

Sylvan Union School District

Special Education



Staff Handbook

October 2018

Acronyms in Special Education

504	Section 504 of The Rehabilitation Act of 1973	CMH	County Department of Mental Health
ABA	Applied Behavior Analysis	CP	Cerebral Palsy
ADA	Americans with Disabilities Act	CPI	Crisis Prevention Intervention
ADA	Average Daily Attendance	CPS	Child Protective Services
ADA	American Diabetes Association	CSNO	California School Nurse Organization
ADD	Attention Deficit Disorder	CSHA	California Speech Language Hearing Association
ADHD	Attention Deficit Hyperactivity Disorder	CWA	Child Welfare and Attendance
ADI	Autism Diagnostic Interview Revised	ID	Intellectually Delayed
ADOS	Autism Diagnostic Observation Scale	DHH	Deaf & Hard of Hearing
ADR	Alternative Dispute Resolution	DIS	Designated Instructional Services
ALJ	Administrative Law Judge	DMH	Department of Mental Health
APE	Adapted Physical Education	DSM-IV	Diagnostic & Statistical Manual of Mental Disorders 5th Edition
ASD	Autism Spectrum Disorder	DTT	Discrete Trial Training
ASHA	American Speech-Language-Hearing Association	ED	Emotionally Disturbed
AT	Assistive Technology	EHA	Education for All Handicapped Children Act
ASD	Autism Spectrum Disorder	EL	English Learner
AUT	Autism	ESY	Extended School Year
AYP	Average Yearly Progress	ERMHS	Educationally Related Mental Health Services
BSA	Behavior Support Aide	FAPE	Free Appropriate Public Education
BASC	Behavior Assessment Scale for Children	FBA	Functional Behavior Assessment
BCBA	Board Certified Behavior Analyst	FERPA	Family Educational Rights and Privacy Act
BD	Behavior Disorder	GARS	Gilliam Autism Rating Scale
BEIR	Behavior Emergency Incident Report	HHI	Home/Hospital Instruction
BIP	Behavior Intervention Plan	HI	Hearing Impaired
CAN	California Nurses Association	HI	Home Instruction
CARS	Childhood Autism Rating Scale	IPLA	Instructional Paraprofessional Learning Assistant
CASA	Court Appointed Special Advocate	IAES	Interim Alternative Educational Setting
CASP	California Association of School Psychologists	IEE	Independent Educational Evaluation
CCC-SLP	Certificate of Clinical Competence for Speech-Language Pathologist	IEP	Individualized Education Program
CCS	California Children's Services	IFSP	Individualized Family Services Plan
CDE	California Department of Education	ISP	Individualized Services Plan
CHAT	Checklist for Autism in Toddlers	IWEN	Individual with Exceptional Needs
LCI	Licensed Children's Institution	PRT	Pivotal Response Therapy
LD	Learning Disability	PT	Physical Therapy

LEA	Local Education Agency	PWN	Prior Written Notice
LEP	Licensed Educational Psychologist	RSP	Resource Specialist Program
LEP	Limited English Proficient	RTC	Residential Treatment Center
LRE	Least Restrictive Environment	RTI	Response to Intervention
MCHAT	Modified Checklist for Autism in Toddlers	SARB	Student Attendance Review Board
MH	Mental Health	SBE	State Board of Education
M/M	Mild /Moderate	SCOE	Stanislaus County of Education
M/S	Moderate Severe	SDC	Special Day Class
NASN	National Association of School Nurses	SEA	State Education Agency
NASP	National Association of School Psychologists	SED	Severe Emotional Disturbance
NOI	Notice of Insufficiency	SELPA	Special Education Local Plan Area
NPA	Non-Public Agency	SH	Severely Handicapped
NPS	Non-Public School	SLI	Speech Language Impairment
OAH	California Office of Administrative Hearings	SLD	Specific Learning Disability
OCD	Obsessive Compulsive Disorder	SLP	Speech and Language Pathologist
OCR	U.S. Office of Civil Rights	SST	Student Study Team
ODD	Oppositional Defiant Disorder	TAPS	Test of Auditory-Perceptual Skills
OHI	Other Health Impairment	TBI	Traumatic Brain Injury
OI	Orthopedically Impaired	TEACCH	Treatment and Education of Autistic and Related Communication Handicapped Children
OSEP	Office of Special Education Programs	TRO	Temporary Restraining Order
OSERS	U.S. Office of Special Education and Rehabilitation Services	TVPS	Test of Visual-Perceptual Skills
OT	Occupational Therapy	USDOE	United States Department of Education
OWLS	Oral and Written Language Scale	VI	Visually Impaired
PBIS	Positive Behavioral Interventions & Supports	VMI	Beery Buktenica Developmental Test of Visual-Motor Integration
PECS	Picture Exchange Communication System	WCJ	Woodcock-Johnson Tests of Achievement or Cognition
PLAA	Present Levels of Academic Performance	WIAT	Wechsler Individual Achievement Test
CPI	Crisis Prevention Intervention	WISC	Wechsler Intelligence Scale for Children

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Section 1:

Eligibility Requirements

Child Find

(20 U.S.C. § 1412 [a][3])

It shall be the policy of this LEA that **all children with disabilities residing in the State, including children with disabilities** who are homeless or are wards of the State and children with disabilities attending private schools, regardless of the severity of their disabilities, and who are in need of special education and related services, **are identified, located, and evaluated**. A practical method has been developed and implemented to determine which children with disabilities are currently receiving needed special education and related services.

Referral and Assessment Process for School-Age Students

A student shall be referred for special educational instruction and services only after the resources of the general education program have been considered and, where appropriate, utilized (E.C. 56303).

Any person who suspects that a student, age 0 through 21 years of age, may be an individual with exceptional needs may make a referral by contacting the school, district office, or the SELPA office.

1. The identification of students with exceptional needs shall be coordinated with school site procedures for identifying those students whose needs have been found to be beyond the resources of the general education program.
2. The initiation of a referral is completed by the **General Education Teacher** using the Student Study Team Referral forms.
3. The SST team will meet to discuss student need, parent concerns and general education accommodations and supports that are accessible to student. If the SST team determines assessment is warranted, a case manager is appointed (usually a special education teacher) and an Assessment Plan is developed within 15 calendar days.
4. The Assessment Plan shall include assessment of the student in ***all areas of suspected disability***.

The Case Manager (examples-speech therapist, SDC teacher, Resource specialist) will provide the parent with the Health & Development form and obtain signatures on the Medi-Cal form at the time of the signing of the Assessment Plan.

Case manager, under the direction of the site administrator, is responsible for:

- Being the primary contact with the parent(s) and other agencies
- Ensuring that all required notices are provided to parents and that parent signatures are obtained
- Scanning and emailing a copy of the signed Assessment Plan, SST referral notes, Medi-Cal forms and completed Health & Development form to all team members who will be assessing

- Coordinating observation and testing
- Ensuring that all assessments that are required and have been agreed upon are conducted following the receipt of parent consent for assessment
- Coordinating with parent, administrator, assessors and other IEP team members the scheduling of the IEP meeting within the timeline.
- Finalize the IEP paperwork after the IEP meeting.

Parent Request

- The parent requests, in writing, that her/his child be assessed to determine eligibility for special education services. If a parent makes a verbal request for an assessment, the parent should be informed that the request needs to be put into writing. If necessary, assistance should be offered and provided to the parent to put the request in writing.
- The letter must be dated by the parent and by the receiving District representative. The team should schedule an SST meeting within 15 days to determine whether an Assessment plan needs to be developed.
- If during the SST meeting parents decide they no longer want their student assessed then it should be documented in the notes that parents are rescinding their request for assessment and parents need to sign that they are in agreement with not going forward with the assessment.

Student Study Team (SST) Referral

A Student Study Team may refer a student for assessment to determine eligibility for special education services. Prior to referral, the Student Study Team will normally consider and/or review the interventions, accommodations, and modifications that have been (or may be) made in the general education environment in order to meet the educational needs of the student. The Student Study Team is established by the Local Educational Agency (LEA) and is a function of the general education program/process.

Private School Referral

The staff or the parent of a student attending a private or non-public school may make a referral, in writing, to the private school's District of Residence for assessment to determine eligibility for special education services. If the student's District of Residence is different than Sylvan Union School District, a *Release of Information* would be requested in order to share information with the student's home District. Once a Release of Information has been signed, the Sylvan Union School will confer with the student's home district.

Once the assessment is completed, both districts should be invited to the IEP meeting. The District of the student's residence is required to offer FAPE if the child is found eligible for special education services.

Health Assessment Guidelines

For all Initials and Triennials, as well as Annuals, and any student who has significant health issues (i.e. emergency plan, diabetes, seizure disorder, tube feeding, etc.)

School Nurse Responsibilities

- Assess the student (vision, hearing, height, weight) and review the Health and Development Assessment form

- Determines if further information is needed, which may include: calling parent, doing a home visit, getting release of information signed and requesting medical records, or calling health care providers
- If the completed *Health and Development Assessment* form has not been returned within 3 weeks, the School Nurse will follow-up to obtain the necessary information
- Document health review in the health file and place a copy of the health form into the health file. The original Health and Assessment form is returned to the Case Manager
- The School Nurse emails the Case Manager a *Health Summary Report* to be used in the IEP reports
- If the School Nurse feels there are no health issues that affect the child's learning or success in school, and they do not need to attend the IEP, they notify the parent and have an excusal form signed. The excusal form along with the Health reports is then given to the case manager
- If the school nurse feels that there is a health issue that the IEP team needs to be informed about or needs further exploring, the School Nurse will attend the IEP meeting and review the health history with the team and provide a health plan to support the student

Parent Consent for Initial Assessment

Informed consent from a student's parent is required to conduct an initial assessment.

Procedural safeguards and thorough explanations are critical as "informed consent" is the standard. Parents must understand that permission for this assessment may lead to the recommendation for special education eligibility.

A prior written notice form if the parent does not consent to the initial assessment of a student or fails to respond, then the District may pursue a Due Process hearing in order to conduct the assessment. The request for assessment must be written in order to document the time the request was received. **Contact a Program Specialist if the parent does not consent. Your obligation to Child Find does not end; you should continue to hold SST's and document parent refusal for assessment.** (Code Section 56029)

If parental consent is not provided for an initial referral, the referral form, Assessment Plan, and all other related documentation should be placed in the student's cumulative file. The LEA may use mediation and/or Due Process hearing procedures to pursue the evaluation. The LEA does not violate its Child Find responsibilities if it declines to pursue the evaluation after making reasonable efforts to obtain parental consent. ((300.300 (a) (3)(ii) and (c)(i))

If the child is a ward of the state (which does not include a child who has a foster parent) and not residing with a parent, reasonable efforts shall be made to obtain parent consent. No parental consent is required if the parent cannot be found, parental rights have been terminated, or a judge has appointed an individual with educational authority. In this case, an educational surrogate may be appointed.

Educational Rights

Appointed Educational Rights Holder: Order and appointment (§§ 319, 361, 366, 366.27, 366.3, 726, 727.2; Gov. Code, §§ 7579.5-7579.6; 20 U.S.C. § 1415; 34 C.F.R. § 300.519)

1. Whenever it limits, even temporarily, the rights of a parent or guardian to make educational or developmental-services decisions for a child, the court must use form JV-535 to appoint a responsible adult as educational rights holder or to document that one of the following circumstances exists:
2. The child is a dependent child or ward of the court and has a court-ordered permanent plan of placement in a planned permanent living arrangement. The caregiver may, without a court order, exercise educational decision making rights under Education Code section 56055 and developmental-services decision making rights under section 361 or 726, and is not prohibited from exercising those rights by section 361, 726, or 4701.6(b), or by 34 Code of Federal Regulations section 300.519 or 303.422;
3. The court cannot identify a responsible adult to serve as the child's Educational Rights Holder under section 319, 361, or 726 or under Education Code section 56055; and
 - (A) The child is a dependent child or ward of the court and is or may be eligible for special education and related services or already has a valid Individualized Education Program, and the court:
 - (i) Refers the child to the Local Educational Agency for the appointment of a surrogate parent under section 361 or 726, Government Code section 7579.5, and title 20 United States Code section 1415; and
 - (ii) Will, with the input of any interested person, make developmental-services decisions for the child; or
 - (B) The appointment of a surrogate parent is not warranted, and the court will, with the input of any interested person, make educational and developmental-services decisions for the child.
 - (C) If the court must temporarily make educational or developmental-services decisions for a child before disposition, it must order that every effort be made to identify a responsible adult to make future educational or developmental-services decisions for the child.

Assessment Planning

An initial evaluation shall be conducted, pursuant to a request by the parents, SST team or public agency, before the initial provision of special education and related services to a child with a disability.

In conducting the evaluation, the LEA must use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information to determine whether the child is special education eligible and the content of the child's IEP. No single procedure shall be used as the sole criterion for determining eligibility for special education. The student shall be assessed in **all** areas related to the suspected disability.

The evaluation must be sufficiently comprehensive to identify **all** of the child's special education and related service needs, whether or not commonly linked to the child's disability category. Also, if appropriate, members of the IEP Team and other qualified personnel review existing information to determine what additional data needs to be collected as part of the evaluation.

The Assessment Plan is developed by a team and contains a written description of assessment areas and the professionals responsible (**job title only**) for its completion. Whenever possible, **Professionals should be consulted before adding them to an Assessment Plan.**

In reviewing the Assessment Plan (AP) with the parent/guardian (or person with Educational Rights), the case manager is also responsible for having the parent sign a **Medi-Cal waiver**; explaining and providing a copy of the **Notice of Procedural Safeguards**. These forms must also be provided in the primary language of the parent/guardian when feasible. The parent/guardian has 15 days to provide consent for the assessment.

Assessment Timeline

Upon obtaining consent, **the case manager should immediately distribute a copy by scanning and emailing the Assessment Plan to every professional involved in the assessment.** All assessments must be completed and an IEP meeting convened within 60 calendar days, not counting days between the student's regular school sessions, terms, or days of school vacation **in excess of five school days** (e.g., winter break, spring break, and summer vacation), from the date of receipt of written consent to the assessment plan. If a parent provides written consent to an Assessment Plan 30 days or less prior to the end of a school year, an IEP meeting must be convened to review the assessment within 30 days after the commencement of the subsequent school year. If parental consent is not provided for an initial referral, the referral form, Assessment Plan, and all other related documentation should be placed in the student's cumulative file.

Triennial Assessments

A complete reassessment of students who qualify for special education shall be conducted at least every three years, or more frequently unless the IEP team, including the parent, finds no additional data is necessary to determine that the student continues to be an individual with exceptional needs. If assessments are necessary, a new Assessment Plan must be developed and all relevant procedures must be followed.

A District may conduct the re-evaluation without consent if it has taken reasonable measures to obtain consent and the parent has not responded. The IDEA requires the District to have a record of its attempts in requesting consent for re-evaluation in meeting the reasonable measure requirement. In situations such as this, case managers must confer with their Program Specialist prior to assessing.

Primary Language Assessment

- Materials and procedures used to assess a child with limited English proficiency shall be selected and administered to ensure that they measure the extent to which the student has a disability and needs special education, rather than measuring the student's English language skills.
- Evaluations are to be administered in a language and form most likely to yield accurate information on what the student knows and can do academically, developmentally and functionally unless not feasible. Bilingual interpreters may be used to assist school personnel in administering assessments.

Alternate Assessment

African American Students

- Alternative assessment methodologies are mandated in the assessment of African-American students and are useful in the assessment of other students in which traditional assessment techniques may not provide reliable data.
- Per the Larry P. vs. Riles court decision of 1979 and the Larry P. Task Force Report of 1989, no tests shall be administered to African-American students for the explicit purpose of deriving an I.Q. score for special education placement.
- This amended decision bans the use of all standardized intelligence tests for African American students for “any special education purpose”.

Cognitive Tests Prohibited Per Larry P.

Note: Any test or subtest that may provide an I.Q. score is prohibited. The following list is not intended to be all-inclusive.

Arthur Point Scale of Performance Test, Form 2 Catell
Infant Intelligence Scale
Cognitive Test of Batelle Development Inventory Columbia Mental
Maturity Scale – Revised Comprehensive Test of Nonverbal
Intelligence (CTONI) Detroit Test of Learning Aptitude – 2 (DTLA-
2)
Draw-A-Person (Goodenough) Gesell
Development Schedule
Leiter International Performance Scale McCarthy
Scales of Children’s Abilities Merrill-Palmer Pre-School
Performance Test Peabody Picture Vocabulary Test
Peabody Picture Vocabulary Test – Revised Raven
Progressive Matrices
Slosson Intelligence Test Stanford-
Binet
Stanford-Binet, Revised
Test of Nonverbal Intelligence (TONI)
Test of Nonverbal Intelligence – Revised (TONI-R) Test de
Vocabulario in Imagines – Peabody Wechsler Adult
Intelligence Scale (WAIS)
Wechsler Adult Intelligence Scale – Revised (WAIS-R) Wechsler
Intelligence Scale for Children (WISC)
Wechsler Intelligence Scale for Children – Revised (WISC-R) Wechsler
Intelligence Scale for Children, 3rd Edition (WISC-III or IV) Wechsler Pre-School
and Primary Scale of Intelligence (WPPSI)
Wechsler Pre-School and Primary Scale of Intelligence, Revised (WPPSI-R)
Woodcock-Johnson, Tests of Cognitive Ability

Woodcock-Johnson, Tests of Cognitive Ability, Revised (WJ-R)
Woodcock-Munoz (Bateria) Test of Cognitive Ability
Woodcock-Munoz (Bateria) Test of Cognitive Ability, Revised (WJ-B) A & B

Speech Language Tests Prohibited Per Larry P.

CASL
CELF-4
EOWPVT-4
ROWPVT-4

Assessment Reports

Copies of all assessment reports must be provided to parents at the IEP meeting. In addition, if the report is completed prior to the IEP meeting, the report may be provided to the parents.

Those providers who are assessing a student shall maintain a complete and specific record of diagnostic procedures and assessments employed, the instruments utilized, the conclusions reached and the proposed education or treatment alternatives indicated by the assessment results. Assessment team members will prepare written assessment reports that address areas included in the assessment plan.

- The results of each assessment shall include the identification of the primary disability and the disabling condition, if any, including the appropriate eligibility criteria.
- The report shall include, but not be limited to, the following:
 1. Whether the student may need special education and related services and the basis for that determination
 2. Results of any relevant, previous assessments
 3. Relevant behavior noted during testing sessions and any observation in the classroom
 4. The relationship of that behavior to the student's academic and social functioning
 5. The educationally relevant health, development and medical findings, if any
 6. Specific test scores for all assessments administered. An error analysis and integration of assessment data depicting strengths and weaknesses as related to ability/performance levels within the areas of academic achievement, language development, cognitive development, self-help, visual/auditory functioning, and sensory motor skills
 7. Determination of the effects of environmental, cultural and economic disadvantages upon overall performance level. This shall include, as appropriate, a review of the student's school and/or developmental history, as well as his or her English language proficiency
 8. For students with Learning Disabilities, whether there is such a discrepancy between achievement and ability that it cannot be corrected without special education and related services
 9. A summary of the findings and characteristics which identify the student as an individual with special needs and which document the need for special education and/or related services
 10. Relevant information from the parent

11. Information related to enabling access in and progress in the general education curriculum
12. The need for specialized services, materials, and equipment for pupils with Low Incidence Disabilities, consistent with guidelines established pursuant to Section 56136

All educational reports completed by District personnel i.e., psychological report, speech reports, etc., must contain a validity statement about the assessments used. Factors to consider: environmental concerns, cultural, socio-economic disadvantages, perceived effort, unfamiliarity of English Language, the use of an interpreter during testing, and the assessment being appropriately normed during testing at the appropriate age and grade level.

The assessment report should document a consideration of the Education Code requirements regarding program eligibility if the determinant factor is a lack of instruction in reading or math, limited English proficiency, or other environmental, cultural, or socio-economic disadvantage factors.

Copies of all documents used in making determination with regard to eligibility or needs should be maintained for future reference in the IEP file and/or cumulative files and in accordance with District Board Policy.

Section 2:

Eligibility Requirements

To qualify for special education and related services under the IDEA, a student must be between the ages of 3 and 21 (Ed Code 56056(c)), and must satisfy both parts of a two-part test. First, the student must meet the definition of one or more of the categories of disabilities specified under the IDEA. Second, the student must be in need of special education and related services as result of a disability or disabilities. That is, the child's disability requires instruction, services, or both, which cannot be provided with modification of the regular school program.

13 Disabling Conditions identified in IDEA:

1. Autism
2. Deaf-Blindness
3. Deafness
4. Emotional Disturbance
5. Hearing Impairments
6. Intellectual Disability
7. Multiple Disabilities
8. Orthopedic Impairments
9. Other Health Impairment
10. Specific Learning Disability
11. Speech or Language Impairments
12. Traumatic Brain Injury
13. Visual Impairments including Blindness

Special Education Eligibility

A child shall qualify as an individual with exceptional needs, pursuant to Education Code section 56026, if the results of the assessment as required by Education Code section 56320 demonstrate that the degree of the child's impairment as described in subdivisions (b)(1) through (b)(13) requires special education in one or more of the program options authorized by Education Code section 56361.

- The decision as to whether or not the assessment results demonstrate that the degree of the child's impairment requires special education shall be made by the IEP team, including personnel in accordance with Education Code section 56341(b).
- The IEP team shall take into account all the relevant material which is available on the child. No single score or product of scores shall be used as the sole criterion for the decision of the IEP team as to the child's eligibility for special education.

Autism Eligibility Criteria

A student qualifies for special education under the category of Autism if the student exhibits:

- (1) A developmental disability significantly affecting verbal and non-verbal communication and social interaction generally evident before age of three
- (2) If it adversely affects the child's educational performance

Other characteristics may include:

- (1) The engagement in repetitive activities and stereotyped movements
- (2) Evidence of resistance to environmental change or change in daily routines
- (3) Unusual responses to sensory experience and that affect the child's educational performance

Important: If the student's primary category of eligibility is Emotional Disturbance, Autism cannot be the secondary eligibility. However, if Autism is primary, Emotional Disturbance may be a secondary disability.

Speech and Language Eligibility Criteria

California Code of Regulations, Title 5 Section 3030

A student will be assessed as having a language or speech disorder which makes him/her eligible for special education and related services when he/she demonstrates difficulty understanding or using spoken language to such an extent that it adversely affects educational performance and cannot be corrected without special education and related services. (EC 56333)

1. Articulation Disorder

The pupil displays reduced intelligibility or an inability to use the speech mechanism, which significantly interferes with communication and attracts adverse attention. Significant interference in communication occurs when the pupil's production of single or multiple speech sounds on a developmental scale of articulation is below that expected for his or her chronological age or developmental level and which adversely affects educational performance. The pupil does not meet criteria for an articulation disorder when the pupil exhibits:

- a. Atypical speech resulting from lack of familiarity with the English language
- b. Dialectical patterns resulting from the use of non-standard English

2. Abnormal Voice

A pupil has an abnormal voice that is characterized by persistent, defective voice quality, pitch, or loudness.

3. Fluency Disorder

A pupil has a fluency disorder when the flow of verbal expression, including rate and rhythm, adversely affects communication between the pupil and the listener.

4. Language Disorder

A pupil has an expressive or receptive language disorder when he or she meets one of the following criteria:

- a. The pupil scores at least 1.5 standard deviations below the mean, or below the 7th percentile, for his or her chronological age or developmental level on two or more standardized tests in one or more of the following areas of language development:
morphology, syntax, semantics, or pragmatics.

When standardized tests are considered to be invalid for the specific pupil, the expected language performance level shall be determined by alternative means as specified on the assessment plan. **OR**

- b. The pupil scores at least 1.5 standard deviations below the mean or below the 7th percentile, for his or her chronological age or development level on one or more standardized tests in one of the areas listed in (a.) above **AND**

Displays inappropriate or inadequate usage of expressive or receptive language as measured by a representative spontaneous or elicited language sample of a minimum of fifty utterances. The language sample must be recorded or transcribed and analyzed, and the results included in the assessment report. If the pupil is unable to produce this sample, the speech pathologists shall document why a fifty-utterance sample was not obtainable and the contexts in which attempts were made to elicit the sample.

When standardized tests are considered to be invalid for the specific pupil, expected language performance level shall be determined by alternative means as specified in the assessment plan.

Deaf/Blind Eligibility Criteria

California Code of Regulations, Title 5

A pupil has both hearing and visual impairments, the combination of which causes severe communication, developmental, and education problems.

Definition

A pupil is determined to be Deaf/Blind when a California state licensed ophthalmologist/vision specialist and a California state licensed audiologist verify the presence of both deficits, and the combination of the visual and hearing impairments cause severe communication, developmental, and educational problems which cannot be accommodated in special education programs solely for deaf or blind children.

Guidelines

A multi-disciplinary team shall assess a pupil. Relevant information shall include all of the following:

- Current audiological measures of auditory functioning documents a severe or profound hearing loss greater than (70dB), with and without amplification, as determined by qualified audiologist.
- Assessment of receptive and expressive communication skills and current educational performance reveals significant dysfunction directly related to the physical impairment.
- A written report of an eye examination, by either a physician or ophthalmologist/optometrist, which states that the pupil's acuity is 20/200 or less in the better eye after correction (legally blind).

Deaf & Hard of Hearing Eligibility Criteria

California Code of Regulations, Title 5

A pupil has a hearing impairment, whether permanent or fluctuating, which impairs the process of linguistic information through hearing, even with amplification, and which adversely affects educational performance. Processing linguistic information includes speech and language reception and speech and language discrimination.

Guidelines – Deafness

For educational purposes, a pupil is considered to be deaf when all of the following apply:

1. The pupil has a written diagnosis of hearing impairment from a California licensed or credentialed audiologist. This diagnosis should specify the range, nature and degree of hearing impairment.
2. This report must provide measures of audiological functioning both with and without amplification.
3. Such hearing impairment may be permanent or fluctuating, be present at birth or develop later in life, but results in a functionally severe loss, which severely impairs the pupil's processing of linguistic information through auditory channels and adversely affects educational performance.
4. An assessment of the pupil's current level of receptive and expressive language skills indicates severe problems in speech reception and discrimination due to hearing loss, even with appropriate amplification.

Guidelines - Hard of Hearing

The pupil may have a mild to moderate hearing impairment, which results in a mild to moderate impairment of receptive expressive speech, and language, which adversely affects educational performance.

The following guidelines are general descriptions of hearing impairment without amplification:

- mild loss 25-40 decibels-may have trouble hearing faint or distant speech
- moderate loss 40-55 decibels-may have trouble hearing loud speech, especially in noisy environments
- moderately severe 55-70 decibels-can hear only amplified speech, usually affects acquisition of speech and language
- severe loss 70-85 decibels-can hear only amplified speech, always affects acquisition of speech and language
- profound loss 85+ decibels-may have severe problem understanding even amplified speech and may not have developed speech/ language

Emotional Disturbance Eligibility Criteria

California Code of Regulations, Title 5

Because of a serious emotional disturbance, a pupil exhibits one or more of the following characteristics over a long period of time and to a marked degree, which adversely affect educational performance.

1. An inability to learn which cannot be explained by intellectual, sensory, or health factors
2. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers
3. Inappropriate types of behavior or feelings under normal circumstances exhibited in several situations
4. A general pervasive mood of unhappiness or depression
5. Tendency to develop physical symptoms or fears associated with personal or school problems

Emotionally Disturbed as a Set of Three Limiting Criteria

The following criteria must be met for any of the five ED characteristics:

Over A Long Period of Time

1. A long duration of demonstrated ED characteristics is necessary in order to rule out a number of temporary adjustment reactions, such as reactions to developmental changes (e.g., puberty), or temporary reactions to marked increases in psychological stresses (e.g. divorce, death of a parent or sibling, etc.)
2. The need to establish a long period time also provides staff with the opportunity to utilize behavioral interventions in order to rule out the possibility that the child is exhibiting a behavioral disorder rather than an emotional disturbance.
3. The duration of demonstrated characteristics should be a minimum of six (6) months in length, following extensive and comprehensive efforts at behavioral intervention and change during the six-month period. A shorter duration time may be appropriate in those few specific ED conditions explicitly noted in DSM (e.g., Major Depressive Episode).

To a Marked Degree

This limiting condition is comprised of two separate components, both of which must be present for the condition to be met: **pervasiveness and intensity**.

Pervasiveness refers to the continuity of the negative behaviors exhibited by the pupil, which is the primary distinguishing characteristic between ED pupils and those pupils with behavior disorders. In contrast to the latter who are significantly more likely to exhibit negative or inappropriate behavior only in certain setting or with certain individuals, ED pupils demonstrate the characteristics of their disturbance across all domains (school, home, community) and with almost all individuals. Pervasiveness is easily documented through school observation, home visit, teacher and parent interviews.

Emotional Disturbance Referral Procedures

1. It is crucial that you **communicate with your Program Specialist** if you are considering a student referral for Emotional Disturbance (ED) assessment. When considering assessment for ED for a student who receives special education services, **we MUST go through the Pre-Referral process**. Your Program Specialist will assist you

with this process. **An IEP meeting will be held with a Program Specialist in attendance** in order to document parent and staff concerns as well as the needs of the student. For students who are not receiving special education services, interventions such as a general education Classroom Behavior Plan or counseling support must be attempted before the Pre-Referral process can begin. It is essential for the site team to implement these interventions with fidelity for a length of time before determining an assessment for ED is necessary.

2. If, after implementing site based interventions for the general education student, or Pre-Referral interventions for the special education student, the site team still suspects a disability of ED, it is important to **communicate with your Program Specialist first** to ensure that all appropriate interventions have been implemented prior to the referral being submitted. If it is determined that the referral is appropriate, an Assessment Plan for ED will be **completed by a Program Specialist**.
3. If a student is referred under the suspected area of ED, the school psychologist will conduct a full battery of assessments which address Social/Emotional and Behavioral concerns. Assessments should include rating scales which will be completed by parent and teachers. The Mental Health Clinician from SCOE will conduct assessments designed to address appropriate ED identification criteria. If the student does not meet qualification criteria for ED, the assessment results may indicate that there is another handicapping condition for which the student may qualify. If the student does not qualify (DNQ) for any special education services, the IEP will be complete.
4. **When scheduling an IEP team meeting to review mental health assessment results, it is mandatory for a Program Specialist to attend.** A SCOE ED representative must also be in attendance. If a student does not meet qualification criteria for ED, the team must continue to plan to meet the student's needs. The Program Specialist for the site should be there to guide the team in decision-making. **If an IEP team is discussing potential supports for a student outside of the ED setting, a Program Specialist must be in attendance.** If a Program Specialist is not in attendance, the meeting will be tabled and a continuation meeting which includes a Program Specialist will be scheduled by the case manager as soon as possible.

Other Health Impairment Eligibility Criteria

IDEA 34 CFR 300.8(c) (9)

Other Health Impairment refers to having limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that:

1. Is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome
 2. Adversely affects a child's educational performance. [§300.8(c)(9)]
- California Code of Regulations, Title 5. In accordance with Section 5602(e) of the Education Code, such physical disabilities shall not be temporary in nature, as defined in Section 3001 (x).

California Code of Regulation, Title 5 “**Temporary Physical Disability**” refers to a disability incurred while an individual was in the regular education class and which at the termination of the temporary physical disability, the individual can, with special intervention, reasonably be expected to return to his or her regular education class, as defined in Section 3001(af)

SELPA Guidelines

For educational purposes, a pupil is considered Other Health Impairment when the following apply:

1. The pupil has a written diagnosis from a licensed physician that he/she has a severe medical condition resulting in limited strength, vitality or alertness due to chronic or acute health problems, excluding those of an emotional origin.
2. In the case of Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder, the diagnosis should also be made by a school psychologist, licensed educational psychologist or licensed clinical psychologist.
3. The IEP team determines that such impairment adversely affects the pupil's education performance.

To be determined eligible under Other Health Impaired (OHI) requires a complete evaluation by an IEP team. When a student does not meet eligibility criteria for impairment, OHI is not to become a default category. OHI is also not appropriate if the adverse effect on education is primarily due to substance abuse, alcohol abuse or other drugs. Any automatic entitlement for students with any diagnosed medical condition, including ADD/ADHD must meet the eligibility criteria for special education.

Critical Questions to be considered by IEP Teams when determining eligibility for OHI are:

1. Does the student have health needs that cannot be met in the regular education program?
2. Are there modifications that can be made in the general education program to allow the student to access the general education curriculum and to meet the educational standards that applies to all students?
3. Are there additions or modification the student needs which are not provided through the general education program?

Students with health or other related issues may be served with accommodations and modifications in general education with or without a Section 504 plan or under the Americans with Disabilities Act.

Role of School Nurses in IEP Team Process

Stanislaus SELPA recognizes the important public health responsibilities School Nurses have in our schools. In addition to their general education duties, School Nurse may play an important role when OHI is being considered and when a student meets the criteria for OHI eligibility. Below are some typical examples of the services a School Nurse may provide for a student with OHI, through an Individualized Health Plan (IHP), or as a resource to school staff:

1. Interpret medical records, help clarify how a diagnosis might impact a student's school performance, and discuss the implications for programming
2. Serve as a liaison with parents staff and community health agencies
3. Provide health care in a school setting
4. Collect and interpret medical information, such as efficacy of treatment in the implications for learning
5. Identify health barriers to learning
6. Provide training documented in program modifications (e.g. seizure management, diabetic monitoring), chronic disease management, medications and possible side-effect
7. Collect prenatal, early childhood, and health history from students and parents
8. Complete physical assessment and health screening (growth hearing and vision screening, weight, etc.)
9. Provide medical case management
10. Make recommendations for school based health services
11. School nursing may be provided to regular education students as well as those in special education. A school nurse may also provide services through a 504 plan

School Nurse Participation in IEP Team Meetings

Districts within Stanislaus SELPA are encouraged to follow best practices and include a School Nurse on the IEP team whenever:

1. OHI eligibility is being considered, or reevaluated, (Initials or Triennials)
2. A student has met the criteria for OHI and is receiving special education services
3. A student is receiving nursing as a related service
4. School nurses may not serve as the special education teacher on an IEP team
5. School nursing may be a related service

Individualized Health Plans

Generally speaking, Individualized Health Plans should be referenced in IEP team minutes, but not be attached to an IEP. An IHP is a nursing care plan which may change frequently and may or may not address an educational program or barriers to learning.

Specific Learning Disability Eligibility Criteria

California Code Regulation, Title 5

A pupil has a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an impaired ability to listen, think, speak, read, write, spell, or do mathematical calculations, and has a severe discrepancy between intellectual ability and achievement in one or more of the academic areas specified in sections 56337(a) of the Education Code. For the purpose of Title 5, section 3030 (j):

1. Basic psychological processes include **attention, visual processing, auditory processing, sensory-motor skills, and cognitive abilities including association, conceptualization and expression.**
2. Intellectual ability includes both acquired learning and learning potential and shall be determined by a systematic assessment of intellectual functioning.
3. The level of achievement includes the pupil's level of competence in materials and subject matter explicitly taught in school and shall be measured by standardized achievement tests.
4. The decision as to whether or not a severe discrepancy exists shall be made by the IEP team, including assessment personnel in accordance with EC Section 56341(d), which takes into account all relevant material which is available on the pupil. No single score or product of scores, test or procedure shall be used as the sole criterion for the decisions of the Individualized Education Program team as to the pupil's eligibility for special education

Specific Learning Disability includes conditions such as **perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.**

Alternatives to Standardized Tests

Under exceptional circumstances when standardized tests do not reveal a severe discrepancy as defined above, the individualized education program team may find that a severe discrepancy does exist, provided that the team documents in a written report that the severe discrepancy between **ability** and **achievement** exists as a result of a disorder in one or more of the basic psychological processes. The report shall include a statement of the area, the degree, and the basis and method used in determining the discrepancy. The report shall contain information considered by the team, which shall include, but not be limited to:

- data obtained from standardized assessment instruments
- information provided by the parent
- information provided by the pupil's present teacher
- evidence of the pupil's performance in the general and/or special education classroom obtained from observations,
- work samples, and group test scores
- consideration of the pupil's age, particularly for young pupils
- any additional relevant information
- the discrepancy shall not be primarily the result of limited school experience or poor school attendance

Guidelines

A pupil shall be assessed as having a Specific Learning Disability which makes him or her eligible for special education and related services when it is determined that all of the following exist:

1. A severe discrepancy (a difference of more than 1.5 standard deviations using standard scores) exists between the intellectual ability and achievement in one or more of the following academic areas:
 - a. Oral expression.
 - b. Listening comprehension.
 - c. Written expression.
 - d. Basic reading skills
 - e. Reading comprehension.
 - f. Mathematics calculation
 - g. Mathematics reasoning
2. The discrepancy is due to a disorder in one or more of the basic psychological processes and is not the result of environmental, cultural or economic disadvantages
3. The discrepancy cannot be corrected through other general or categorical services offered within the general instructional program
4. Achievement is below the instructional range of the general classroom

A pupil shall not be eligible for special education on the basis of:

1. Environmental or cultural factors
2. Economic disadvantage
3. A history of slow progress but who are functioning within the instructional range of their class level
4. Unfamiliarity with the English language
5. Delays in maturation
6. Truancy, excessive unexcused absences, a history of poor motivation or cooperation
7. Social maladjustment (refer to ED eligibility criteria for further clarification)

Traumatic Brain Injury Eligibility Criteria

Traumatic Brain Injury (TBI) means an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. Traumatic Brain Injury applies to **Open** or **Closed** head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. Traumatic Brain Injury does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma. [34 Code of Federal Regulations §300.8(c)(12)]

Background

Traumatic Brain Injury (TBI) is a complex injury with a broad spectrum of symptoms and disabilities. TBI may be severe or non-severe. Brain injuries are unique and the effects of two similar injuries may be very different. Symptoms may appear right away or may not be present for days or weeks after the injury.

TBI is classified into two general categories: **Open Head Injury** or **Closed Head Injury**.

Open Head Injury, which may also be referred to as focal head injury or penetrating head injury, means direct injury to the head that penetrates the skull. This may occur as a result of a high-velocity projectile entering the skull (bullet or other object) or the head hitting an object with tremendous force (such as the result of an auto accident).

Closed Head Injury, which may also be referred to as diffuse head injury, means damage caused by direct or indirect force to the head even though the skull is intact. Closed head injuries may result from shaking, hits to the head, or falls.

TBI can also be classified as **mild or severe**.

Mild TBI may result if loss of consciousness and/or confusion and disorientation is shorter than 30 minutes. In these cases brain scans are often normal, but the individual has cognitive problems such as headache, difficulty thinking, memory problems, attention deficits, mood swings and frustration. These injuries can be commonly overlooked.

Severe TBI is associated with penetrating skull injury or loss of consciousness for more than 30 minutes and/or memory loss after the injury in a closed head trauma. The deficits range from impairment of higher level cognitive functions to comatose states. Survivors may have limited function of arms or legs, abnormal speech or language, loss of thinking ability or emotional problems.

TBI may result in contusions, diffuse axonal injury, and secondary injuries. Diffuse axonal injury affects multiple areas of the brain as a result of rapid rotational movement during the injury, particularly when the head is shaken or hits the ground or object at a high velocity. When this happens the brain moves rapidly within the skull and the bony projections of the skull shear the white matter in the brain. Secondary injuries occur when the brain swells and fills with fluid in response to the primary injury. Secondary injuries may include:

- Intracranial hemorrhage (bleeding inside the skull)
- Increased fluid inside the skull (hydrocephalus)
- Brain swelling
- Increased intracranial pressure (pressure inside the skull)

- Brain damage associated with lack of oxygen
- Infection
- Chemical changes leading to cell death

Other brain injuries, such as non-traumatic acquired brain injury, congenital, hereditary, degenerative brain dysfunction or birth trauma, are not included in traumatic brain injury although the symptoms span the same spectrum.

The report shall document the extent to which the student is disabled and in which areas the student needs special education and related services.

A pupil shall found to have a Traumatic Brain Injury when the following criteria have been met and documented:

1. The injury occurred after a period of normal development
2. The injury was caused by an external physical force to the head resulting in damage to the brain
3. The injury results in total or partial disability or psychosocial impairment, or both, that adversely affects the student's educational performance
4. IEP Team determines a need for special education and related services as a result of the disability

Intellectual Disability Eligibility Criteria

California Code of Regulation, Title 5

A pupil has significantly below average general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period, which adversely affect a pupil's educational performance.

Definition

General Intellectual Functioning is defined as the results obtained by assessment with one or more of the individually administered general intelligence tests developed for the purpose of assessing various aspects of intellectual functioning.

Adaptive Behavior is defined as the effectiveness or degree with which individuals meet the standards of personal independence and social responsibility expected for their age and culture group.

Guidelines

The IEP team assesses the pupil to determine moderate to profound delays in mental development, difficulty in concept formation, sensory motor integration, and delayed social/adaptive behaviors.

The disability manifests itself in the developmental period and is characterized by pervasive impairment of cognitive/perceptual functioning, limited ability to understand or communicate, and difficulty in concept formation.

Orthopedically Impaired Eligibility Criteria

California Code of Regulations, Title 5

A pupil has a severe orthopedic impairment, which adversely affects the pupil's educational performance. Such orthopedic impairments include impairments caused by congenital anomaly, impairments caused by disease and impairments resulting from other causes.

Guidelines

A pupil may be determined eligible for special education when both of the following conditions apply:

1. A written report from a licensed physician and surgeon documents that the pupil has a severe orthopedic impairment that results in a serious impairment of locomotion and/or motor function that is persistent and significantly restricts an individual's normal physical development, movement and activities of daily living
2. The IEP team including an individual knowledgeable of the educational implications of Orthopedic Impairments determines that a severe Orthopedic Impairment adversely affects the pupil's performance.

Visually Impaired Eligibility Criteria

California Code of Regulations, Title 5

A pupil has a visual impairment, which, even with correction, adversely affects a pupil's educational performance.

Guidelines

A pupil may be determined eligible for special education when both of the following conditions apply:

1. A written report of a current eye examination by a physician and surgeon or optometrist documents that the pupil's vision is impaired and meets one of the following definitions:
 - Partially Sighted: Distance visual acuity of 20/70 or less in the better eye with best correction.
 - Legally Blind: Central visual acuity of 20/200 or less in the better eye with the best correction OR the widest diameter of the visual field is not greater than 20 degrees. AND
2. The IEP team, including a credentialed Teacher of the Visually Impaired, determines that the vision disability adversely affects the pupil's educational performance.

Multiple Disabilities Eligibility Criteria

A student with multiple disabilities shall have two or more areas of significant impairment, one of which shall be a cognitive impairment except in the case of Deaf-Blindness. Cognitive impairment shall mean significant limited intellectual capacity. The other areas of significant impairment include: **Physical, Visual, Auditory, Communicative or Emotional**. The combination of such impairments create a unique condition that is evidenced through a multiplicity of needs which prevent the student from receiving reasonable educational benefit from general education.

Guidelines

The definition of impairment shall be the same as that for each of the single disabilities.

Program Options

Once determined eligible for special education the full range of program options is available to the pupil.

General Education

A pupil remains in general education when the impairment can be addressed through accommodations and/or modifications of the general education program.

Designated Instruction and Services (DIS)

Placement in a DIS program shall occur only when the pupil's needs cannot be met through accommodations and/or modifications of the general education program.

Resource Specialist

Placement in a Resource Specialist program shall occur when current services are not sufficient to achieve the pupil's goals and objectives.

Special Day Class (SDC)

Placement in a Special Day Class shall occur only when the pupil's goals and objectives cannot be met in a less restrictive setting.

Non-Public, Non-Sectarian Schools

This placement option may only be considered when it has been determined by the IEP team that an appropriate public education program is not available.

Section 3:

The IEP Meeting

When an IEP Meeting Must Take Place

The IEP Team shall meet

- When a formal assessment has been conducted
- At least annually to review progress, goals, and objectives and make any revisions to the IEP unless otherwise agreed to by the parent
- At least every three years to determine continued eligibility
- Within 30 days after a parent or education staff member requests a meeting to review and/or revise the IEP
- When a student demonstrates a lack of anticipated progress
- When placement in a more restrictive setting is under consideration
- Within 30 days after a change of placement/ Interim IEP of a student into any special education program
- To discuss and agree upon any substantial changes to IEP services
- To develop a Behavior Intervention Plan
- Within 10 school days of any decision to recommend a student for expulsion
- Following 10 days of suspension for a Manifestation Determination meeting
- Following 20 days of suspension that will result in change of placement and/or expulsion

A Program Specialist must attend (and/or consulted on) the following IEP meetings:

- Discussion of a change of placement
- An advocate is representing the student
- A student has reached 10 or 20 days of suspension
- A student is being placed on Home and Hospital Instruction
- Parents have requested to tape record the IEP meeting
- When there has been a request for a 1:1 paraprofessional
- A student is being recommended for expulsion
- When a parent is opting to place their child in a private school
- When developing an Individual Service Plan for a student attending a private school
- When services with a contracted vendor are initiated
-

Types of Meetings

Initial IEP

The IEP is convened at the conclusion of the assessments conducted to determine initial eligibility. Anyone may refer for special education eligibility assessment but, parents must be in agreement and give written permission through a signed assessment plan. Assessment must be conducted in all areas of suspected disability.

Annual Review

Once a student has been found to be eligible for Special Education and related services, a review of the IEP placement, related services and supplemental aids and services shall be held annually. (CCR Title 5 3068)

Parents shall be provided with a copy of their **Parent's Rights prior to or at the annual and triennial review**. The case manager is responsible for coordination of the review. Each IEP review shall be conducted in accordance with the notice and scheduling requirements for the initial assessment.

Prior to the annual review a formal or informal assessment may be conducted by the appropriate specialist in those areas in which instruction has occurred, and which originally documented the student's disability.

When reviewing a student's progress at the annual IEP review, the IEP team must consider the following when determining whether changes are needed in the student's program:

- Any lack of expected progress toward the student's annual IEP goals and in the general education curriculum
- The results of any reevaluation
- Information about the child provided to, or by, the parents
- The child's anticipated needs
- Any other relevant matters

If at any time during the school year the IEP team determines the student is not making expected progress on their goals and objectives, the IEP team should consider the educational benefit of the current IEP and make necessary revisions.

Amendment/Review Meeting

An IEP meeting shall be held at least annually and more frequently if requested by the parents or a member of the IEP team. The IEP review meeting must be held within 30 calendar days of the request for the meeting. The purpose of a review IEP shall be to discuss additions and/or revisions to the IEP that are necessary to provide FAPE for the student. For a **review IEP meeting, only those IEP team members whose services are being discussed are required to attend, although all members of the IEP must receive a copy of the revised IEP document/amendment IEP**. The IEP may be amended between the annual IEP meetings if agreed to by the parents and the LEA. The amendment or modification to the IEP shall be in writing. Upon request, the parent shall be provided a revised copy of the IEP with the amendments incorporated.

Triennial Review

A reevaluation of the student shall be conducted at least once every three years or more frequently, if conditions warrant.

As part of any reevaluation, the Individualized Education Program team and other qualified professionals may consider the following as appropriate:

1. Review existing assessment data on the student, including assessments and information provided by the parents of the student, current classroom-based

assessments and observations, and teacher and related services providers' observations.

2. On the basis of this review and input from the student's parents, identify what additional data, if any, is needed to determine:
 - Whether the student continues to have a disability described in paragraph (3) of Section 1401 of Title 20 of the United States Code
 - The Present Levels of Performance and educational needs of the student
 - Whether the student continues to need special education and related services
 - Whether any additions or modifications to the special education and related services are needed to enable the student to meet the measurable annual goals set out in the individualized education program of the student and to participate, as appropriate, in the general education curriculum.

The assessor shall administer tests and other assessment materials needed to produce the data in accordance with the Assessment Plan.

If the parents request additional assessments, the District will either complete the requested assessment or write a PWN to demonstrate why additional assessment is not required.

Interim IEP Procedures

- Get the last agreed upon IEP from the previous school district
- **If the student is in a specialized program, (ED, SH, Autism, SDC) Program Specialist will determine placement and complete the Interim paperwork**
- Case manager will request to add student in SEIS
- Contact parent to set up a meeting
- Fill out the following forms:
 1. SE-42 Interim Placement
 2. Notes Page
- Hold IEP with parent
- Provide Procedural Safeguards to parent
- Obtain signatures on Interim form
- Make copies for parent
- Send to SELPAMIS@STANCOE.ORG for regionalized providers
- Forward copy to school site team via email and send the hard copy to the school site
- Upload and affirm the IEP for those who self-affirm

Interim Placement

Administrative Placements (E.C. 56325)

Placement: When a student transfers into Sylvan Union Schools with an IEP from another school district, the student shall be placed:

1. Immediately
2. In conformity with the existing IEP to the extent possible within existing resources
3. For a period not to exceed 30 days from the date of the interim placement prior to review
4. *Before* the expiration of the 30-day period, the interim placement shall be reviewed by the IEP Team and an Individual Education Plan shall be developed. The team may utilize information, records, and reports (including assessment results) from the student's

previous school district or county program in addition to current information and assessment data.

Best Practice Procedures – Interim/Administrative Placements

When school personnel become aware that a student was served in a special education program in the previous school district or county program:

1. The information shall be immediately forwarded to the school site's Program Specialist
 - If the IEP is available, it will be reviewed to determine:
 - If the IEP is current
 - If the IEP has the required signatures
 - What special education services were provided (are they clear and appropriate)
 - If the parent/guardian wants the student to continue receiving their entitled services

Note: If the IEP is more than one year old, placement will still be made according to these procedures.

If a copy of the existing IEP is not available, the site will contact the district (or county program) that last served the student and determine by phone or fax:

- The date of the most recent IEP (verifying that it is current)
- The date of the initial/triennial assessment (verifying that it is current)
- Which special education services were provided
- That the special education records were requested from the previous site
- The date of original special education entry

The site should document that records were requested and the date of the request.

After verifying the existence of a current IEP the following steps are to be followed:

- Complete an IEP form designating an administrative placement in a specified educational program deemed most appropriate given the current information available
- Have parent/guardian sign an assessment form to be distributed to appropriate providers/assessors if necessary
- Distribute copies of signed forms to parent and for placement in appropriate file

When a student was receiving DIS services only from the previous district, all available information and records will be forwarded to the appropriate DIS service provider, who will then become the case manager responsible for the review (to be held within 30-days of the parent's signature for placement date) and any necessary follow-up.

When the student was served previously in a Resource Specialist Program all information and records will be forwarded to the Resource Specialist, who will then become the case manager responsible for the review and any necessary follow-up.

When the student was previously served in a Special Day Class, the Program Specialist must inform the school site of the placement. The Special Day Class Teacher at the site will be contacted by phone or by email. The Program Specialist will determine the type and level of Special Day Class required. If the student is to be placed away from his/her home school, the Program Specialist will notify the parent of registration procedures and transportation processes if appropriate. Available records and completed Forms will be forwarded to the site case manager.

After the student's placement has been determined according to the existing IEP and a case manager is assigned (DIS) service provider, Resource Specialist or Special Day Class Teacher, the case manager will review the information and is responsible for:

- Notifying and providing copies of available records to the site psychologist or service providers if the student receives more than one special education service
- Setting up the IEP meeting within 30 days of the date of the parent's signature authorizing placement (in accordance with the requirement for setting up IEP team meetings)
- Conducting any academic or observational assessment required for the writing of the new IEP
- Scheduling and holding the IEP for final placement decisions
- Organizing the new IEP file

Transition Planning IEP

Transition meetings must be held if the student will be 15 years old prior to their next annual or triennial due date. The purpose of a Transition Plan is to plan for a student's College and Career development and how academic courses, functional curriculum and vocational activities help move a student towards his or her future College and Career goals.

It must be documented on the Information and Eligibility page that it is a Transition meeting.

Purpose of Transition Plans

A Transition Plan provides the student with activities which will help the student to meet his or her post-secondary goals.

The concept of the Transition should be simple and include discussion of the following:

1. Coach students and their family to think about College and Career goals as the student transitions to high school, developing a plan to assist the student to meet the goals.
2. Design the student's school experience to ensure that the student is able to acquire the skills needed to achieve his or her goals.
3. Identify and connect students and families to any necessary services and supports.

Transitional Services

The term **Transition Service** refers to a coordinated set of activities for an individual with exceptional needs that are:

1. Designed within an outcome-oriented process which promotes movement from middle school to high school activities (if the student turns 15 before next annual), **including postsecondary education, vocational training, and integrated employment, including supported employment, continuing and adult education, adult services, independent living, or community participation.**
2. Is based upon the individual student's needs, taking into account the student's preferences and interests.
3. Transition plans can include: instruction, related services, community experiences, the development of employment and other post-school adult living objectives, and, when appropriate, acquisition of daily living skills and functional vocational evaluation. This should be done through an inventory assessment.

4. Objectives, timelines and individuals responsible for meeting objectives must be written into the IEP/ITP.
5. The Transition Plan should identify the way a student will begin to develop Career and College awareness, which will eventually help foster maximum independence and post-secondary success according to the student's unique needs.

What needs to happen before the IEP meeting where Transition Planning is discussed?

1. Prepare student and family for the Transition process.
2. Document that the purpose of the meeting is Transition on the Meeting Notice as well as the Information/Eligibility page.
3. Help student and family make a connection between the student's abilities and future Career Awareness, College Awareness, and/or functional/living skills.
4. Discuss high school diploma and Certificate of Completion and what each means. This should be discussed and documented in the Meeting Notes and on the Educational Setting page of the IEP for students in grade seven or higher.
5. Encourage student and family to explore adult living, college, and career options of their interest.
6. Help the student and family describe the identified student's disabilities and any accommodations that may be needed.
7. Give the student opportunities to discover what he/she can do, or what he or she wants to learn how to do.
8. Gather information from student, parents and school staff regarding:
 - a. Student's vision for the future
 - b. Student's Present Levels of Performance as related to Transition in:
 1. Pre-academic/Academic/Functional Skills
 2. Vocational
 3. Adaptive/Daily Living Skills
 4. Health

Meeting Notification for Transition IEP Meeting

When setting up the IEP meeting to discuss Transition planning, a Meeting Notification must state that Transition Planning will be discussed. The notice must also specify the student has been invited. If there is another agency responsible for the payment for or provision of Transition services, the notification shall invite a representative from that agency.

Other Appropriate Agency Personnel

Sec. 300.321 (b) (3) would require, to the extent appropriate, and with the consent of the parent or a child who has reached the age of majority, that a representative of a participating agency that is likely to be responsible for providing or paying for Transition services be invited to the meeting. Their role is to provide information about services, eligibility criteria; explain difference between entitlement of school program and eligibility of adult services, and assist in identifying community or adult services.

Manifestation Determination

A *Manifestation Determination* is an evaluation of the relationship between a student's disability and the act of misconduct. This determination must be undertaken when a district proposes to take specific serious disciplinary actions such as suspension or expulsion. Only if the District

concludes, after performing a Manifestation Determination review that the misconduct was not related to the student's disability, can it impose the proposed disciplinary sanction. The exception to this is removals for *special circumstances*, i.e., weapons, drugs or infliction of serious bodily injury; these removals can be made without regard to whether the behavior is a manifestation of the disability.

IEP Team Members

The IEP team as a group of individuals composed of:

Parents: One or both of the child's parents or guardians are necessary members of the team. While a school district cannot compel the attendance of parents in the same way it can demand attendance of its own personnel or providers, it must ensure that parents are invited and encouraged to attend.

General Education Teacher: A child's IEP team must include not less than one general education teacher, if the child is, or may be participating in the general education classroom environment.

Special Education Teacher: The IDEA requires inclusion on the team of not less than one special education teacher, or where appropriate, not less than one special education provider. The choice of the particular individual is up to the district, but it should select, to the extent possible, the person who is (or will be) responsible for implementing the child's IEP. A child's related services provider will not always qualify as his special education provider.

District Representative: A representative of the school district or other public agency who is qualified to provide or supervise the provision of special education and is knowledgeable about both the general education curriculum and school district resources must participate. In Sylvan Union Schools a site administrator, Program Specialist, Director of Special Education, trained administrative designee or SELPA Director are identified as District Representatives. The representative must be authorized to make decisions on behalf of the school district, commits resources and, be able to ensure that any services that are included in the IEP actually will be provided. The requirement that the IEP team contain an agency official follows necessarily from the directive that an IEP be implemented as soon as possible after the IEP meeting. Failure to include an individual with the authority to commit the school district generally will be considered to be substantive denial of FAPE.

Evaluation Interpreter: The IDEA mandates that the IEP Team must include an individual who can interpret the instructional implications of evaluation results. The law does not preclude other team members (except the parents and the child) from serving in this capacity.

Other individuals: Other individuals in addition to those listed above who have knowledge or special expertise regarding the child, including related services personnel as appropriate, may be included as members of the IEP team at the discretion of the parent or the agency. Additionally, according to 34 CFR 300.321 (f), in the case of a child previously served under Part C, an invitation to the initial IEP meeting shall, at the request of the parents, be sent to the Part C services coordinator or other representative of the Part C system to assist with the smooth transition of services

Meeting Notification

1. In arranging the IEP Meeting the case manager or designee shall:
 - Contact the parent/guardian and other team members to arrange a date, time and location of the meeting within the appropriate timeline.
 - **Invite the student to attend any meeting in which an Individualized Transition Plan (ITP) is to be discussed.**
 - Complete a Parent/Guardian Notification of Individualized Education Program (IEP) Team Meeting Notification form, specifying the topics of discussion and anticipated participants of the meeting.
2. Take whatever action is necessary to ensure that the parent understands the proceedings at the IEP meeting, including arranging for an interpreter for parents with deafness or whose native language is other than English.

Parents shall be notified of the meeting early enough to ensure that they will have an opportunity to attend. If neither parent can attend, other methods shall be utilized to guarantee parental participation, including documented individual or conference telephone calls.

Preparing for an IEP Meeting

To ensure that we are all prepared similarly for IEP meetings please make certain that case managers are using the following criteria:

1. Notification is given to parents and all service providers above and below the line, early enough to ensure an opportunity to attend the scheduled IEP (i.e. Speech/Language Pathologists, Behavior Analyst, Inclusion Specialists, Adapted PE, Occupational Therapy, School Nurses, etc.)
2. The School Nurse should be included on all triennials, initials, annuals with medical needs and if child has medical services or an OHI qualification whether or not they are above or below the line.
3. If necessary, immediate notification of IEP with new scheduled date and time as soon as the change is brought to your attention.
4. Verify that you have all of the required members attending approximately two weeks prior to the IEP.
5. Contact parents for a reminder. (You will also need to contact parents 1-2 days prior to, and possibly the day of the IEP as a final reminder.)
6. If a student has multiple general education teachers, verify at least one has confirmed attendance to your invite. If none have, contact your site administration for support.
7. Consider requesting that all the student's general education teachers complete an Input Form (found on SEIS) to share at the IEP. Collect these prior to the meeting. Please read these ahead of time to check for appropriations and do not # into IEP.
8. If parents agree to an Excusal, send the written input/information regarding the student to parents prior to the IEP as well as at the IEP. This must all be done prior to the start of the IEP, early enough to ensure the parent's opportunity to decide whether or not to proceed with the scheduled meeting or reschedule.
9. If possible, have copies of the draft IEP for IEP members to view.
10. Make certain you write or stamp the word **"Draft"** on the goals' page you are presenting that is printed out. This will help everyone recognize that you are

presenting ideas/suggestions, but that all decisions are based upon final team approval.

11. Organize all of your papers prior to the IEP.
12. Make sure all areas of the IEP are updated.
13. When scheduling general education teachers for the IEP, try to first schedule teachers that can speak to the student's qualifying areas and/or goals.
14. Know the student. If you don't see the student on a regular basis, meet the student prior to the IEP and get to know them. Parents want to know that their child is valued.

Conducting an IEP Meeting

At the IEP meeting, it is essential for team members to come prepared with: Evaluation Findings, Present Levels of Academic Performance, student's strengths and needs, discuss how the disability affects that student's involvement in the general curriculum, and a recommendation regarding:

- goals and objectives
- special education program
- placement
- related services

In addition, in cases where the **IEP Team recommendation is for a placement change to a more restrictive environment, a Program Specialist must be in attendance.**

Translation/Translators

When an interpreter is used for parents who are deaf or whose native language is not English, it is important that the interpreter be prompted to ask the parent if there are any questions and ask if parent understands the proceedings several times throughout the meeting and document this in the notes.

Team Considerations

During the meeting the team must consider the following when determining IEP services:

1. Strengths of the child
2. Concerns of the parent including any assessment reports/information that is presented by the parent
3. Evaluation results
4. If behavior impedes learning of self or others, strategies, Positive Behavioral Interventions and Supports
5. Language needs of a child with limited English proficiency
6. Instruction in Braille for students who are blind or visually impaired
7. Communication needs of students and for students who are Deaf or Hard of Hearing, the child's language and communications needs and opportunities to directly communicate with peers and professional providers
8. Assistive Technology device/service needs

Responsibilities of the IEP Team

1. The case manager is responsible for gathering all relevant information and reports prior to the IEP meeting. All relevant information must be recorded on the appropriate IEP forms including the PWN form for initial assessments.
2. Complete and verify all student information. The parent shall have the right to present information to the Individualized Education Program Team in person or through a representative and the right to participate in meetings relating to eligibility for special education and related services, recommendations and program planning
3. Review assessment results
4. Determine eligibility in accordance with federal and state adopted eligibility requirements and complete appropriate SELPA eligibility form
5. Determine the content of the IEP including areas of deficit that require goals, and IEP services
6. Determine the student's transportation needs and include them in the student's IEP
7. All IEP Team members must sign the completed IEP, indicating their attendance at the meeting
8. All IEP forms must be completed at the IEP Team meeting
9. Parents must be informed that their written consent includes both the content of the IEP and the program placement
10. The parent shall be provided with a copy of the IEP
11. At the request of the parent the IEP and all assessment reports shall be translated into the primary language of the parent, within a reasonable amount of time

IEP Contents

Initial, annual and triennial IEPs require the following components to be included:

1. Present Levels of Performance: Case manager should document what the student can do with specifics including current data. This information should be based on facts, not opinion or personal feelings. Previous information should be cleared out at the annual or triennial review.
2. Service providers will fill in the relevant areas. **Every area of concern needs to be addressed. Do not use the phrase, "Not an area of Concern"** when completing Present Levels, Special Factors or Statewide Assessments.
3. Goals should be developed in all areas of student's deficits. Annual measurable goals must include academic and functional goals as appropriate. For some students, transitional goals must also be developed. Additionally, there must be a description of how progress toward IEP goals will be measured. Note: The IEP must include a statement of **how** the student's parents will be informed of the progress such as periodic report cards regarding progress toward annual goals. These reports must be provided at least as often as their general education peers.
4. The IEP should document the following information regarding each service:
 - a. frequency, location and duration
 - b. projected date for the beginning and end of services
 - c. location of services is defined as the type of environment where the services will be provided
 - d. description of services

Program Modifications and Accommodations

Accommodations that are described by the IEP team **do not** fundamentally alter or lower the standard or expectations of the course; they are adjustments in how the student demonstrates his/ her knowledge of course content and allow students access to the provided curriculum.

Given an accommodation, the student with a disability is held to the same content standard as nondisabled peers and is graded according to the general education grading standards for the course, unless otherwise noted

Modifications that are described by the IEP team do fundamentally alter or lower the standard or expectation of the course; they are adjustments in course content that reflect the level of performance of the student with a disability. If a student takes a modified course, that course does not meet the general education content standard, but is adjusted to permit the student with a disability to participate. Given a modification, the student with a disability is not held to the same content standard as nondisabled peers and is not graded according to the general education grading standards for the course. A student's progress report or report card should note modified grading.

Grades and Grading Standards: The assignment of specific grades for coursework is not within the legal authority of the IEP team to determine, but is established by general and special education teachers according to their criteria. It is appropriate for the IEP team to discuss accommodations or modifications that a student may need to be able to participate in a general education course and receive a grade.

However, an IEP team decision may not supersede District and School Board Policy. Accommodations/ Modifications should be updated at the annual review.

Support for School Personnel: Support could include special training for staff in meeting a unique and specific need of the student that allows for assistance in meeting IEP goals, progress in the general curriculum, and be educated with non-disabled children.

Time out of General Education: Explanation of the extent, if any, to which the student will not participate in class and extracurricular and non-academic activities with non-disabled children. The percentage of time out of General Education is the total number of pulled out minutes for services divided by the total number of minutes within the school day. (Note: this includes non-instructional minutes).

Supplementary Aids and Services are defined as aids, services and other supports that are provided in general education classes or other educationally related settings to enable students with disabilities to be educated with non-disabled peers to the maximum extent appropriate.

- The IEP Team should consider the full range of Supplementary Aids and services a child might need to be educated in the general classroom. If the IEP Team determines that a student needs a device or service under these special considerations in order to receive FAPE, a statement to that effect must be part of the IEP.
- **Each placement decision must be individually based and not be made solely on factors such as the category of disability, significance of disability, availability of services or space configuration of the service delivery system, or administrative convenience.**

Statewide Assessments

It is the policy of Sylvan Union Schools SELPA that all students participate in Statewide Assessments. It is the role of the IEP team to determine how the student will participate. This includes discussion and proper notation of the recommended accommodations and

modifications to be used on these assessments. If the student will participate in alternate assessments, this should be noted on the IEP document as well.

Participation

One of the purposes of the IEP Meeting is to determine how the student would participate in Statewide Assessments even if there is a parent exemption. The IEP team may not waive a Statewide Assessment. In addition, parent exemptions are not addressed in the IEP document. If a parent wishes to exempt their child from a statewide assessment, they **must** send a letter to the school Principal.

Extended School Year (ESY)

The IEP shall ensure that ESY services are available as necessary to provide FAPE. ESY services *may not* be limited to particular categories of disabilities or unilaterally limited to a type, amount or duration of services. ESY checklist for Eligibility will be completed in the IEP meeting. ESY services will be added to the IEP if the student is eligible.

Program Options to be considered by the IEP Team

Least Restrictive

General Education

General Education with Designated Instructional Services (DIS)

Resource Specialist placement

Resource Specialist with DIS services

Special Day Class placement

Special Day Class placement with DIS services

Public school placement outside of district

Most Restrictive

Non-public school placement

Non-Public school placement with DIS services

State school placement

Residential

Home & Hospital Instruction

***Note: Non-public school placements, in and out of the state, require prior approval of the SELPA Director.**

General Education

Placement in the general education program shall occur when the student's educational needs can be addressed through accommodations and modifications of the general education program.

Designated Instruction and Services (DIS)

Designated Instruction and Services (DIS) shall be available when the instruction and services are necessary for the student to benefit educationally from his or her instructional program. Some students may need assistance in special areas that may include, but are not limited, to the following:

- Language/Speech Therapy

- Home/Hospital Instruction
- Adapted Physical Education
- Audiological Services
- Diagnostic Services
- Occupational Therapy
- Physical Therapy
- Orientation/Mobility Instruction
- School Health
- Health/Nursing Services
- Career Development
- Social Work
- Vocational Educational Training
- Transportation
- Vision Services
- Counseling and guidance than assessment
- Low incidence disabilities
- Individual and Small Group Instruction

Resource Specialist Program (RSP)

Students are assigned to general classroom teachers for the majority of a school day. The Resource Specialist can provide support and collaboration to the general education teacher, and provide direct instruction, as well as modify instructional materials, etc. Resource services can be delivered in either a push in or a pull out model.

Special Day Classes (SDC)

Students may need special instruction for a majority of the day in a self-contained Special Day Class on an integrated or isolated site to accommodate their special needs. Specially trained personnel staff these classes. Placement in a Special Day Class shall only occur when the student's goals and objectives cannot be met in a less restrictive environment.

Pre-Referral Services exist to support the District in making assessments of students who are already receiving special education services. Students can be referred for pre-referral services when their educational needs are not being met because of ongoing Social/Emotional issues. This program includes counseling and social skills support. Services can be accessed for a period of 6 months.

An IEP meeting will need to be held to initiate services as well as to discontinue services.

If you have a student who may benefit from Pre-Referral services, you must discuss it with your Program Specialist. A Program Specialist must approve the referral and attend any related IEP meetings.

ED Inclusion Services are also available. A Program Specialist will assist in making this recommendation when necessary. A Program Specialist must approve the addition of this service and must attend any related IEP.

Special Day Class ED Services

This level of service provides a Special Day Class environment for students with a smaller class size and enhanced classroom support. Teachers and students benefit from the availability of a full-time Mental Health Clinician along with access to a Behavior Analyst and other support staff. Students participate in individual and group counseling. Discuss with your Program Specialist if you think this environment might be appropriate for a student. SUSD SDC-ED services are provided through regionalized SCOE programs.

Non-Public ED Services

The Stanislaus SELPA contracts with non-public schools to provide services for the most Severely Emotionally Disturbed students in our county. These classes are located on segregated sites and provide both a high staffing ratio and intensive clinical services for pupils enrolled. With multiple levels in place, students can be transitioned back to integrated site SDC placement.

Stanislaus SELPA offers a multi-level continuum of treatment for ED pupils that allow for education to take place in the least restrictive setting.

These services are provided through a partnership with Stanislaus County Office of Education, Districts, SELPA, Stanislaus County Mental Health and Sierra Vista Children's Center.

State Special Schools provide services to students who are deaf, hard of hearing, blind, visually impaired or deaf-blind at each of its three facilities: California School for the Deaf in Fremont and Riverside and California School for the Blind in Fremont. Residential and Day Programs are offered to students from infancy to 21 years of age at the School for the Deaf and ages 5 through 21 at the School for the Blind. The State Schools also offer assessment and technical assistance.

Non-Public, Non-Sectarian School

Students may need educational services and programs that are not offered by the public schools. These students may attend state certified non-public and non-sectarian schools on a full or part-time basis. This placement recommendation is based on the IEP Team decision that an appropriate public program is not available.

Exit Criteria for Special Education Services

1. The IEP Team shall determine the exit decision for each student after an assessment and based upon the following criteria:
 - The student shall be ineligible for special education services when the impairment no longer adversely affects educational performance.
 - The student's needs could be met in a less restrictive environment or in general education, not necessarily at grade level.
 - A plan to facilitate the student's exit from special education will be developed by the IEP team

Parent Consent

In summarizing the IEP, the parent/guardian is to review and check each of the boxes, as appropriate, indicating their attendance, that they have had their rights explained to them, that they understand their rights, and they agree with placement recommendations. A signature is required to document informed consent for implementation of the IEP. Copies of all forms and evaluative findings are distributed to the parent at the end of the meeting.

Parent Consent to IEPs

1. An IEP may only be implemented upon receipt of informed consent from the student's parent. Absent parent consent to an IEP, the last agreed upon IEP shall continue to be implemented.
2. **If the Educational Rights holder is a person other than a parent, legal documentation to the IEP team noting educational rights must be provided (i.e. court order).**
3. If a parent consents to some, but not all, components of a student's IEP, only those components to which the parent consented shall be implemented. Further, if the District determines that the proposed component to which a parent did not consent is necessary to provide the student with a FAPE, the District shall initiate a Due Process hearing. The case manager should notify the Director or Special Education.

If Student Does Not Qualify for Special Education Services

In summarizing the IEP, the determination of qualification or continuation of special services is made. Should the team determine that the student does not qualify for services, **DOES NOT QUALIFY** must be marked on the IEP form. All educational IEP members sign and the parent/guardian(s) review and check each of the boxes, as appropriate, indicating their attendance, and that they understand their rights and they agree with the IEP recommendation. A signature is required to document informed consent. The signed IEP will be submitted to SELPA following District procedures.

Parent Ability to Exit Their Child from Special Education

A parent may unilaterally withdraw their child from further receipt of all Special Education and related services. Under revisions to the Code of Federal Regulations Section 300.300(b)(4) made on December 31, 2008, if a *parent revokes consent in writing*, the school district:

1. May not continue to provide services, but must provide prior written notice in accordance with Section 300.503 before ceasing the provision of Special Education and related services
2. May not file for due process or mediation
3. Will not be considered to be in violation of the requirement to make a free appropriate public education (FAPE) available to the student
4. Are not required to convene an IEP meeting or develop an IEP for further provision of Special Education and related services
5. This does not end our Child Find Obligation. Case manager is responsible to continue to check student progress approximately every 6 months and take action if necessary

If a parent makes such a request, immediately notify a Program Specialist or the Special Education Office.

IEP Agenda

- **Introductions**
- **Team member excusal, if necessary**
- **Parent rights, CAC and SUSP Parent brochure**
- **Purpose of the Meeting**
- **Student strengths and interests**
- **Parent concerns**
- **Present levels of performance**
- **Progress Towards Prior Goals**
- **Assessment Results (If applicable) (*Recommendations to be discussed later*)**
- **Eligibility (If applicable)**
- **Proposed Goals**
 - a. **Behavior Plan (If applicable)**
 - b. **Health plan (If applicable)**
 - c. **Individual transition plan(If applicable)**
- **Placement Discuss continuum**
- **Discuss Harmful Effects**
- **Offer of FAPE (specific program, ie. SDC, APE, etc)**
- **Related Services (service providers, minutes, ie. SAI, OT, etc)**
- **Special Factors**
- **Supplementary Aids, Services and Other Supports**
- **Transportation**
- **Extended School Year**
- **Transition Plan (Related to Placement, if applicable)**
- **State testing**
- **Other**

Ground Rules (If necessary and document in notes)

“In order to work as an effective team, it is important that we all agree to practice the following ground rules:

- Communicate clearly
- Listen carefully
- Respect the views of others
- Share your views willingly
- Welcome questions
- Be open to ideas and views
- Honor time limits
- Stay on task

“If issues come up that cannot be resolved through brief discussion, we will place them in the “parking lot” to be addressed again later in the meeting or at another meeting if necessary. This will ensure that we are able to get through each of the items on the agenda in a timely manner.”

“Decisions are made through **consensus**: This involves building agreement by the whole group on a course of action. Although individual members may feel that other choices may be better for one reason or another, a consensus is built when all members come together on the final choice. Can you live with it and will you support it?”

“Before we begin, I would like to remind you that the IEP paperwork I brought to the table is a draft. We can make changes on any of the material.”

Placement Options that can be considered by the IEP Team

After services are determined, the IEP team determines **where** services are best provided for the individual student. The IEP team responsibility is to determine the Least Restrictive Environment (LRE) or the place on the continuum below, closest to general education, where the student can make appropriate progress and gain **Educational Benefit**. Ultimately the team makes **one** offer of placement and services.

1. **Least Restrictive Environment**: assure to maximum extent appropriate that the student is educated with non-disabled peers. At the school of residence, what accommodations and or modifications will help support the student in general education.
2. **FAPE**: specially designed to meet the unique needs of a disabled student supported by such services as are necessary to permit the child to benefit from the special instruction at no cost to the parent. It is not maximizing the child's potential and may not be the “best” education that money can buy, however a student is expected to show educational benefit over time in the recommended placement.

IDEA mandates that to the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are not disabled, and special classes, separate schooling, or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability of a child is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Conclusion

- It is a best practice to review notes for the team and make corrections. If notes are reviewed at the conclusion of the IEP meeting, document in the notes that they were read and corrected as needed
- Review the entire IEP
- Develop action plan / schedule next IEP as appropriate
- Confirm agreements and ensure understanding that there is consent given for services and placement
- Offer IEP for signature
- Parents take a copy of the IEP home if needed to review before signing if requested
- Discuss when parent will be responding to the District offer
- Parents are provided copy of IEP and all assessment reports reviewed at the meeting

EC 56341.1(h) It is the intent of the Legislature that the Individualized Education Program team meetings be non-adversarial and convened solely for the purpose of making educational decisions for the good of the individual with exceptional needs.

Remember: You never need to subject yourself or the team to verbal abuse. If the ground rules are not observed after a reminder, you can take a short break. If that doesn't help, you may want to adjourn the meeting until such time as you can do the work of the IEP team in a more productive and respectful manner.

After the IEP

Organize all data into a single IEP file:

1. Goals and benchmarks
2. Documentation and reports from all service providers
3. If further referral is necessary, gather all pertinent data and set a meeting if necessary, to review any additional assessment information
4. **It is the responsibility of the case manager to ensure appropriate personnel are notified immediately of any portions of the IEP in which they are responsible for implementing**

Tape Recording of the IEP Meeting

1. A parent, district, special education local plan area, or county office shall have a right to electronically record the proceedings of Individualized Education Program meetings on an audio tape recorder.
2. The parent shall notify the District of their intent to record a meeting, at least 24 hours prior to the meeting.
3. If the district, (SELPA) initiates the notice of intent to audio tape record a meeting and the parent objects or refuses to attend the meeting because it will be tape-recorded, then the meeting shall not be recorded on an audio tape recorder.
4. The district has to notify the parent of its intent to tape record the meeting at least 24 hours prior to the IEP.
5. ***The Program Specialist should be notified and invited to the IEP meeting if the meeting is being recorded.***

Section 4:

Additional Services/Placements

Assistive Technology (AT)

When developing an IEP for a special education student, the team must consider whether the student needs Assistive Technology devices and services. (34 C.F.R. 300.105 (2006).) If required as part of a special education student's IEP, the District must ensure that Assistive Technology devices or Assistive Technology services, or both, are made available to a special education student. (34 C.F.R. 300.105 (2006).) Sylvan utilizes SCOE personnel for AT assessments and services.

Assistive Technology device means any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain or improve the functional capabilities of a special education student. An Assistive Technology device does not include a medical device that is surgically implanted or the replacement of such device. (34 C.F.R 300.5 (2006).)

Assistive Technology service means any service that directly assists a special education student in the selection, acquisition, or use of an Assistive Technology device. The term includes:

1. The evaluation of the needs of a special education child, including a functional evaluation of the student in the student's environment
2. Purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices for special education students
3. Selecting, designing, fitting customizing, adapting, applying, maintaining, repairing, or replacement assistive technology devices
4. Coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs
5. Training or technical assistance for the special education student, and if appropriate, the child's family
6. Training or technical assistance for professionals (including individuals providing education or rehabilitation services) employers, or other individuals who provide services to, employ, or are otherwise substantially involved in the major life functions of the special education student. (34 C.F.R. 300.6 (2006).)

Infusion throughout the IEP Process and Document

Participation in the School Curriculum

- Colored overlays
- Visual Structure; including picture symbols, digital photos and picture schedules
- Screen magnifiers
- Braille translation
- Pencil grips, rubber stamps, keyboarding
- Switch adapted toys, switch adapted materials for small and large group activities

- Shared tasks, partial participation
- Word prediction software
- Calculators
- Timers (visual and auditory)
- Social stories, social scripts

Vocational Pursuits and Workplace Design:

- Shared work tasks
- Modifications of work stations
- Switch adapted materials / equipment

Computer Access:

- Switches
- Alternate Keyboards
- Touch screens
- Arm supports
- Voice recognition software

Seating Positioning and Mobility

- Canes
- Grab rails
- Lever handles
- Wheelchairs
- Move-n-sit cushion
- Dycem (anti-skid materials)
- Cube chairs

Communication Access:

- Picture Symbols
- Augmentative communication systems with voice output
- Alternative communication methods such as sign language
- Object and picture schedules

In order to address the consideration of the AT needs of a particular student with disabilities, a team of people most knowledgeable about that student would come together to identify the student's strengths, skills, educational task, current tools used and any barriers to success. The identified team would meet and conduct brainstorming sessions to consider all possible solutions. The team may include family members, student (as appropriate), General/Special Ed Teacher, LSH specialist, school nurse, RSP Teacher, AT specialist, APE specialist Occupational or Physical Therapist, administrator, etc. It is also vital to consider team members that may be involved via outside agencies (e.g. VMRC, CCS).

Occupational Therapy

Occupational Therapy is considered to be a related service under the IDEA and as a Designated Instructional Service (DIS) under the California Education Code. As members of a multidisciplinary team, Occupational Therapists share in the decision making process regarding how to meet the educational needs of students with disabilities. Sylvan utilizes SELPA personnel for OT assessments and services.

Occupational Therapy in the Educational Setting

School based occupational therapy is offered as a designated instructional service designed to support the student's educational program. The school occupational therapist uses therapeutic activities to enhance the function of the motor domains that may help to improve the student's ability within the school environment. These areas include self-help, work, educational endeavors, and recreational activities. The program provides for measurable outcome based strategies that are incorporated as an integral part of the student's IEP or 504 plan.

Students who qualify for Occupational Therapy will receive intervention based on assessment findings and concurrence of the IEP team. Three areas of intervention are the following:

1. **Direct Intervention:** One to one intervention providing hands on, direct services by the therapist. Direct service is specifically designed instruction to increase the function or prevent a loss of function for the child within the educational environment to enhance educational performance. The instruction is based on a program of specific therapeutic techniques, which may be provided on an individual, small group, or classroom basis. The environment may vary among treatment areas based on the needs of the child.
2. **Collaborative intervention:** Provides intervention and staff training in a classroom setting.
3. **Consultation intervention:** Verbal or written instructions given to the instructional staff to enhance the student's optimal performance in the educational setting.

Occupational Therapists may offer environmental adaptation/assistance to any teacher who requests assistance in solving an environmental problem. All special education teachers can assist students who have special needs in sensory or motor skills. Most special education students with needs in these areas can and should be served by their teachers or other district support staff.

Eligibility Criteria for Services

A student might benefit from Occupational Therapy if she/he is having significant difficulties in classroom performance as impacted by curriculum, educational environment and abilities. Simply having needs in the areas of sensory or motor skills does not mean student needs Occupational Therapy. **In order to receive Occupational Therapy, a pupil must first be eligible for special education or qualify under Section 504.** All requirements for eligibility must be met. Test scores are not viewed alone in determining the need for service but are considered in the context of many other issues including, but not limited to; existing diagnosis, neurological issues, functional developmental skill level, specific educational goals and objectives, and/or class placement. Areas of function addressed include: fine motor skills, sensorimotor performance, visual motor skills, and self-care skills. Eligibility is determined by both standardized measures, as well as both formal and informal observations. Samples of functional performance deficits are listed below:

1. **Motor/postural impairments:** Students must demonstrate difficulty maintaining an upright posture while at their desks, and/or difficulty with participating in new motor activities.

2. Fine motor/upper body control delays: Students must demonstrate difficulty manipulating pencils or other developmentally-appropriate tools, muscle weakness, fine motor planning difficulties, and/or sensory processing delays which impair fine motor performance.
3. Sensory processing or sensorimotor integration delays: Students must demonstrate delayed processing of sensory information, which results in sensory defensiveness, and/or body awareness or motor planning delays which interfere with classroom performance.
4. Visual motor delays: Students must demonstrate significant delays in drawing/writing in the completion of grade-or developmentally appropriate assignments in the classroom.
5. Self-care delays: Students must demonstrate significant delays in dressing skills, as observed in donning/doffing outerwear, and/or fastening grade-or developmentally appropriate fasteners.
6. Handwriting delays: Students must demonstrate **severe** handwriting delays considering expected grade and age norms.

Entrance Criteria

Recommend educational Occupational Therapy services if all of the following criteria are met:

1. The problem significantly interferes with student's ability to participate in her/her educational program
2. The problem appears to be caused by limitations in occupational performance components (motor functioning, sensory integration, cognitive functioning, psychological functioning and/or social functioning)
3. Previous attempts to alleviate the problem have not been successful, as documented; Modifications are recommended after consultation and observation by the occupational therapist
4. Potential for change in student's problem through intervention appears likely (change unrelated to maturity)
5. Unique expertise of the Occupational Therapist is required to meet student's identified needs

Referral Procedure

Referral for Occupational Therapy may be generated by the teacher, case manager, team leader, SST, IFSP or IEP team, and may be in response to parent request. Unless a formal request for assessment is made by the parent, signed permission to assess should be completed **after** the following guidelines are completed:

1. Teacher implements and documents strategies from the Stanislaus SELPA **Classroom Intervention Strategies List**. The strategies that address the specific concerns must be implemented daily for a period of two to four weeks.
2. Stanislaus SELPA Classroom Intervention Strategies turned in to the Occupational Therapist from the Case Manager.
3. Consultation with an Occupational Therapist will occur. If an Assessment Plan is signed, parents may be requested to fill out a developmental questionnaire prior to assessment, assessment will be performed and a request for an IEP team meeting will be initiated.
4. The IEP team will meet and review OT assessment and modifications/recommendations attempted at school and home, identify unmet needs/goals specified in the IEP, and determine appropriate service intervention (CCS/DI/OT).

5. The IEP team determines if service intervention requires direct services or consultation services of an Occupational Therapist.

See Program Specialist for guidance on referring a student for OT assessment.

Adapted Physical Education

Definition of Adapted Physical Education In California, adapted physical education is defined in the California Code of Regulations, CCR, Title 5, under Sec. 3051.5(a) and is listed as a designated instruction and service (DIS) and a related service in California Education Code Section 56363 (a) and (b)(5). Adapted physical education as defined in 5 CCR Sec. 3051.5 (a) Adapted physical education is for individuals with exceptional needs who require developmental or corrective instruction and who are precluded from participation in the activities of the general physical education program, modified general physical education program, or in a specially designed physical education program in a special class. Consultative services may be provided to pupils, parents, teachers, or other school personnel for the purpose of identifying supplementary aids and services or modifications necessary for successful participation in the regular physical education program or specially designed physical education programs.

Need for Adapted Physical Education for Individuals with Various Disabilities:

Some children may need an adapted physical education program, as they cannot successfully participate in activities of the general or specially designed physical education programs -- even with accommodations and/or modifications. These needs may be the result of movement delays or difficulties, physical or neurological disabilities, health and physical factors, emotional disorders, behavior difficulties or cognitive delays.

Adapted vs. Adaptive: In California, the physical education program designed for individuals with disabilities is called adapted physical education as it is defined in 5 CCR Sec.3051.5 The program is adapted to meet the needs of each student through modifications and accommodations. The student is not required to adapt to the conditions of the program as would be implied with adaptive physical education as in adaptive behaviors.

Collaboration: A collaborative approach is recommended for adapted physical educators to maximize the quality of education provided for individuals with a disability. Effective collaboration requires a team of people working toward a common goal while each provides input from their disciplinary perspective. The adapted physical education teacher is often one member of such a team. When a student receives two or more services, (e.g., APE and Physical Therapy) collaboration between and among disciplines may result in greater benefit to the student with a disability. A student with a disability may need assistive devices and specific exercises as identified by a therapist. In such a case, the adapted physical education teacher as well as the special education teacher, should be aware of how to use the specialized equipment and how to perform the exercises.

Adapted physical education teachers provide consultation to and/or collaborate with teachers, assistants/aides, parents, administrators and other professionals. Examples of other professionals

include, but are not limited to, physical therapists, occupational therapists, speech and language pathologists, special education teachers, orientation and mobility specialists, teachers of the visually impaired, hearing impairment specialists, assistive technology specialists, psychologists, school nurses and recreation specialists. Adapted physical education teachers provide direct adapted physical education service to individuals, identified through the individual education program (IEP) team process, who need specialized instruction.

Referral for Adapted Physical Education: School staff and parents may collaborate to identify strategies for increasing student success in general education programs. Appropriate and meaningful intervention strategies should be based upon the child's needs and age and upon the physical education curriculum. When appropriate adaptations, accommodations and/or modifications have been tried and the student is still unsuccessful in general or specially designed physical education, a student with a disability should be referred for an adapted physical education assessment. All referrals should be in writing and should contain at least a brief reason for the referral.

In some cases, the student may be referred directly for an adapted physical education assessment if the IEP team has determined that attempting accommodations or modifications in the general or specially designed physical education program is inappropriate or unsafe.

Assessment: The APE specialist needs to receive a copy of the signed assessment plan before assessing the student. The signed assessment plan should be scanned and emailed to the APE specialist as soon as it is received by the case manager. Once the APE specialist has received the signed assessment plan then the APE specialist will make arrangements with the case-manager/general education teacher to start the assessment.

Eligibility and Placement Guidelines: Once the child is 1) identified as having a disability, as defined in 20 U.S. C. 1401(3), 2) is determined by the IEP team to be eligible for special education, and 3) the results of assessment indicate that performance in physical education is adversely affected, then specific physical education services must be addressed as stated in 34 CFR Sec. 300.307. The individual child may be considered for adapted physical education services if the IEP team determines that the child is eligible to receive special education and/or related services.

Adapted physical education is identified as a related service in California Education Code 56363(a) that explains that related services are the same as designated instruction and services in Federal law. Adapted physical education is provided for children with disabilities. Adapted physical education is included in the definition of special education in regulation 300.26 (b) (1 through 3), which defines adapted physical education as special education. Adapted physical education is not a disability category. This service or program is available to those children who have been identified as having a disability that is defined in IDEA. Therefore, once a child is identified as having a disability under IDEA, and is an individual with exceptional needs under Sec. 56026, the IEP team may determine that adapted physical education is the special education that the child needs. Adapted physical education can be the only service that is received.

There are no specific placement criteria established in federal or state statutes or regulations for adapted physical education services. Frequently, poor performance on motor tests indicates that

the pupil is demonstrating difficulty with movement skills and/or performance. Scores and age equivalent scores commonly used by the APE specialists to indicate poor performance are: a raw score which falls 1.5 standard deviations below the mean, a raw score that ranks at the 7th percentile or below, or an age equivalent which indicates the child is functioning at 30% below chronological age. Sometimes, the nature of the disability is such that even though the student performs within normal limits on standardized motor tests or on developmental scales, performance in physical education continues to be adversely affected. In these specialized cases where difficulties such as emotional disturbance, mental retardation, and/or behavior difficulties interfere with educational performance in physical education, the IEP team may determine that adapted physical education services are appropriate. A student may score poorly on a motor test, but may be able to participate successfully in one or more of the other physical education placements. In these cases, the IEP team may determine that adapted physical education services are not appropriate.

Temporary Disabilities: A student, who has a disability that is temporary in nature, is not eligible for special education and/or related services as the disability will diminish significantly or will disappear over time. Some examples are broken bones, pulled ligaments and muscles and infections. Since adapted physical education is usually a special education service, children with temporary disabilities are not eligible for adapted physical education services. Some individuals with temporary disabilities may need accommodations within general or specially designed physical education. Consultation between the general and adapted physical education teachers can be extremely important in such cases.

The adapted physical education teacher may be a resource to the general or specially designed physical education teacher by suggesting adaptations, accommodations and modifications for children with temporary conditions. The adapted physical education teacher should endeavor to be a supportive resource by maintaining knowledge of temporary disabilities and the resources to research them as necessary.

Physical Education Programs and Services: There are no specific state adapted physical education entry criteria. However, once the child is identified as having a disability, which is adversely affecting physical education performance, and the child is determined to be eligible for special education by the IEP team, specific physical education services must be addressed as stated in 34 CFR Sec. 300.308

Strong foundations in both state and federal laws have led to the development of a range of physical education program options. Modified physical education is part of general or regular physical education programming; therefore it need not be listed as a separate type of general physical education. (However, modifications or accommodations should be listed on the child's IEP). To ensure this is clear to all, it is recommended that the service delivery model reflect modified physical education as included within general physical education.

Physical Education Service Delivery Options

Physical Education: This option encompasses a full spectrum of game, sport, fitness, and movement activities, including physical and motor fitness, fundamental motor skills and patterns,

and skills in aquatics, dance, and individual and group games and sports. The student participates with or without accommodations adaptations, or modifications that can be made by the general physical education teacher. The IEP should accurately reflect any accommodations, adaptations, or modifications that are necessary for the student to participate successfully (and safely) in the general physical education program.

Specially Designed Physical Education: This physical education program is for a special education class with minimal or limited adaptations, accommodations or modifications and is provided for the children and taught by the person who normally teaches physical education for this population. 5 CCR Sec. 3051.5(a).

Adapted Physical Education: Adapted physical education is a service provided by a credentialed adapted physical education teacher to individuals who have needs that cannot be adequately satisfied in other physical education programs as indicated by the assessment and IEP process. Adapted physical education service may be provided through direct instruction, team teaching, or collaborative consultation, as long as appropriate goal(s) and objective(s) are indicated and accurately monitored by the adapted physical education teacher.

All adapted physical education services should be accurately indicated on the individual's IEP with appropriate goals and measurable objectives, aligned with physical education curriculum standards, recorded and monitored by the adapted physical education teacher.

The frequency and duration of adapted physical education service will be based upon the needs of the student and should be listed on the IEP. Collaborative consultation is one method of providing service on behalf of the individuals, to assist the student in participating successfully in the less restrictive settings of general physical education.

All physical education program options should be available to all individuals. The IEP team must determine which combination of services would best meet the individual's needs and will also meet the mandated number of minutes required (elementary = 200 minutes/10 days; secondary = 400 minutes/10 days) for physical education in the least restrictive environment. A student who receives 60 minutes per week in adapted physical education would need to fulfill the remaining mandated physical education minutes in general or specially designed physical education.

Extended School Year (ESY)

Extended School Year (ESY) services are individualized extensions of special education and related services that are provided to a student with a disability beyond the normal school year, such as during extended breaks from school and summer vacations.

1. They are provided by the District at no cost to the parents so that students may maintain the skills they've learned during the school year.
2. Such individuals shall have handicaps which are likely to continue indefinitely or for prolonged periods, and interruption of the pupil's educational programming may cause regression, when coupled with limited recoupment capacity, rendering it impossible or unlikely that the pupil will attain the level of self-sufficiency and independence that would otherwise be expected in view of his or her handicapping condition.

3. The lack of clear evidence of such factor may not be used to deny an individual an Extended School Year program if the Individualized Education Program (IEP) team determines the need for such a program and included extended year in the individual program pursuant to subsection (f).” (CCR-Title 5, Division 1, Chapter 3, section 3043).
4. ESY services vary in intensity, location, type of service, and length of time, depending upon each student’s needs.
5. The need for Extended School Year (ESY) programming must be considered and documented annually on the IEP for every student receiving special education services. ESY eligibility is not limited to students with particular types of disabilities.

Extended School Year (ESY) is:

- Based only on the individual student’s specific critical skills that are critical to his/her overall education progress as determined by the IEP team
- Designed to maintain a reasonable readiness to begin the next year
- Focused on specific critical skills where regression or recoupment, due to extended time off, may occur
- Considered as a strategy for minimizing the regression of skill, in order to shorten the time required to gain the same level of skill proficiency that the child exited with at the end of the school year

Case managers should notify school nurses of all ESY students who have medical needs 45 days prior to the start date of ESY. This allows time for the school nurse to address student’s medical needs and train ESY staff appropriately.

Determination of ESY Services

Not every student with a disability is entitled to receive ESY services. Rather, students who are determined by their IEP team, based on the factors below, to need ESY services are entitled to receive them as part of a Free Appropriate Public Education. Decisions about ESY eligibility are made through the IEP process at the student’s annual IEP meeting. The IEP team, including parents, determine whether ESY services are necessary, based on the following factors:

- The student’s progress toward IEP goals
- The nature and severity of the disability
- The likelihood of regression caused by the school break and a failure to recover critical skills within a reasonable time period
- The presence of any interfering behaviors that might impede a student’s ability to learn
- The availability of alternative resources

Parents who disagree with the IEP team’s decision concerning eligibility for ESY services may resolve their disagreement through Due Process Procedures.

The IEP meeting addressing ESY should take place a reasonable time prior to the commencement of the extended break.

Factors to Consider:

ESY programming must be provided to eligible students at no additional cost to parents. The IEP team shall determine the need for ESY eligibility and programming considering the following factors:

1. Nature and severity of the disability
 - a. The more severe the disability, the higher the probability that the student will need ESY services.
2. Current IEP goals and objectives
 - a. If progress on meeting these goals has been very slow, the student may need ESY services to continue to make progress in support of FAPE.
3. Emerging skills and breakthrough opportunities
 - a. If a student is just beginning to communicate or accomplish self-care skills a temporary break may cause a setback.
4. Interfering behaviors
 - a. Behavior may have an impact on student's ability to make educational progress.
5. To prevent serious regression during an extended break
 - a. If the student has continued to progress educationally from year to year despite the lack of ESY programming, ESY may not be necessary to ensure FAPE. Additionally, there does not need to be a pattern of regression previously but team needs to consider whether there is a likelihood of regression based on knowledge of student.

Which Extended School Year services should be included in a child's IEP?

The extended school services should concentrate on the **areas impacted by regression and inadequate recoupment**. These services may look markedly different in ESY as determined by the IEP team. The decision is **not** driven by the setting in which the student is educated during the comprehensive school year.

This may also be true for the amount the duration of services as based on the individual child's needs.

Related services must also be considered as they relate to the child's benefiting from special education.

What Extended School Year Is Not:

Extended School Year (ESY) is not:

- It is not a mandated 12-month service for all students with disabilities
- It is not required to function as a respite care service
- It is not funded by General Fund
- It is not required or intended to maximize educational opportunities for any student with disabilities
- It is not necessary to continue instruction **on all the previous year's IEP goals** during the ESY period
- It is not compulsory. Participation in the program is discretionary with the parents, who may choose to refuse the ESY service. There may be personal and family concerns that take precedence over ESY
- It is not required solely when a child fails to achieve IEP goals and objectives during the school year
- It should not be considered in order to help students with disabilities advance in relation to their peers
- It is not for those students who exhibit random regression solely related to transitional life situation or medical problems, which result in degeneration

- It is not subject to the same LRE environment considerations as during the regular school year as the same LRE options are not available. Additionally, LRE for some students may be home with family members
- It is not a summer recreation program for students with disabilities
- It is not to provide a child with education beyond that which is prescribed his/her IEP goals and objectives.

Home and Hospital Instruction

Home and Hospital Instruction is a placement option available to IEP teams that is intended primarily as a temporary placement when a special education student is unable to attend school for a period of time. A note from a medical practitioner must document the student's medical condition. Under the provision of Home and Hospital Instruction, a special education student receives all of his/her instruction at home or at a designated location. The Home and Hospital teacher meets with the student, typically for 5 hours per week, as determined by the IEP team, to provide instruction during the period the student is unable to attend school. During the period covered by Home and Hospital Instruction, the student receives grades and credit for work completed.

Home and Hospital Placement

Special Education Home and Hospital services are determined at an IEP meeting, which **must include a Program Specialist**.

Home Instruction time varies and is determined at the IEP meeting. The instruction may take place at the student's home with a parent or other adult present, hospital or at a public place such as the library. The length of time for Home Instruction may vary from a few weeks to the entire school year, depending upon the student's IEP.

School Site Responsibilities

1. Accounting Department's procedures to input student into Aeries should be followed
2. Classroom teachers will provide all required work to the home instructor
3. The classroom teacher and home instructor should collaborate to determine the grading of the student

Home Instructor's Responsibilities

1. If scheduled appointments are missed by the home instructor, he/she must make up the missed time.
2. Phone calls, teacher/ parent contacts, home visits, etc. must be documented.
3. Home instructors will follow the schedule for the student's school of attendance.
4. Home instructors will provide grade information at normal grade reporting periods according to the school calendar and when dropping Home and Hospital services.
5. Home instructors are required to keep an attendance register for students on home instruction. Call the Special Education Office with any questions regarding the state registers.
6. At the end of each register period, teachers will send a copy of their current register page to the Special Education Office.
7. The home instructor must track progress on the student's IEP goals and objectives and communicate progress back to the case manager.

8. **Home and Hospital Teacher** will contact the student's current teacher for information and materials and call the parent to schedule the service times.
9. **Home and Hospital Teacher** will turn in claim form to Special Education Office.

Case Manager's Responsibilities

1. Case manager to inform Program Specialist regarding any student needing Home and Hospital Instruction.
2. Credentialed School Nurse should be notified and invited to the IEP meeting
3. Program Specialist will hold IEP to add Home and Hospital Instruction services, and notify Special Education Secretary.
4. Review Health Plan at IEP if necessary.
5. Copy of IEP and application will be delivered to Special Education Secretary.
6. Secretary will contact a teacher on the Home and Hospital Instruction list to arrange a teacher to provide instruction.
7. Secretary will provide the teacher with a copy of IEP and claim form.
8. Secretary will provide the Parent Information (brochure, letter, and review form) to parent either with the teacher or in the mail.

Independent Study

Most special education students require additional services to be able to benefit from their education, Independent Study may not offer sufficient structure or support for most students with special education needs.

Contact Program Specialist if Independent Study is being discussed. A Program Specialist must attend any IEP in which Independent Study is considered.

Independent study-Parent requested for travel

1. Must follow general education process and criteria.
2. An IEP must be held to document the independent study.
3. The IEP notes must clearly state that the student's current FAPE/IEP remains available as written in the current IEP while the student is out. When IS ends the student will return to the placement/services of the current IEP. IS is not stay put and the student does not have stay put rights to the short-term IS once the IS contract has expired.
4. See a Program Specialist if you have any questions or need support with this process.

Guidelines for Inclusion

Inclusion is a program for students identified as disabled and receiving special education services. The primary placement is in an age appropriate **General Education Classroom** located at the neighborhood school or school district. It enables students to:

1. Participate in the core curriculum and District/State assessment with adaptation and modification
2. Achieve their IEP goals and benchmarks by participating in the ongoing activities of the general education classroom
3. Inclusion provides one component in the full continuum of services available within the SELPA to meet the unique educational needs of students with special needs

4. IEP Team considerations for planning successful inclusion are:
 - The ability of the student to participate in a classroom setting in a socially appropriate manner
 - The student's need for supervision
 - The student's need for assistance with personal care
 - The student's need for direct instruction for IEP goals and benchmarks
 - The student's need for development of parallel curriculum materials
 - The student's need for assistance with/instruction in the use of specialized equipment and materials
 - The student's need for a transition into the general education classroom
5. The IEP Team will need to determine who is responsible for providing for each of these student needs. Teams are encouraged to consider all resources including peer/cross-age tutors, volunteers and current school employees.

If you would like to recommend a student for Inclusion Services, you must contact a Program Specialist for guidance. A Program Specialist must attend any related IEP.

Instructional Support Assistant

In some cases, An Instructional Support Assistant may be provided to a student. The Instructional Support Assistant may be provided as additional Classroom Support or as a one to one Assistant.

Program Specialist, Psychologist, Behavior Analyst and any other Special Education staff, in collaboration with the teacher, will assess needs for Instructional Support Assistant which may be needed for one of the following reasons:

- Inclusion
 - Health related issues
 - Behavior Plan Implementation
 - Unique Program Concerns (such as deaf & hard of hearing)
 - IEP Implementation
 - Mobility and access to the environment
1. If an Instructional Support Assistant is requested or warranted an IEP meeting must be held to address the request. **With the approval of a Program Specialist**, an Assessment Plan would be signed for a team of providers to complete an observation. **Program Specialist must attend any IEP in which an Instructional Support Assistant is discussed or reviewed.**
 2. A meeting is held to review the results of the observations. If the IEP team determines that an Instructional Support Assistant is appropriate the IEP team may consider the following:
 - a. Maximize current support staff, as appropriate, to meet student needs.
 - b. If an Instructional Support Assistant is appropriate as determined by the IEP team, the student's IEP must include:
 - i. specific details of the frequency and duration of the service
 - ii. identification of the reason for the service
 - iii. when the service will be provided (example: structured or unstructured time)

- iv. how the service will be delivered
 1. (example: 1:1 or additional classroom support).
 - v. A detailed Fade Plan
3. Specific timeline/date for monitoring plan must be established along with a Fade Plan to facilitate student independence.

Private Schools

The District is responsible under federal and state law to identify and provide equitable services to children voluntarily enrolled by their parents/guardians in private schools located within the District.

Definitions

Parentally Placed Private School children with disabilities means children with disabilities who are voluntarily enrolled by their parents/guardians in a private school or facility within District boundaries, including children who are attending a private school or facility within District boundaries but who reside in another district. A Parentally Placed Private School Student with disabilities does not include a student with disabilities who is placed in a private school by a public agency.

A Private School or facility is a private full-time day school, including a religious school, located within District boundaries.

The SELPA shall consult with all private school representatives and representatives of parents/guardians of Parentally Placed Private School students with disabilities during the design and development of equitable services for the children.

Special Education Referrals from Private Schools

Referrals from private schools for special education assessment are sent to the Special Education office.

1. The special education secretary will document the date of receipt and then forward the referral to the Program Specialist. The Program Specialist will determine who will participate on the assessment team and forward the referral to each provider.
2. Program Specialist will provide Assessment Plan to parent for signature within 15 days of receiving the referral. In the case of Private School referrals, **the 15 day timeline begins once the district office receives the referral.**
3. Once the Program Specialist receives the referral, she/he contacts the Private School to arrange a team meeting to discuss the referral. The Assessment Plan team meeting should include the parents, the private school classroom teacher and academic intervention teacher, along with the Sylvan team members who will be assessing, typically the Program Specialist, school nurse, and DOR Rep psychologist. The Private School may hold an SST meeting to gather information regarding the student's strengths and weaknesses and hear parent and teacher concerns. When SST notes are provided to the Program Specialist, an Assessment Plan meeting may not be needed. Program Specialist will contact parent for further information if needed.

4. At the Assessment Plan development team meeting, or through a telephone call with the parent, the Program Specialist will gather information regarding background, parent and school concerns. This information is factored in to determine the areas to be assessed.
5. An Assessment Form is signed and the parent is given a *Health and Developmental Assessment* Form to complete and return to the Program Specialist.
6. If the student's DOR is not Sylvan Union School District, a Release of Information Form is also signed allowing us to communicate with the DOR.
7. The Program Specialist will forward all signed documents which include the signed assessment plan, Health and Developmental Assessment Form (to the school nurse and psychologist), and Release of Information Form to the assigned assessment team.
8. The Program Specialist will coordinate the IEP date and time with the assigned assessment team members, and will send out the IEP meeting notification to the parents.
9. Each assessment team member will coordinate assessment times, etc for assessing the student.

When Sylvan Union School District is the DOR

If the student's DOR is Sylvan, the district Program Specialist in charge of Private School referrals will attend the IEP as the administrator. Sylvan Union School District is responsible for the IEP and the offer of FAPE

If the student is found eligible for specialized academic services, the parents must enroll the student in their home school to receive those services.

If the student is found eligible for Speech and Language services only, or if the parent declines academic services but wants their child to participate in Speech and Language, the IEP meeting is closed and an ISP meeting is opened to enroll the student in an ISP Speech and Language services. Sylvan is responsible for providing those services under an ISP.

When Sylvan Union School District is not the DOR

In the case of students from a DOR other than Sylvan, the Program Specialist contacts the DOR and sends a copy of the Release of Information to the assessment team members who will be handling the case. The DOR may choose to do the assessment, but typically they do not.

The Sylvan team is responsible for assessments, writing the Multi-Disciplinary Report (MDR), and sending the MDR to the DOR a couple days in advance. The DOR is responsible for the IEP paperwork. The administrator/designee from the DOR is responsible for the IEP and making the offer of FAPE.

If the student is found eligible for Speech and Language services only, or if the parent declines academic services but wants their child to participate in Speech and Language, then the IEP meeting is closed and an ISP meeting is opened to enroll the student in ISP Speech and Language services. Sylvan is responsible for providing those services under an ISP.

These services are limited to 14-16 hours per year. Annual reviews for an ISP are done by Sylvan. The DOR, if other than Sylvan, does not need to be invited.

Dispute Resolution- ISP

Parents are not entitled to a Due Process hearing regarding a dispute of the contents of an ISP or implementation of an ISP. A parent may pursue a Due Process hearing in situations limited to the issues of Child Find and eligibility. Disputes regarding an ISP may be resolved pursuant to the local uniform complaint policy and procedures and/or by filing a complaint with the California Department of Education pursuant to complaint with the California Department of Education pursuant to Title 5 of the California Code of Regulations Sections 4600 et seq.

Transportation Guidelines

Process for Requesting

1. The IEP Team determines if the student's severity of their disability qualifies for and requires special transportation services.
2. Parent/Guardian(s) completes the Emergency Information Form.
3. The SUSD Transportation Facilitator completes the Request for Special Education Transportation form.
4. The SUSD Special Education office will complete both forms and mail them to the SUSD Transportation Department, along with a copy of the IEP.

Parent Not Home Procedure

A responsible adult at least 18 years old must receive the student when the bus arrives at the scheduled drop location. Any adult other than the parent or guardian, who will receive the student, must be listed on the Special Education Transportation Emergency Form.

If the designated adult is unable to meet the bus, arrangements must be made for another adult (listed on the Emergency Form) to meet the bus when it arrives. The following steps are taken when a parent or other responsible adult is unavailable to receive the student:

- **First Incident:** Reminder Letter
- **Second Incident:** Warning Letter
- **Third Incident:** Program Specialist/Principal sets up a mandatory meeting
 - Within (10) school days from the date of notification, with the parents to complete the After School Plan. The Program Specialist submits the After School Plan to the Transportation Facilitator. Transportation may be suspended if the mandatory meeting is not completed within ten (10) school days.
- **Additional Incidents:** May result in the cancellation of SUSD Transportation services. **If transportation is cancelled**, the parent will receive a phone call and a confirmation letter from SUSD Transportation.

Independent Educational Evaluation

If you receive a request for an Independent Educational Evaluation, contact Program Specialist immediately. Designee from the Special Education office must contact parent. Timelines apply.

1. A parent/guardian has a right to obtain an Independent Educational Evaluation of the student at public expense if the parent/guardian disagrees with an assessment by the

District subject to the criteria and procedures identified below and as stated in federal and state law governing independent educational evaluations. (20 U.S.C. 1415; 34 C.F.R. 300.502; Ed. Code, 56329.)

2. If a parent/guardian requests an Independent Educational Evaluation at public expense, the District must, without necessary delay, either file a Due Process complaint to request a hearing to show that its evaluation is appropriate, or ensure that an Independent Educational Evaluation is provided at public expense. However, the parent/guardian is not entitled to an Independent Educational Evaluation that meets the criteria and procedures identified below.
3. If the District files a Due Process complaint and the hearing decision is that the District's evaluation was appropriate, the parent/guardian may still obtain a private evaluation, but not at the District's cost.
4. If a District observed the student in conducting its assessment or if its assessment procedures make it permissible to have in-class observation of the student, an equivalent opportunity shall apply to an Independent Educational Evaluation of the student in the student's current educational placement and setting, and observation of an educational placement and setting, if any, proposed by the District, regardless of whether the independent educational evaluation is initiated before or after the filing of a Due Process hearing. (Ed. Code, 56329).
5. Independent evaluators must agree to release their assessment information, results, and report to the District prior to receipt of payment for services. The results of the Independent Educational Evaluation will be considered in the diagnosis, program decisions, and placement of the student with disabilities as required by the Individuals with Disabilities Education Act.

Sources of Independent Evaluation by Area of Assessment

The District does not specifically endorse any agency or individual to conduct an Independent Educational Evaluation. **For a current list of local providers, please contact Program Specialist.**

Section 5:

Confidentiality & Student Records

Confidentiality

Confidentiality is a right afforded each of the students in our District, and it is an expectation that is held by parents, teachers and administration. The Education Code specifically mandates the confidentiality of multiple types of information regarding each of our students. Personal identifiable information about any student should be kept in strictest confidence. There are significant consequences associated with the unauthorized release of confidential information, including but not limited to disciplinary actions, civil penalties and the potential loss of federal and state funding.

Many activities and events in school can generate confidential information about a student. Specific examples include: standardized test scores, information regarding specific needs of students (ex. Special education program), as well as disciplinary information including suspensions and expulsions. Staff members are expected to keep all such information confidential. It is expected that any conversation regarding confidential information may be overheard and thus, constitute a breach of confidentiality.

Confidentiality Guidelines

- Staff members need to be careful about collection and communication about confidential information.
- Specific questions from parents to support staff must be referred back to the student's assigned teacher. When pressed, support staff should only answer in the most general terms.
- If a fellow student inquires about a confidential matter, use this as a teachable moment. Inform the student that you are not at liberty to discuss a confidential matter.
- Never take any confidential student records off campus unless authorized by the school principal or his/her designee.
- Report to your supervisor any breach or suspected breach of confidentiality immediately upon your discovery.

In summary, confidential information should be carefully handled regardless whether the information is written or verbal. The consequences for violating confidentiality can be very significant, including court action.

Guidelines for Organizing IEP Files

It is very important to keep a student's IEP file in an organized manner. There is only **one** file for each student, although there may be multiple folders.

- IEP forms created and Assessment Reports discussed at an IEP meeting should be kept together as one complete document and not separated.
- The current IEP should be kept on the left hand of the file. Any amendments made to the annual IEP should be attached to the annual.

- The most recent forms should be on top in reverse chronological order.
- Do not keep duplicate forms.
- If there are missing forms, make every reasonable effort to locate them at the previous school of attendance because the current teacher is accountable in a compliance review audit.
- Progress reports will be printed and updated every trimester. The most recent update will be placed on the left hand side of the file. Once the next progress report is created, you will remove the previous progress report and replace it with the current progress report.

Organize the IEP file as soon as you receive a new student. IEP files from outside the district are often organized in a different system than used in SUSD. Take time to organize them in the above described manner.

The IEP file is developed to comply with the law, and to contain diagnostic and prescriptive information. **The following items *should not be* in the IEP file:**

- Duplicates of forms
- Discipline / tardy notes / emails
- Supporting data *which is no longer needed*
- *Health Information (Records, vision, hearing, immunization)*

Cumulative File (Cum)

There is a colored paper inside the CUM file, indicate when a student is receiving Special Education Services (i.e. R.S., Special Day Class, Speech, A.P.E. etc). This alerts the school staff to check for an IEP folder before sending the CUM to another school.

Before transferring a student's records to a new school, check the CUM file for a colored card stock insert specifying that the student has a separate IEP file. It is the responsibility of the office manager or registrar that the IEP file be included with the CUM to be sent on to the new placement/school.

Maintaining Pupil Records

Information regarding participation in Special Education Programs including required assessments, IEP's, and authorizations and evidence of eligibility are maintained at each individual school.

- Records must be maintained for at least 3 years past the graduation year or until the student is 22 years of age

Student Records

All student records are classified as Mandatory Permanent, Mandatory Interim, or Permissive. Regulations governing access, transfer, and destruction of records vary according to their classification. Special Education Student Records are classified as Mandatory Interim Records.

Therefore: School Districts must protect the confidentiality of personal identifiable information at collection storage, disclosure and destruction stages.

- One official at each Agency (school) must assume responsibility for ensuring the confidentiality of any personal identifiable information.

- All persons collecting or using personally identifiable information must receive training or instruction regarding the state policies and procedures as stated in the annual program plan.
- Each agency (school) must maintain for public inspection a current list of names and positions of those employees who have access to personally identifiable information.

Access to Records

Access means a personal inspection and review of a record or an accurate copy of a record, an oral description or communication of a record or receipt or a copy of a record.

State and federal laws permit access to records according to the following listings. Those granted access are prohibited from releasing information to another person or agency without written permission from the parent or legal guardian. (If the student is 18 or older, the right of consent belongs to the student unless a parent or guardian obtains conservatorship.) Students who are married are considered to be emancipated minors even if younger than 18 years of age.

Mandatory Access

The following persons or agencies shall have access to student records:

- Natural parents, adoptive parents or legal guardian of student younger than age 18 or dependent student age 18 or older (within 5 business days of request)
- School officials and employees for legitimate educational purposes
- School Attendance and Review Board (SARB) members
- Other public schools (California) where student has enrolled or intends to enroll
- Federal, state, and county officials for program audit or compliance
- Agencies specified by law in cases of child abuse
- Student age 16 or having completed tenth grade
- Those so authorized in compliance with a court order
- Private schools or out-of-state schools of anticipated or new enrollment

Permitted Access

- Appropriate persons in an emergency
- Agencies or organizations in connection with students applying for financial aid
- Accrediting associations
- Organizations conducting studies on behalf of the district
- Private schools or out-of-state schools (to mandatory interim and permitted student records)
- The person or agencies authorized by parent or guardian with custody (or student of age 18 or older)

Prohibited Access

If an agency or person is not included, the above access can only be granted through written permission from the student's parent.

Such permission must:

- Specify the nature of the information to be released; and
- Specify the purpose for which the information is released

In addition, the recipient must be informed of, but need not acknowledge in writing, restrictions upon further release to another agency or person without specific written authorization.

Parent Access to Student Records

Parents may request to inspect and obtain a copy of their child's records. The parent must make the request in writing. The request is given to a certificated staff member. The certificated staff member schedules an appointment with the parent within five business days and reviews the contents of the student's file with the parent. If photocopies are requested, a copy of the requested records must be provided to the parent within 5 business days. The parent should be notified when the copy is available to be picked up by the parent.

Log of Request for Information

All requests of individuals or agencies, with the exception of other school officials and parents, must be recorded in a record or log of requests for information. The log or record must be open to the inspection of a parent and the school officials. The log or record must contain the following information: the name of the requesting party and the legitimate interest of the party. The log should be kept with the student's educational records.

Transfer of Special Education Student Records

Special Education student records are mandatory to:

- California Public or Private Schools
- Out-of-state Public or Private Schools
-

Consent to Release Student Records

1. Written consent must specify the records to be released, identify the party or class of parties to whom records may be released, state the purpose(s) of the disclosure and be signed and dated by the parent of eligible student.
2. The recipient of the records must be notified that the transmission of information to others without the written consent of the parent is prohibited; however, information may be shared with other persons within the educational institution obtaining access, as long as such persons have a legitimate interest in the information.
3. Whenever a student reaches the age of 18 years or is attending an institution of post-secondary education, the permission or consent required of, and the rights afforded to, the parents or guardian of the student shall thereafter only be required of, and afforded to, the student – unless a court of competent jurisdiction has granted another individual conservatorship over the student.

Destruction and Maintenance of Student Records

Different special education records have different requirements under the law as to how long they must be kept on file. Please check with the Special Education office if you have a question about any special education records related to the number of years they must be kept on file.

SECTION 6:

Discipline & Behavioral Interventions

Discipline

Whenever a special education student exhibits a pattern of behavior that impedes the learning of himself or others, the case manager should work closely with the IEP Team to ensure appropriate behavioral interventions are in place. The District is required to follow specific procedures if it makes or contemplated making a disciplinary change in a special education educational placement. *Whenever a change of placement based on discipline has occurred, a manifestation determination meeting must be held.* All related factors such as: a child's disciplinary history, ability to understand consequences, expression of remorse, and supports provided to a child with disability prior to the violation of a school code should be considered by school personnel when determining whether a disciplinary change in placement is appropriate for a child with a disability. (71 Fed. Reg. 46715 (2006))

Removal / Suspension for 10 Days or Less

A change in placement *does not occur* when a student with disabilities is removed from his/her placement for **10 school days or less** in a school year. (34 C.F.R.300.530(d)(4)) However, case managers should be proactive and consider a classroom support plan. **The District is not required** to provide the special education student with any services during removals for 10 school days or less in a school year unless the school district provides services to children without disabilities who are similarly removed.

A Series of Removals for More Than 10 School Days that Constitute a Pattern

A change in placement occurs when a special education student is removed from school for a series of days that constitute a pattern. The District determines on a case-by-case basis if a pattern of removals exists based upon: whether the series of removals totals **more than 10 school days in one school year**, the child's behavior is substantially similar to the child's behavior in previous incidents that resulted in the series of removals, and additional factors support a pattern, such as the length of each removal, total amount of time removed, and proximity of the removals to one another. (20 U.S.C. 1415 (k); 34 C.F.R. 300.536(a)(2))

Accumulation of 10 days/20 days of Suspension or Recommendation for Expulsion

A change of placement has occurred when a student has been given suspensions that **total 10 or more** days, suspensions that total 20 days, or a suspension with the recommendation for expulsion. This is considered to be a change of placement. (34 C.F.R. 300.530(e)) The meeting should occur as close as possible to the tenth day of suspension. (*See pages on Manifestation Determination Meeting*). The District must provide services to a special education student who is suspended for more than 10 school days in the same school year. School personnel, in

consultation with at least one of the student's teachers, shall determine the extent to which services are needed, so as to enable the student to continue to participate in the general education curriculum in another setting and to progress toward meeting the goals in the student's IEP. (20 U.S.C. 1412(a)(1)(A); 34 C.F.R. 300.530.

Reporting a Crime Committed by a Disabled Child

The IDEA does not prohibit a school district from reporting a crime committed by a disabled child to law enforcement. An agency reporting a crime committed by a disabled child must ensure that copies of the special education and disciplinary records are transmitted to the appropriate authorities to whom the school district reports the crime. However, parental consent is required prior to the transmission of any such copies of the student's records in accordance with the Family Educational Rights and Privacy Act (FERPA). (34 C.F.R. 300.535; 71 Fed. Reg. 46728.)

- If the District believes that returning the student to the previous placement presents a danger, the District may file for an expedited due process.
- Notify the parent of the violation and provide copy of the Procedural Safeguard IEP Meeting held within 10 school days of the violation
- Review relevant information in the student's file (IEP, teacher, observations, parent input)
- Determine if the conduct in question was a manifestation of the child's disability by answering the following two questions:
- Was the conduct in question caused by, or have a direct and substantial relationship to the child's disability?
- Was the conduct in question the direct result of the LEA's failure to implement the IEP?

Discipline Procedures

Recommendation for Expulsion Procedures

1. The site Principal is responsible to make the formal recommendation for expulsion.
2. IEP Team meets and makes Manifestation Determination within 10 days of recommendation for expulsion.
3. IEP Team meets and determines if the conduct in question:

Manifestation Determination Meeting

A Manifestation Determination review evaluates the relationship between a student's disability and act of misconduct that must be undertaken when a student's placement has changed as a result of disciplinary actions. (20 U.S.C. 1415(k) and 34 C.F.R. 300.530(e))

The manifestation determination review must be conducted by the school district, the parent, and relevant members of the IEP team as determined by the parent and the LEA. The meeting should include a general education teacher if the student participates in the general education environment. The team must review relevant information in the student's file, including the child's IEP, any teacher observations, assessments and information provided by the parents. (34 C.F.R. 300.530(e))

IEP notes should reflect what documents were reviewed, as well as all the relevant information that was considered.

Manifestation Determination meetings can also become annual and triennial reviews as needed.

Timeline

The IEP and Manifestation Determination meeting should be held as close as possible to the 10th day of suspension. The District must convene an IEP meeting within 10 school days of any decision to *change the placement* of a disabled child because of a violation of a code of student conduct. (34 C.F.R. 300.530(e))

Notice to Parents

The District must notify the parents of the date on which the district decides to make a removal that constitutes a change in placement because of a violation of the code of student conduct. In addition, the District must provide parents with a copy of the procedural safeguards notice. (34300.530(h)) A meeting notification, with the purpose stated, must be sent prior to the manifestation determination meeting.

Responsibility of the IEP Team

The IEP team must determine the following:

- If the conduct in question was caused by, or had a direct and substantial relationship to, the child's disability; or
- If the conduct in question was the direct result of the District's failure to implement the IEP. (34 C.F.R. 300.530(e).)

If the IEP team determines that the conduct in question **was** caused by, or **had** a direct and substantial relationship to, the child's disability, and/or that the conduct in question **was** the direct result of the District's failure to implement the IEP, then the child's behavior **was** a manifestation of his disability.

If the IEP team determines that the conduct in question **was not** caused by, and **did not have** a direct and substantial relationship to, the child's disability, and that the conduct in question **was not** the direct result of the District's failure to implement the IEP, then the child's behavior **was not** a manifestation of his disability.

If the Child's Behavior Was Not a Manifestation of His or Her Disability

If the child's behavior was not a manifestation of his or her disability, then the district may continue to discipline the child as it would a non-disabled child. However, for removals in excess of 10 school days, the district must ensure that the disabled child continues to receive educational services so as to:

- participate in the general education curriculum, although in another setting
- progress toward meeting the goals set out in the child's IEP, and receive, as appropriate a functional behavior assessment, and behavior intervention services and modifications designed to address the behavior violation so that it does not recur. (20 U.S.C. 1415(k)(1)(D); 34 C.F.R. 300.530(d))

If the Child's Behavior Was a Manifestation of His or Her Disability

If the child's behavior was a manifestation of his or her disability, then the IEP team must do the following:

- Conduct a functional behavioral assessment and implement a behavior plan for the child
- OR**
- Review an existing behavior plan and make any necessary modifications to the behavior plan
- The student should be returned to the placement from which he/she was removed, unless the parent and District agree to a change of placement. (20 U.S.C. 1415(k)(1)(F); 34 C.F.R. 300.530(f))

Manifestation Determination Meeting Tips:

Use the "Ground Rules to Enhance Team Communication"

- If the site knows the infraction is going to result in a manifestation determination meeting, provide the parent with a meeting notification immediately. Include the copy of parent rights. If necessary, get an assessment plan signed. This prevents delay for the manifestation meeting to occur.
- Do not use amendment forms for Manifestation Determination meetings. Include all documents with the IEP including behavior plan if applicable, and Manifestation Determination form.

Manifestation Determination Pre-Meeting Checklist

1. Program Specialist is immediately informed that a special education/504 student is being suspended for more than 10 school days or recommended for expulsion. (Principal/Supervision Office)
2. Program Specialist notifies Special Education Directors if student is recommended for expulsion.
3. IEP/504 Manifestation Determination date/time is determined with Principal/Assistant Principal, Parent, Psychologist, Special Ed. Teacher, 504 Coordinator and Program Specialist as appropriate. Arrangements are made for at least one of the student's General ed. teachers to attend the IEP/504 Manifestation Determination Meeting.
4. Procedural Safeguards and Written Notification of the meeting is delivered to the parent at least 48 hours prior to the meeting.
5. School Psychologist determines if any further assessment is necessary.
6. School Psychologist or case manager collects and copies all documents necessary for IEP meeting.

Manifestation Determination Meeting Procedure Checklist

- Case Managers chairs the meeting.
- Purpose of the meeting.
- Introductions.
- Parents are given a copy of Procedural Safeguards and asked if they want their rights explained or if they have any questions about their rights.

- Description of current placement, services and performance. (Special Education Teacher/General Education Teacher)
 - Description of alleged misconduct. (Principal or Assistant Principal)
 - Review of Other Records. Assessment/Performance Reports; Intellectual, Social/Emotional, Behavioral information (School Psychologist)
- A. Review of Disability
- B. Recommendations regarding:
- if the conduct in question was caused by, or had a direct and substantial relationship to, the child's disability
- OR**
- if the conduct in question was the direct result of the District's failure to implement the IEP.
- While a Special Education student is on an extended suspension due to being recommended for potential expulsion, that student must be provided with direct instruction in order to meet his or her goals as outlined in the IEP. Parent/Guardians must be present while this instruction is provided.
 - Consider need to place child in an IAES for up to 45 school days. Consider need to review/revise or draft new behavior plan.
 - If appropriate, a copy of the IEP/504 documents is given to the Principal/Assistant Principal for inclusion in the expulsion referral packet.

Disciplinary Protections for Students Not Yet Eligible for Special Education

Students not yet eligible may receive special education protections of the District had a basis of knowledge that the student may have a disability before the behavior that occurred resulting in disciplinary action if one of the following has occurred:

- Parent expressed written concern to supervisors/teachers that student needs special education;
- Parent has requested a special education evaluation; or
- Teacher or other personnel expressed specific concerns about a pattern of behavior directly to Special Education Director or other supervisory personnel. (20 U.S.C. 1415(k)(5)(A),(B))

The District will not be deemed to have a basis of knowledge if:

- Parent refused to consent to an assessment of student;
- Parent refused to consent to special education services for student; or
- Student was evaluated for special education and determined not eligible. (20 U.S.C. 1415(k)(5)(C))

If a parent requests an evaluation of a child who is not identified as eligible for special education after the child is subjected to disciplinary measures, the evaluation must be conducted in an "expedited" manner. Until the evaluation is completed, the child remains in the educational placement determined by school authorities, which may include suspension and expulsion. (34 C.F.R. 300.534(d))

Behavioral Interventions and Supports

The general guideline regarding behavior is that the IEP Team must, in the case of a child whose behavior impedes the child's learning or that of others, consider the use of Positive Behavioral Interventions and Supports, and other strategies, to address that behavior.

Definitions

In addition to those found in Education Code Sections 56020- 56035, IDEA, and the 34 Code of Federal Regulation, Sections 300.4 - 300.45, the following definitions are provided:

Classroom Behavior Plan: A written document created by the teacher to document behavioral strategies and reinforcement being used to address non-compliance.

Behavioral Support Plan: A systematic implementation of procedures that result in lasting positive changes in the individual's behavior. Behavioral interventions are designed to provide the individual with greater access to a variety of community settings, social contacts and public events, and ensure the individual's right to placement in the least restrictive educational environment as outlined in the individual's IEP. Behavioral interventions **do not** include procedures which cause pain or trauma. Behavioral interventions respect the individual's human dignity and personal privacy. Such interventions shall assure the individual's physical freedom, social interaction, and individual choice.

Behavior Intervention Plan (BIP): A written document which is developed when the individual exhibits a serious behavior problem that significantly interferes with the implementation of the goals and objectives of the individual's IEP. The behavioral intervention plan shall become part of the IEP. The plan shall describe the frequency of the consultation to be provided by the behavioral intervention case manager to the staff members and parents who are responsible for implementing the plan. A copy of the plan shall be provided to the person or agency responsible for implementation in non-educational settings.

Serious Behavior problems: An individual's behaviors which are self-injurious, assaultive, or cause serious property damage and other severe behavior problems that are pervasive and maladaptive for which instructional behavioral approaches specified in the student's IEP are found to be ineffective.

Behavioral Emergency: A demonstration of serious behavior which has not been previously observed and for which a behavioral intervention plan has not been developed; or, for which a previously designed behavioral intervention is not effective.

Emergency interventions: Techniques used to contain/control unpredictable, spontaneous behavior which poses clear and present danger of serious physical harm to the individual or others and which cannot be immediately prevented by a less restrictive response or technique.

Behavior Support Plans

Behavior support plans are used as a proactive measure to manage behavior that is impeding learning. The case manager completes classroom behavior plans with assistance from the IEP

team. If necessary, case managers should consult with the school psychologist to assist in the development of the plan.

The plan must identify the student's strengths, interests and preferences. This anecdotal information should assist in developing strategies and possible reinforcers. The plan must address the specific behaviors that are impeding learning, the baseline and suspected antecedent (cause) of the misbehavior.

Behavior support plans specify the desired replacement behavior. An IEP goal must be written that directly relates to the behavior(s) in question. The goal should be written in measurable terms that can be monitored through observation and data collection.

The plan should address the reinforcements for demonstrating appropriate behavior, as well as the consequences for continued misbehavior. Shaping inappropriate behavior often times takes a collaborative effort between the school and home; as a result, the plan must specify the communication schedule that will take place between the school and the parent or guardian.

Classroom behavior plans should be addressed at least annually and adjusted, modified, or discontinued as needed.

Behavior Interventions

Sylvan Union Schools is committed ethically and legally to use of the least intrusive, non-aversive behavioral approach for the management of individual student behavior. Behavioral intervention techniques and plan development shall provide special educators the guidance necessary to assure lasting, positive behavior changes for those identified individuals with exceptional needs who evidence a serious behavior problem. The use of aversive procedures that cause pain or trauma in any way is prohibited.

SELPA guidelines comply with Positive Behavioral Interventions Regulations as set forth in Sections 3001 and 3052 of Title 5 of the California Code of Regulations. Whenever a behavioral emergency occurs, only behavioral interventions approved by the SELPA may be used. (*See pages on Behavioral Emergencies*)

The IEP team shall facilitate and supervise all assessment, intervention, and evaluation activities related to an individual's Behavior Intervention Plan (BIP).

Behavior Intervention Plan (BIP)

The BIP is a written document that documents a FBA and the appropriate interventions. A copy of the plan shall be provided to the person or agency responsible for implementation in non-educational settings.

The Behavior Intervention Plan (BIP) shall:

- Be based upon a comprehensive functional analysis
- Be attached to the IEP
- Be used only in a systematic manner in accordance with required provisions and shall include positive programming strategies

- Be developed and implemented in a consistent manner appropriate to the individual's life setting, where possible.

The following components are to be included in a BIP:

1. A summary of relevant and determinative information gathered from a functional analysis assessment
2. An objective and measurable description of the targeted maladaptive behavior(s) and replacement behavior(s)
3. The individual's goals and objectives specific to the behavioral needs;
4. A detailed description of the positive behavioral interventions to be used and the circumstances for their use
5. Frequency of occurrence of targeted and replacement behaviors and specific schedules for recording the frequency of intervention use
6. Specific criteria for discontinuing the BIP for lack of effectiveness or replacing it with a specified alternative
7. Criteria by which the procedure will be faded or phased out or exchanged for a less intense, frequent and/or restrictive one
8. The extent to which the behavioral interventions will be used in the home, residential facilities, work site or other settings
9. Specific dates for periodic review of the efficacy of the program
10. A specific description of the amount of time and frequency of the consultation to be provided by the to the educators and parents; and
11. Designation of responsible implementers across settings

Modifications to Behavioral Intervention Plans

If the IEP team determines that changes are necessary to increase program effectiveness, the teacher and behavioral intervention case manager shall conduct additional functional analysis assessments and, based on the outcomes, shall propose changes to the behavioral intervention plan. Modifications can be made as follows:

Minor modifications to the behavioral intervention plan can be made by the behavioral intervention case manager and the parent. If the case manager is unavailable, a qualified designee who meets training requirements shall participate in such modifications. Each modification or change shall be addressed in the behavioral intervention plan provided that the parent is notified of the need and is able to review the existing program evaluation data prior to implementing the modification or change. Parents shall be informed of their right to question any modifications to the plan through the IEP process.

Nothing in this section is intended to preclude the IEP team from initially developing the behavioral intervention plan in sufficient detail to include schedules for altering specified procedures, or the frequency or duration of the procedures, without the necessity for reconvening the IEP team. Where the intervention is to be used in multiple settings, such as the classroom, home and job sites, those personnel responsible for implementation in the other sites must also be notified and consulted prior to the change.

Functional Behavior Assessment (FBA)

Whenever the systemic use of behavioral intervention in response to a serious behavior problem is proposed, a Functional Behavioral Assessment (FBA) must be conducted by a District psychologist or BCBA – Board Certified Behavior Analyst. That person shall gather information from three sources:

1. direct observation
2. interviews with significant other
3. review of available data such as assessment reports prepared by other professionals and other individual records.

Prohibited Interventions

No public education agency, or nonpublic school or agency serving individuals pursuant to Education Code Section 49001 et seq., may authorize, order, consent to, or pay for any of the following interventions, or any other interventions similar to or like the following:

- Any intervention that is designed to, or likely to, cause physical pain
- Releasing noxious, toxic or otherwise unpleasant sprays, mists, or substances in proximity to the individual's face
- Any intervention which denies adequate sleep, food, water, shelter, bedding, physical comfort, or access to bathroom facilities
- Any intervention which is designed to subject, used to subject, or likely to subject the individual to verbal abuse, ridicule or humiliation, or which can be expected to cause excessive emotional trauma
- Restrictive interventions which employ a device or material or objects that simultaneously immobilize all four extremities, including the procedure known as prone containment, except that prone containment or similar techniques may be used by trained personnel as a limited emergency intervention
- Locked seclusion
- Any intervention that precludes adequate supervision of the individual
- Any intervention, which deprives the individual of one or more of his or her senses.

IEP Team Meeting

Upon completion of the Functional Behavior Assessment (FBA) and any other assessments that may have also been proposed and for which parental consent has been obtained, an IEP team shall meet (within 60 days) to address the individual's needs to develop a behavior intervention plan (BIP) if appropriate. The BIP shall become a part of the IEP and shall be written with sufficient detail so as to direct the implementation of the plan.

When a Behavioral Intervention Plan (BIP) is being developed, the IEP team shall be expanded (if necessary) to include appropriately trained BCBA and other qualified personnel knowledgeable of the student's health history and needs. Where the interventions are to be used in multiple settings, such as the classroom, home and job sites, those persons responsible for implementation at other sites must also be part of the planning.

Emergency Interventions

Emergency Interventions are temporary interventions to be used to control or contain unpredictable behaviors which pose an immediate danger of physical harm to the individual or others and which cannot be immediately prevented by a response less restrictive than the temporary application of a technique used to contain the behavior. Emergency interventions shall not be used as a substitute for the systematic behavioral intervention plan that is designed to change, replace, modify, or eliminate a targeted behavior. Whenever a behavioral emergency occurs which threatens the safety of students or staff, the following interventions may be used:

1. Attempt to verbally redirect the behavior through regulatory commands or stimulus change procedures
2. Attempt to direct the individual to remove himself/herself from the immediate environment and/or implement relaxation techniques
3. Remove all other students from the environment, if possible, to reduce the immediate threat of harm
4. Minimal physical redirection or escort of the individual to an area in which his/her behavior poses little or no threat to the safety of others
5. Self-defense strategies to ensure own physical safety, including prone containment by two or more trained personnel, if necessary.

No emergency intervention shall be employed for longer than is necessary to contain the behavior. Any situation, which requires prolonged use of an emergency intervention, shall require staff to seek the assistance of the school site administrator or law enforcement agency, as applicable to the situation. In addition to the prohibited aversive interventions, emergency interventions may not use an amount of force that exceeds that which is reasonable and necessary under the circumstances. Emergency interventions **may not** include:

1. Locked seclusion
2. Employment of a device or material or objects which simultaneously immobilize all four extremities, except that techniques such as prone containment may be used as an emergency intervention by staff trained in such procedures
3. An amount of force that exceeds that which is reasonable and necessary under the circumstances.

To prevent emergency interventions from being used in lieu of planned, systematic behavioral interventions, the parent, if appropriate, *shall be notified within one school day* whenever an emergency intervention is used or serious property damage occurs.

A Behavioral Emergency Report (BEIR) shall immediately be completed and maintained in the individual's file as well as sent to the Special Education Office. The report shall include all of the following:

- The name and age of the individual
- The setting and location of the incident
- The name of the staff or other persons involved
- A description of the incident and the emergency intervention used, and whether the individual is currently engaged in any systematic behavioral intervention plan
- Details of any injuries sustained by the individual or others, including staff, as a result of the incident.

Annual Behavioral Emergency Report

Anytime a Behavioral Emergency Report (BEIR) is written regarding an individual who *does not* have a behavioral intervention plan, the designated responsible administrator shall, **within two days**, schedule an IEP team meeting to review the emergency report, to determine the necessity for a functional analysis assessment, and to determine the necessity for an interim behavior intervention plan. The IEP team shall document the reasons for not conducting the assessment and/or not developing an interim plan.

Anytime a Behavioral Emergency Report (BEIR) is written regarding an individual *who has* a behavioral intervention plan, any incident involving a previously unseen serious behavior problem or where a previously designed intervention is not effective should be referred to the IEP team to review and determine if the incident constitutes a need to modify the plan.

Interim Alternative Educational Setting

The Special Education Director can order a special education student to an appropriate Interim Alternative Educational Setting for the same amount of time that a child without a disability would be subject to discipline, but for not more than 45 school days:

1. If the child carries a weapon to school or at a school function under the jurisdiction of a state or local educational agency.
1. Or if the child knowingly possesses or uses illegal drugs or sells or solicits the sale of a controlled substance while at school or at a school function under the jurisdiction of a state or local educational agency.
1. Or if the child inflicts serious bodily injury to another person at school, on school premises or at a school function. Serious bodily injury requires a showing of substantial risk of death, extreme physical pain, protracted and obvious disfigurement, or protracted loss or impairment of function of a bodily member, organ or mental faculty.

The LEA placement/service determination is an IEP team decision. The IAES must enable the student to continue to participate in the general curriculum, although in another setting. The IAES must provide services and modifications described in the current IEP which will enable the student to meet IEP goals as well as provide services and modifications to address the behavior so that it does not reoccur.

When a parent or district requests a hearing regarding the interim alternative educational setting or a manifestation determination, the child shall remain in the interim alternative educational setting pending the decision of the hearing officer, or until the expiration of the 45 school day time period, whichever occurs first, unless the parent and the state or local agency agree otherwise.

SECTION 7:

Appendices

DRAFT

Process for Referring Students for Initial SDC Placement or Placement Change

If it is anticipated that a student may need a placement change to an SDC program, the case manager will initiate this referral process well in advance of any previously scheduled IEP meetings. In the case of initial referrals, the school psychologist may initiate this process.

1. The case manager completes the SDC Referral Form and sends it to their assigned Program Specialist.

1. The Program Specialist will review the referral and contact the case manager or School Psychologist within 10 working days to discuss the referral.

1. If following review of all relevant information the Program Specialist believes the referral is appropriate the team will move forward with an IEP team meeting for IEP team discussion and decision regarding placement.

1. The case manager will collaborate with the Program Specialist to schedule the IEP team meeting. The Program Specialist is a required member at any IEP team meeting in which potential SDC placement will be discussed.

This procedure applies to any changes in placement on the continuum in either direction. Examples: RS to SDC M/M or SDC M/S, SDC M/M to SDC M/S, SDC M/M to SDC Autism, SDC Autism to SDC M/M, SDC Autism to SDC M/S, SDC Autism to SDC M/M, or SDC Autism to General Education w/RS etc.

Referral Form for SDC Placement

Student: _____ D.O.B. _____

School: _____ Case Manager: _____

Referral for: ☐ SDC-LH ☐ SDC-SH ☐ SDC-Autism

Current Eligibility: Primary: _____ Secondary: _____

Current Grade: _____ Current Teacher: _____

Attach student's most recent: psych report, academic testing scores, information/eligibility page and other DIS reports as appropriate. Send the packet to the program specialist assigned to your site for review.

Special Education Support Services

Service	Minutes Per Session	X's per Week	Individual	Group	Push-in
Resource Reading:					
Resource Written Lang:					
Resource Math:					
DIS:					
Speech/Lang:					
OT/PT:					
Push-In:					

1. What is the student's current placement? _____
2. If the student has been receiving special education services, how long have they been in their current placement? _____
3. What percentage of the day is the student receiving specialized academic instruction? _____

4. If the student is receiving special education services, please list all direct services the student receives _____

Has this placement option been considered in a previous IEP with parents of students? Yes/No
Please provide the following information from the most recent assessment:

Date of last full psychoeducational assessment _____

ABILITY

Name of test: _____ Test Date: _____

Full Scale IQ _____ Verbal IQ _____ Nonverbal IQ _____

ACADEMIC

Name of Test: _____ Test Date: _____

Basic Reading Skills _____

Reading Comp. _____

Reading Fluency _____

Math Calculation _____

Math Reasoning _____

Written Expression _____

Listening Comp. _____

Oral Expression _____

1. How many days of absence has the student had? This year _____ Last year _____

2. How many days of suspension has the student had? This year _____ Last year _____

3. Does the student have a BIP? _____

4. Has the BIP been implemented with full fidelity? _____

5. Is the student EL? _____

6. What accommodations/modifications/supplementary aids and services are being provided to the student?

7. Has the student ever been retained?

Yes _____ No _____ If so, in which grade? _____

CASEMIS ERROR CHECKLIST

Student: _____ IEP Date: _____ EL: Y/N Grade _____

Information/Eligibility

1. Purpose of meeting marked
2. Next Annual IEP one yr. from previous annual
3. Last Eval and Next Eval are 3 years apart
4. SSID #
5. Demographic info is complete & updated
6. Ethnicity/Race
7. Disability(ies) and description of how student's disability affects involvement is given

Present Levels

8. Parent concerns documented
9. Most recent SBAC/CAA, ELPAC
10. Standardized scores (i.e. WJIV) included only in "other Assessment Data" section
11. Each area is addressed (what they CAN do)
12. List all areas of need _____, _____, _____

Special Factors

13. Documentation that each factor was considered
14. English Learner needs addressed, if EL
15. Behavior needs addressed, if appropriate

Statewide Assessments

16. Grade appropriate assessments are addressed
17. Accommodations/Designated Supports specified for each test, as appropriate
18. Alternate Assessment criteria, if appropriate
19. ELPAC for EL students, if EL

Goals

20. Goals written for each area of need identified on special factors and present levels pages
21. Goals and objectives are measurable with evaluation criteria
22. Each goal has a measurable baseline
23. Each goal specifies a person responsible
24. Grade level standard or other area of need related to disability
25. If student is an EL, MUST include linguistically appropriate goals

Services

26. Service options considered given
27. Describe any harmful effect or services needed
28. Add supplemental aides/services
29. Each special ed service is listed
30. Each service has a frequency
31. Each service has a start date and end date
32. Each service has a location
33. Transportation marked, if yes in notes
34. ESY eligibility specified
35. ESY determination form completed

36. If eligible for ESY, services listed

Educational Setting

37. Federal Setting
38. Rationale stated for services not provided at home school
39. Justification statement for % of time outside regular class
40. When applicable, transition activities specified
41. When applicable, graduation plan specified

Parent Consent

42. Participants sign in attendance
43. Parent initials consent, signs and dates
44. Parent involvement initialed
45. Parent initials s/he received copies of all documents & SEIS Medi-Cal (orange)

(***End of SEIS*** Form order may vary)

Meeting Notice

46. Reason(s) matches IEP document
47. Date of IEP meeting matches

Other Attachments

48. IEP Team meeting notes
49. ESY eligibility worksheet (at every annual)
50. Assessment reports
51. Medi-Cal (annually)
52. Parent Consent (signed copy)
53. Eligibility forms (Initials/Tri)
54. Excusal form, with signatures (if used)

Behavior Analyst Service Request Checklist

DATE:

- ☐ Identify interfering behaviors of concern. Contact an administrator for support and help in identifying behaviors or supports.
- ☐ Use the **Levelized Behavior Support Flowchart** to determine the initial level of support that is needed (for example, level 1 attempt several strategies and collect data, level 3 contact an administrator immediately).
- ☐ Collect data on behavior and selected intervention(s) (a sample sheet is provided as part of the checklist) for three weeks.
- ☐ After 3 weeks of implementing selected interventions and collecting data, determine if the interventions are successful (behavior is decreasing) or if more support is needed (behavior is increasing). Move along the **Levelized Behavior Support Flowchart** to increase support as needed.
- ☐ For behavior that is a level 3 behavior due to the intensity of the behavior or due to increasing in frequency or duration/lasting persisted over time, please contact an administrator and include the following:
 - Complete the Behavior Support Referral Form provided (outlines target behaviors, frequency/duration/intensity; strategies/interventions implemented)
 - Attach data sheets completed, should be at least 3 weeks of data unless a level 3 behavior (sample data sheet attached)
 - Notify Program Specialist AND Principal of the need for Behavior Supports via email and cc the Behavior Analyst (ALL requests for behavior supports must include behavior data and rubric to be considered for consultation supports)

BEHAVIOR ANALYST SERVICE REQUEST

STUDENT NAME: _____ **DATE:** _____

GRADE: _____ **AGE:** _____ **CASE MANAGER:** _____

SCHOOL: _____ **TEACHER:** _____ **RM:** _____

CURRENT PLACEMENT: ☐ General Education Classroom ☐ LH ☐ SH

CURRENT SERVICES: ☐ Inclusion ☐ Speech ☐ OT ☐ Counseling ☐ IRMS ☐ 1:1 Aide

SUBMIT FORM TO PROGRAM SPECIALIST FOR APPROVAL

PLEASE LIST AND DEFINE THE BEHAVIOR(S) OF CONCERN

HOW LONG HAS THE BEHAVIOR(S) BEEN OCCURRING

FREQUENCY OR DURATION OF THE BEHAVIOR(S)

Please attach Aries printout of assertive discipline if applicable

WHAT ARE THE TRIGGERS FOR THE BEHAVIOR(S)

LIST THE MOST FREQUENT TIMES AND LOCATIONS THE BEHAVIOR(S) OCCUR

WHY DO YOU THINK THE STUDENT ENGAGES IN THE PROBLEM BEHAVIOR(S)

--

LIST ANY INTERVENTIONS OR SUPPORTS THAT HAVE BEEN UTILIZED TO ADDRESS THE BEHAVIOR(S)

INTERVENTIONS/SUPPORTS	LEGNTH OF TIME UTILIZED

BEHAVIOR CONSULT INFORMATION

Has the student had a Behavior Intervention Plan in the past? ☐ YES ☐ NO If yes, When: _____

Has the student received Behavior Analyst Consultation in the past? ☐ YES ☐ NO If yes, When: _____

ADDITIONAL INFORMATION THAT MAY BE HELPFUL TO THE BCBA TEAM

Consider all possible variables that may be contributing to the behavior(s) (e.g., home life, current medications, family history, etc.)

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For Admin Use Only

APPROVED BY: _____ BCBA ASSIGNED: _____

DRAFT