficient, NEP, etc. Note that students who took the same assessment should all have the same minimum criteria.

M. Content Area

Enter the content area of tutoring that the student received. If a student received tutoring in more than one content area, create a separate row for each content area. If tutoring in different content areas occurs on the same day, the time devoted to each content area must be tracked and reported separately. To distinguish between reading and writing, determine whether the tutoring is mainly focused on addressing deficits in reading ability or in writing ability.

Select one of the following options from the dropdown.

ELD (English Language Development)

The student received tutoring dedicated to ELD that is specific to English Learners (ELs).

Math

The student received tutoring dedicated to improving mathematics ability.

Reading

The student received tutoring dedicated to improving reading ability.

Writing



The student received tutoring dedicated to improving writing ability.

N. First Session Date (mm/dd/yy)

Enter the date of the first tutoring session the student attended during the 2015-2016 academic year (July 2015 – June 2016). This should be on an individual student basis; we need to know exactly when each individual student started receiving services. For example, if the first session the student attended was on September 28, 2015, enter 09/28/15.

O. Last Session Date (mm/dd/yy)

Enter the date of the last tutoring session the student attended during the 2015-2016 academic year (July 2015 – June 2016). This should be on an individual student basis; we need to know exactly when each individual student stopped receiving services. For example, if the last session the student attended was on April 17, 2016, enter 04/17/16.

P. Time of Day of Sessions

Enter the time of day tutoring sessions begin.

Select one of the following options from the dropdown.

Before school

All tutoring sessions begin on weekday mornings, immediately before the students' first class of the school day.

Lunch time

All tutoring sessions take place on weekdays, during the time dedicated for students' lunch.

After school (late afternoon)

All tutoring sessions begin on weekdays, after the students' last class of the school day and before 5:00 pm.

Evening

All tutoring sessions begin on weekdays, at 5 pm or later.

Weekend

All tutoring sessions take place on Saturday or Sunday.

Pullout during school day

All tutoring sessions take place during the school day when students' would normally be taking a scheduled class.

Multiple (specify)

Students received SES tutoring during any combination of options. If this option is selected you must enter details in column Q.

Other (specify)

Students received all SES tutoring during a time not represented by any of the above options. If this option is selected you must enter details in column Q.

Q. If multiple or other, please specify

If "Multiple (specify)" is selected as the *Time of Day of Sessions* (column P), specify the combination of options that apply in as much detail as possible. For example, if a third of the tutoring sessions occurred on the weekend and the other two thirds occurred on weekdays during the evening, enter "A third of sessions were on the weekend and two thirds were during the evening."

If "Other (specify)" is selected as the *Time of Day of Sessions* (column P), specify the time in as much detail as possible.

Note: If a *Time of Day of Sessions* other than "Multiple (specify)" or "Other (specify)" is selected, leave this column blank.



R. Session Format

Indicate the format in which tutoring is provided to students.

Select one of the following options from the dropdown.

In person

All tutoring is provided to students face-to-face, with the tutor and students in the same room.

Online

All tutoring is provided to students via an internet connection using a computer or tablet whereby the tutor is not face-to-face with the student(s) in the same room.

Hybrid (both in person and online)

Students receive a portion of tutoring in person and the remaining portion of tutoring online.

S. Location of Tutoring

Enter the location where students received tutoring. If *Session Format* is “Online,” select the location where students access the computer or tablet. If *Session Format* is “Hybrid,” include both “In person” and “Online” locations and select “Multiple” if their locations differ.

Select one of the following options from the dropdown.

School

Students received all SES tutoring at school.

Home

Students received all SES tutoring at their place of residence.

Community center

Students received all SES tutoring at a building in the community that is not a school or the provider’s facility. For example, a public library or church.

Provider facility

Students received all SES tutoring at a facility owned or rented by the provider.

Multiple (specify)

Students received SES tutoring at any combination of options. If this option is selected you must enter details in column T.

Other (specify)

Students received all SES tutoring at a location that is not represented by any of the above options. If this option is selected you must enter details in column T.

T. If multiple or other, please specify

If “Multiple (specify)” is selected as the *Location of Tutoring* (column S), specify the combination of options that apply in as much detail as possible. For example, if half of the tutoring sessions occurred at school and the other half occurred in the student’s home, enter “Half at school and half at home.”

If “Other (specify)” is selected as the *Location of Tutoring* (column S), specify the location in as much detail as possible.

Note: If a *Location of Tutoring* (column S) other than “Multiple (specify)” or “Other (specify)” is selected, leave this column blank.

U. Session Type

Enter the number of students present when tutoring takes place.

Select one of the following options from the dropdown.

Individual

All tutoring is provided to students individually, one-on-one.

Group of 2 – 5 students



All tutoring is provided to students in groups of two, three, four or five students.

Group of 6 – 10 students

All tutoring is provided to students in groups of six, seven, eight, nine, or ten students.

Group of more than 10 students

All tutoring is provided to students in groups of eleven or more students.

Multiple group sizes (specify)

Tutoring is provided to students in any combination of the above options. If you select this option you must specify the combination in column V.

V. If multiple, please specify

If “Multiple (specify)” is selected as the *Session Type* (column T), enter the combination of options that apply in as much detail as possible. For example, if half of the tutoring sessions include 4 students and the other half include 6 students, enter “Half in groups of 4 and half in groups of 6.”

Note: If a *Session Type* other than “Multiple (specify)” is selected, leave this column blank.

W. State Assessment Test Date for Content Area (mm/dd/yy)

The date the student completed the state assessment (for the current 2015-2016 academic year) corresponding to the content area of tutoring. For ELD, report the ACCESS test date. For Math, Reading, and Writing, report the PARCC performance-based assessment test date. Because we use the state assessment in the tutoring content area as an outcome measure for the state evaluation, it is important to know how much of the tutoring was completed prior to the current year’s test date. This does not correspond to the test in column K (Eligibility Criteria 1).

X. Number of Hours of Tutoring Received Prior to Test Date in Content Area

The exact number of hours, to the nearest quarter of an hour (i.e., 20.00, 20.25, 20.50, 20.75), of tutoring the student received in the corresponding content area prior to the “State Assessment Test Date.” For example: If a student completes a total of 25 hours of tutoring in math, but 10 hours occurred on or after the school’s administration of the PARCC math assessment, enter 15 hours.

Y. Number of Hours of Tutoring Received On and After Test Date in Content Area

The exact number of hours, to the nearest quarter of an hour (i.e., 20.00, 20.25, 20.50, 20.75), of tutoring the student received in the corresponding content area on or after the “State Assessment Test Date.” For example: If a student completes a total of 25 hours of tutoring in math and 10 of those hours occurred on or after the school’s administration of the PARCC math assessment, enter 10 hours.

Z. Program Name

Enter further details beyond the content area of tutoring. For example, the name of the program or materials used, or other identifying features of the tutoring received by the student.

AA. Tutor First Name

Enter the legal first name of the tutor that delivered the majority of SES tutoring to the student.

AB. Tutor Last Name

Enter the legal surname of the tutor that delivered the majority of SES tutoring to the student.

AC. Test 1 Name

Enter the official name of the test the provider administered to the student at the beginning and ending of tutoring. See “Test notes” below.

AD. Test 1 Content Area

Enter the content area of *Test 1 Name* (column AC). If a test was not administered in the content area of tutoring, enter ‘N/A’.

Select one of the following options from the dropdown.

ELD

The test measures an English Learner’s level of fluency in English.

Math



The test measures the student's level of proficiency in math.

Reading

The test measures the student's level of proficiency in reading.

Writing

The test measures the student's level of proficiency in writing.

Other (specify)

The test does not specifically measure any of the above options. If this option is selected you must enter details in column AD.

AE. If other, please specify

If "Other (specify)" is selected as the *Test 1 Content Area* (column AD), specify the content area(s) in as much detail as possible.

Note: If a *Test 1 Content Area* (column AD) other than "Other (specify)" is selected, leave this column blank.

AF. Test 1 Detail

Enter further identifying information for *Test 1 Name* (column AB), beyond the test name, content area, and score type. If reporting multiple subscales from the same test, indicate the subscale here. For example: Word use fluency, letter recognition, pre-algebra, etc. See "Test notes" below.

AG. Test 1 Pre-test Date

Enter the date on which the student first completed the test.

AH. Test 1 Pre-test Score

Enter the score the student received when first completing the test.

AI. Test 1 Post-test Date

Enter the date on which the student last completed the test.

AJ. Test 1 Post-test Score

Enter the score the student received when last completing the test.

AK. Test 1 Score Type

Enter the type of score that was entered for *Pre-test Score* (column AG) and *Post-test Score* (column AI).

Select one of the following options from the dropdown.

Raw scores

The number of questions the student answered correctly.

Percent correct

The number of questions the student answered correctly divided by the total number of questions answered.

Percentiles

The percentile in which the student's score falls.

Standardized

The standardized score based on the distribution of all students' scores.

Normed

The norm-referenced score.

Grade equivalent

The grade level at which the student performed according to the test results.

Age equivalent

The age at which the student performed according to the test results.

AL. Test 1 Comments

If any of the test fields have 'N/A', enter a detailed explanation. See "Test notes" below.



Test Notes

If a student did not take the pre- and/or post-test, enter the test name, content area, and detail of the test they would have taken had they been able to participate in the test. Then enter "N/A" for the pre- and post-test dates and scores and score type. If you enter "N/A" for either the pre- or post-test date and score, then you must give the reason in the test comments column for why the test was not taken. If a student completes more than one pre- and post-test, please provide that information in the Test 2 through Test 7 columns. If a student took more than seven pre- and post-tests, please contact CDE using the contact information below.

Data Submission

Once you have completed the Provider and Student worksheets for every student that received SES throughout the entire academic year (July 2015 – June 2016), you must securely submit the file to CDE. First, save the final copy of the completed template using the following naming convention: 20152016SESDData_ProviderName_MMDDYY.xls, where MMDDYY is the date you submit the file to CDE. For example: 20152016SESDData_SESTutoringCompany_053116.xls.

Do not send the file via e-mail as it is not a secure method of transfer. Once the file is complete and named following the above convention, please contact CDE using the contact information below indicating that you are ready to submit and provide the email address of the person responsible for submitting the file. CDE will then send a file through the Secure File Transfer Server (SFTS) (<https://transfer.cde.state.co.us/bds/Login.do>) to the email address of the person responsible for submitting the file. You will then receive an email from rechlin_a@cde.state.co.us with a link to register for the SFTS. Click on the link and fill in the appropriate information, including the image verification field. If the image does not load click the refresh button and enter the number or letters in the picture in the box under the picture. If the image still does not load click the sound button and enter the numbers or letters you hear. Once all of the required data fields are filled in click the "Register" button.

User Registration

To view your delivery, you must be a registered user. Please enter your information for registration, your email address will be your sign in username
Already registered? Visit the [Account activation](#) page or [click here](#) to have the activation email resent to you.

For LDAP or Active Directory users, [click here to sign in using your network username and password.](#)

Email address*

Confirm email address*

Name

| First name | Middle name | Last name |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Display as*

Password*

Confirm password*

Password strength

Password reset question

| Question | Answer | Hint |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Image verification*

reCAPTCHA challenge image  

[Privacy & Terms](#)

* Required fields

←

The page will update and thank you for registering. It may take several minutes for the page to update.

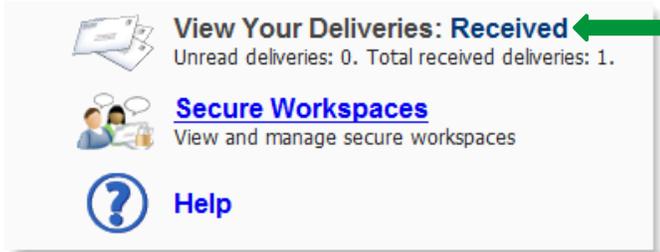


User Registration

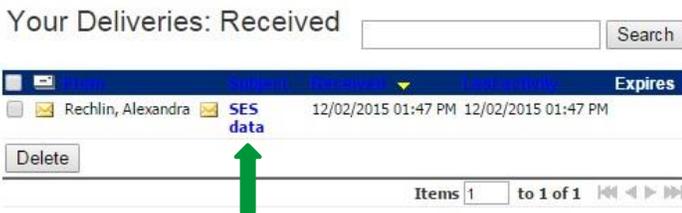
Thank you for registering! A message has been sent to your email. Please follow the instructions in the email to activate your account.



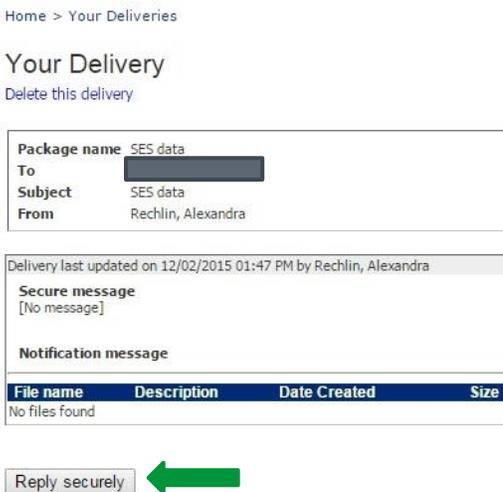
You will then receive an email from notify@transfer.cde.state.co.us with a link to activate your SFTS account. It may take several minutes for you to receive this email. Occasionally these messages get flagged as junk mail, so be sure to check your spam folder if you do not receive the email. Click on the link in the email and you will be taken to the login page. Enter your email address and password to login. Once you login in, click on “Received”.



Then click on the blue text under the “Subject” column. It should say “SES data.”



Click on the “Reply Securely” button.



Click on the “Choose File” button, locate the completed template, highlight the file, and click “Open.” The template will appear under the “File name” column. Click “Send reply.”



Your Delivery

Delete this delivery

Package name SES data
To [Redacted]
Subject SES data
From Rechlin, Alexandra

Delivery last updated on 12/02/2015 01:47 PM by Rechlin, Alexandra

Secure message
[No message]

Notification message

| File name | Description | Date Created | Size |
|----------------|-------------|--------------|------|
| No files found | | | |

Subject Re: SES data

Secure message

- Choose File No file chosen

Send reply

You will then be able to see the message you have sent.

Contact Information

If you have any questions, please contact:

Alexandra Rechlin

rechlin_a@cde.state.co.us

303-866-4571

Where can I learn more?

- CDE's SES webpage:
<http://www.cde.state.co.us/fedprograms/ti/ses>
- Information on safeguarding of student data:
<http://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>