

WCSD

Walthall County School District
Special Services

Standard Operating Procedures Manual:

The Referral, Evaluation, Placement, and
IEP Development of Students with
Disabilities

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Limitations on Use of This Manual and Disclaimer

The purpose of this Standard Operating Procedures Manual is to provide support and guidance to the management and staff of the Waltham County School District Special Services Department. The contents of this manual are based State Board Rule 7219, including the update dated September 15, 2013 and March 23, 2015. Nothing in this manual is intended to create, nor does it create any enforceable rights, remedies, entitlements, or obligations. Original SOPM approved 07/2017; first update 07/2018; second update 11/2019

Free Appropriate Education

Walthall County School District (WCSD) is committed to providing a Free Appropriate Education (FAPE) to children with disabilities. FAPE means that children identified as children with a disability are provided special education and related services at the expense of the district and that those services meet the standards of the state, include children ages 3-21, and are provided in conformity with the IEP. Children with disabilities are provided modifications, accommodations, and support services as determined by each individual IEP committee. WCSD provides services that comply with IDEA, address each child's unique needs, and are reviewed at least annually. These programs are coordinated to ensure that each child is able to make adequate progress in the educational setting, thereby conferring educational benefit upon the child with a disability. In addition, WCSD is committed to educating children with disabilities in the Least Restrictive Environment (LRE) appropriate for them. Removal occurs only when education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. WCSD provides a full continuum of services ranging from general education classrooms with support to specialized classes, special schools, and home/hospital.

Child Find Obligations

The Individuals with Disabilities Education Act (IDEA) requires Walthall County School District (WCSD) to identify, locate, and evaluate all children from birth to age 21 with disabilities and those suspected of having a disability residing in Walthall County. Children who are homeless, wards of the State, or private school students not attending a Walthall County school must be considered in Child Find. Children suspected of having a disability and in need of Special Education must be considered even if they are advancing grade to grade. When a student is suspected of having a disability, a verbal or written referral for evaluation must be made. All verbal requests must be documented and submitted to the Special Services Office within twenty-four (24) hours. An initial referral for evaluation may be made by the following individuals:

- Parent or guardian
- Walthall County School District or other public agency
- Teacher Support Team

Following a request, the Multidisciplinary Evaluation Team (MET) must meet within fourteen (14) calendar days. Parents must receive Meeting Invitation (MI) seven (7) calendar days prior to the MET meeting. The MET will consider the request and determine if a comprehensive evaluation is necessary. Following the meeting, Prior Written Notice (PWN) for Initial Evaluation or PWN for Refusal to Evaluate must be given to the parent within seven (7) calendar days. In calculating timelines, day one (1) is the day the parent, Walthall County School District, or teacher support team (TST) makes the request. If the parents refuse to consent to the evaluation or fail to respond to a request to evaluate a child, the school may use hearing procedures to obtain permission to conduct the evaluation. The school district is not required to request a hearing. If the school refuses a request to conduct an evaluation, the parents may also challenge the refusal through the IDEA hearing procedures.

The Child Find program may include (a) awareness programs, (b) mailings to parents, (c) radio advertisements, and (d) coordinated activities with local service agencies, such as hospitals and/or clinics to identify children and youth with disabilities.

Procedural Safeguards

Procedural Safeguards refer to the formal protections, or safeguards, for the rights of children with disabilities and their parents according to the Individuals with Disabilities Education Act (IDEA), Federal regulations, and State laws and policies. According to the U.S. Supreme Court's interpretation of IDEA, the core principle of the IDEA is the cooperative process between parents and educational agencies and the importance of parental involvement in all decisions made for children with disabilities. This includes all decisions regarding the identification, evaluation, placement, and provision of special education and related services. In addition, IDEA upholds a parent's right to disagree with decisions and provides multiple avenues to resolve those disputes. Further protections address privacy of and the limited access to a child's educational records.

The Walthall County School District will ensure a copy of the *Procedural Safeguards Notice* is provided to each parent of a child with a disability at least once a year and in the following specific situations:

- After an initial request for an evaluation is sent to the Multidisciplinary Evaluation Team (MET)
- After a request for a reevaluation;
- After the initial meeting of the Individualized Education Program (IEP) Committee;
- Upon the receipt of the first formal State or due process complaint in a school year;
- Upon a change of placement due to a disciplinary action; or
- After a request for a Procedural Safeguards Notice by the parent.

Invitation to Meetings

Parents have the right to participate in all meetings where decisions are made for their child including any decision whether or not to conduct an evaluation or reevaluation, the determination of eligibility status and of the disability category, and the development and revision of the child's Individualized Education Program (IEP). Parents are members of both the Multidisciplinary Evaluation Team (MET) and the IEP Committee and must be invited to participate in all MET or IEP Committee meetings. When calling an IEP Committee meeting for the development or revision of the child's IEP, the parent must be given a *Notice of Invitation to Committee Meeting* that includes:

- A list of who will be in attendance by name and position;
- A statement that the parent or public agency may invite other individuals who have knowledge or special expertise regarding the child; and
- The time, location, and a description of the purpose of the meeting.

Prior Written Notice

A *Prior Written Notice* (PWN) must be provided to a parent, within a reasonable time, prior to Walthall County School District's proposal or refusal to initiate or change the identification, evaluation, or educational placement of a child or to initiate or change the provision of services to provide a FAPE to a child. WCSD will ensure that the PWN is provided to the parent at least seven (7) calendar days before implementing any proposed action, unless the parent waives the timeline. The content of *Prior Written*

Notice must provide the parent with sufficient information so s/he is fully able to understand WCSD's proposed or refused action in order to make an informed decision.

The PWN must include:

- A description of the action proposed or refused by WCSD;
- An explanation of why WCSD proposes or refuses to take action;
- A description of each evaluation procedure, assessment, record, or report the WCSD used as a basis for the proposed or refused action;
- A statement that the parent of a child with a disability has protections described in the *Procedural Safeguards Notice* provided, if inclusion is required, or the method for receiving a copy of the Procedural Safeguards Notice;
- Sources for the parent to contact to obtain assistance in understanding the provisions of IDEA and his/her rights outlined in the Procedural Safeguards;
- A description of other options that the IEP Committee considered and the reasons why those options were rejected;
- A description of any other factors, which are relevant to the agency's proposal or refusal.

Walthall County School District is required to provide a *Prior Written Notice* to a parent prior to their proposal or refusal to initiate or change the identification, evaluation, or educational placement of a child or to initiate or change the provision of services to provide a FAPE to a child. WCSD must ensure that the PWN is provided to the parent no less than seven (7) calendar days prior to the proposed action unless the parent waives the timeline. PWN is required under the following conditions:

- If the initial MET determines that an evaluation is warranted (i.e., the MET does suspect the child has a disability) or determines that an evaluation is not warranted (i.e., the MET does not suspect the child has a disability);
- If WCSD refuses to provide an Independent Educational Evaluation (IEE) at public expense and initiates a due process hearing;
- After the IEP Committee has developed or modified an IEP;
- If the IEP Committee refuses to convene an IEP Committee meeting at the request of a parent;
- If the IEP Committee proposes to initiate or change the identification, evaluation, or educational placement of a child or refuses a parent's request to initiate or change the identification, evaluation, or educational placement of a child;
- If the IEP Committee proposes to initiate or change the provision of services to provide a FAPE to a child or refuses a parent's request to initiate or change the provision of services to provide a FAPE to a child;
- If WCSD has removed the child with a disability that results in a change in placement (i.e., for more than ten (10) days, a series of removals that constitute a pattern, or a removal to an interim alternate educational setting (IAES) for more than forty-five (45) school days) due to discipline procedures;
- If WCSD intends to stop the provision of special education services due to ineligibility based on the results of a comprehensive reevaluation, due to ineligibility due to graduation with a standard high school diploma, or after receiving the parent's written revocation of consent for special education and related services.

Consent

Parental consent means that a parent has been fully informed in his or her native language of all information relevant to the activity for which consent is being sought. A copy of Procedural Safeguards, which outline a parent's rights and obligations under IDEA and State Regulations, must be provided as outlined on p.4.

For initial evaluations only, if the child is a ward of the state and is not residing with the parent, the school is not required to obtain informed consent from the parent for an initial evaluation to determine whether the child is a child with a disability. This applies if the WCSD is unable to discover the whereabouts of the parent or the rights of the parent have been terminated. Additionally, if the parent does not give consent for initial evaluation or the parent fails to respond to request consent, WCSD may, but is not required, to pursue the initial evaluation by utilizing the procedural safeguards in Subpart E of IDEA regulations, if appropriate.

WCSD is responsible for making Free Appropriate Public Education (FAPE) available to a child with a disability and must obtain informed consent from the parent of the child before the initial provision of special education and related services are provided. Reasonable efforts must be made to obtain consent from the parent. If the parent of a child fails to respond to a request for, or refuses to consent to, the initial provision of special education and related services, WCSD is not required to convene an Individualized Education Plan (IEP) committee meeting or develop an IEP for the child. If, at any time subsequent to the initial provision of special education and related services, the parent revokes consent in writing for the continued provision of special education services, WCSD may not continue to provide special education services to the child. WCSD must give written notice before ending special education and related services. WCSD will not be considered in violation of FAPE because of failure to provide the child with further special education and related services and is not required to convene an IEP meeting or develop an IEP. Additionally, WCSD may not use the procedures as outlined in subpart E of IDEA to obtain agreement or a ruling that special education services be provided.

Eligibility Determination Guidelines

Walthall County School District must conduct a full and individual evaluation before the initial provision of special education and related services can be provided to a child with a disability under IDEA regulations. WCSD will not limit the number of requests for initial evaluation. Following parental consent, the initial evaluation must be conducted within sixty (60) calendar days. Within fourteen (14) calendar days of completion of the evaluation, the MET will meet to determine whether the student is a student with a disability. Parents will be provided a copy of the Assessment Team Report (ATR) seven (7) days before the MET meeting with the invitation to the committee meeting.

Eligibility determinations must adhere to the following guidelines:

- A. A comprehensive evaluation to determine special education eligibility must:
 - 1. Assure that lack of appropriate instruction in math or reading is not a determining factor
 - 2. Assure that limited English proficiency (LEP) or social or cultural differences are not the determining factors
 - 3. Indicate the child needs special education and related services
 - 4. Identify all educational needs to be addressed in development of the IEP, regardless of whether those needs are typically linked to the disability category

5. Consistently support the presence of a disability. If inconsistencies occur but the team agrees that the preponderance of the data supports an eligibility, the inconsistencies must be documented.
- B. Personnel must consider a variety of assessment tools and strategies when gathering information about the student which must include, but not be limited to:
1. The Teacher Narrative and/or Developmental History
 2. Documentation about the student's functioning in the home, classroom, and/or in an early childhood setting through interview, observation, assessment, or other means
 3. Information from the student's cumulative record, including statewide testing
 4. Information about the student's physical condition, including fine and gross motor skills, general physical condition, hearing, vision, and orofacial examination if necessary
 5. Information about the student's social, behavioral, emotional, and adaptive functioning
 6. Information about pre-academic and/or academic performance
 7. Information about how the student communicates
 8. Indicators of cognitive abilities
 9. Evaluations and other information provided by the parent
 10. Evidence that the child has received appropriate instruction in reading and math (developmental and preschool experiences for children under the age of six)
 11. Information about the impact of social and cultural background and LEP on educational performance
 12. For children age fourteen (14) and above, appropriate and ongoing assessment of the student's needs, preferences, and interests related to the demands of current and future working, educational, living, personal and social environments
 13. For reevaluations, information from IEPs.

It is the responsibility of the MET to determine appropriate ways to measure each area and which instruments to use. These decisions should be made carefully based on the needs of the student. If significant emotional and/or behavioral issues are evaluated, a licensed School Psychologist, a Board-licensed Psychologist, or a Psychiatrist must be on the MET.

C. Historical data can be used within the timelines indicated as follows:

1. One (1) year old:
 - a. Intelligence measures
 - b. Hearing screening and follow-up evaluations
 - c. Vision screenings and follow-up evaluations
 - d. Physical evaluations
2. Three (3) months old:
 - a. Updated Developmental History
 - b. Developmental Instruments
3. Six (6) months old:
 - a. Teacher Narrative
 - b. Achievement measures
 - c. Social, behavioral, adaptive, and emotional measures
 - d. Language/Speech Assessments
 - e. Motor Assessments
 - f. Curriculum-based assessments

D. The MET members will submit individual reports and a separate Eligibility Determination Report (EDR) will be used to document decisions made in the eligibility meeting.

- E. The EDR must indicate the conclusion of the team regarding the eligibility category for which the criteria are met or a statement indicating that the student does not meet the criteria. Each team member must verify, in writing, whether or not the decision reflects the member's conclusion. If it does not, the MET member must submit a separate statement presenting the member's conclusion.
- F. The evaluation report(s) must include the following information:
 - 1. Date(s) of assessment(s);
 - 2. Name, title, and qualifications of examiner(s), informants, and/or observers;
 - 3. Testing conditions;
 - 4. Behaviors noted during testing and observations;
 - 5. Results of assessments;
 - 6. Interpretations of assessments;
 - 7. Explanations of any deviations from standardized testing procedures; and
 - 8. Justifications for use of instruments that are not age appropriate.
- G. Diagnostic or prescriptive information from a health care professional or psychologist must be considered by the MET when making an eligibility decision. If a diagnosis, evaluation, or statement is required for a special education category; the requirement will be listed as part of the eligibility criteria.
- H. Language needs are inherent for the following disability categories; therefore, a secondary eligibility is not required. It is a decision of the IEP committee as to whether a Speech/ Language therapist (SLP) is an appropriate provider of language as a related service.
 - 1. Hearing Impairment,
 - 2. Autism,
 - 3. Traumatic Brain Injury,
 - 4. Specific Learning Disability (Oral Expression and Listening Comprehension)
or
 - 5. Developmentally Delayed when Communication is one of the areas of delay.
- I. Adverse educational impact must be clearly stated in the ATR for all eligibility determinations.

Procedures for Initial Comprehensive Evaluations

In-School Initial Evaluation

- A. Regular education completes the TST process and submits the following information:
 - 1. Tier documentation
 - 2. Progress monitoring
 - 3. Intervention documentation and teacher narrative
 - 4. Hearing/Vision
 - 5. Cumulative folder information
 - 6. Medical information if applicable. In the event of an obvious disability, submit information without intervention
- B. Internal Review Team (IRT)
 - 1. Certifies that data supports a possible disability
 - 2. Confirms that all forms are completed correctly
 - 3. Returns incomplete/incorrect forms to TST for correction

4. Reviews returned information
5. Schedules MET meeting
- C. MET
 1. Sends notice within seven (7) calendar days of receiving referral
 2. Holds meeting with parent and appropriate personnel
 3. Obtains consent from parent if assessment is recommended
 4. Explains Procedural Safeguards and give parent/guardian a copy
 5. In case of parental/guardian refusal, obtain signature on required form and send notice
- D. Assessment Team
 1. Schedule appropriate assessment(s)
 2. Monitor progress/timelines at weekly staff meeting
 3. Conduct assessment and write reports
 4. Submit to Director for report completion verification
- E. MET
 1. Send notice for eligibility meeting and a copy of the assessment report within at least 7 days before the meeting, documenting ATR enclosure on the NOM.
 2. Conduct eligibility meeting
 3. Submit documentation to Director or Case Manager for IEP scheduling if appropriate

Out-of-School Initial Evaluation (Preschool)

- A. Speech/Language Pathologist
 1. Schedule screening based on Cooperative Agreements
 2. Document and track First Step referrals, scheduling transition meetings at age two years, six months
 3. Document and track parent referrals
 4. Schedule MET meeting within seven (7) days of referrals
- B. Preschool MET
 1. Discuss Procedural Safeguards and give parent/guardian a copy
 2. Obtain parent/guardian consent and give Notice for Initial Evaluation
 3. Complete Developmental History with parent/guardian
 4. In case of parental/guardian refusal, obtain signature on required form and send notice
- C. Assessment Team
 1. Conduct screening/assessment (Hearing/Vision, Development, and Speech)
 2. Obtain information from outside sources if applicable
 3. Monitor progress/timelines at weekly staff meeting
 4. Conduct assessment and write reports
- D. Preschool MET
 1. Send notice for eligibility meeting and a copy of the assessment report within at least 7 days before the meeting, documenting ATR enclosure on the NOM.
 2. Conduct eligibility
 3. Give parent/guardian option to hold IEP meeting following eligibility meeting
 4. Conduct IEP meeting or return to Case Manager/Preschool Coordinator to schedule IEP

Procedures for Reevaluations

WCSD will ensure that all children with disabilities are reevaluated periodically to determine whether the child continues to have a disability that requires special education and related services. Reevaluations must

occur no less than once every three (3) years but may not occur more than once in a twelve (12) month period unless the parent and WCSD agree that a reevaluation is needed.

A reevaluation may consist of (a) a review of existing and ongoing progress monitoring data, with or without a limited collection of new data, or (b) a comprehensive reevaluation. In many cases, the more limited reevaluation is appropriate, such as when the IEP Committee establishes the child's continuing eligibility under the same disability category with changes only to some services and supports. However, when major changes are being considered, a child's parent or the teacher has requested a comprehensive reevaluation, or when the IEP Committee members disagree on a child's eligibility status or disability category, a comprehensive reevaluation is necessary. When considering a dismissal from any related service (i.e. speech, OT, PT), a reevaluation should be conducted.

The reevaluation process should be informed by records of services provided, ongoing progress monitoring data, and progress reports on measurable annual goals and short-term instructional objectives/benchmarks. These existing data sources should enable most reevaluations to occur within a relatively short period of time. In cases where a comprehensive reevaluation is required, the reevaluation may take more time.

Review of Existing Data for Reevaluation

The child's IEP Committee, of which the parent and other qualified professionals are members, must review existing information, including any evaluation data, on a child including:

- Evaluations and information provided by the parent;
- Current curriculum-based assessments, progress monitoring data, and other ongoing observations;
- Information from existing observations by teachers and related service providers; and/or
- Information contained in the current IEP, including progress reports on goals.

The review of data may be conducted by the IEP Committee with or without a meeting; however, each IEP Committee member, including the parent, must be given the opportunity to review all existing data and information to assist him/her in determining if additional data are necessary to establish continued eligibility and determine appropriate service provision. If the IEP Committee unanimously decides no additional data are necessary to determine (a) the child continues to be a child with a disability and (b) the child's special education or related service needs, the IEP Committee must document this decision in writing.

Determining if Additional Data are Necessary for Reevaluation

If the IEP Committee as a whole or if any IEP Committee members determine additional data are needed, the IEP Committee, including the parent, must identify the data needed to determine:

- Whether the child continues to have a disability;
- Whether the child continues to need special education and related services;
- The child's present levels of academic achievement and functional performance;
- The child's educational needs; and
- Any additions or modifications to the child's special education and related services necessary for the child to meet the measurable annual goals addressed in the IEP and/or to participate in the general curriculum or developmentally-appropriate activities, as appropriate for the child.

Even in situations where members of the IEP Committee disagree with the parent over the need for conducting additional assessments or conducting a comprehensive reevaluation, the parent has the right to

request assessments or a comprehensive reevaluation to determine eligibility under IDEA and their child's current educational needs. WCSD must inform the parent of this right.

Parental Consent for Reevaluation

Parental consent is recommended but not required prior to conducting a reevaluation using existing data. When additional data are needed to substantiate continued eligibility and/or current educational needs, the IEP Committee will provide the parent *Prior Written Notice* of WCSD's intention to conduct a reevaluation and obtain *Informed Parental Consent* prior to conducting any new individual assessments (e.g., interviews, observations, and formal and informal tests). If the parent fails to respond to the request for consent, WCSD may proceed with new individual assessments for reevaluation without written parental consent, if it has made reasonable attempts to obtain consent from the parent. If the parent refuses to consent for additional data collection for reevaluation, WCSD may not conduct new individual assessments for the reevaluation. However, WCSD may continue to collect ongoing progress monitoring data used to determine sufficient progress on annual measurable goals and short-term instructional objectives or benchmarks, and the IEP Committee may use these data to determine if the child continues to be eligible for special education and the child's educational needs. In addition, WCSD may use procedures outlined under procedural safeguards to conduct a reevaluation.

Assessment for Reevaluation

The IEP Committee may conduct assessments as part of the reevaluation when they determine the need for additional information to answer any of the following questions:

- What is the child's present level of academic achievement and functional performance?
- What are the child's current educational needs?
- What special education and related services does the child need?
- What, if any, additions or modifications to the special education and related services are needed to enable the child to meet the measurable annual goals addressed in the IEP and/or to participate, as appropriate, in the general curriculum or, for the preschool child, to participate in age-appropriate activities?

Comprehensive Reevaluation

If the IEP Committee is considering a change in the child's disability category, a comprehensive evaluation of all areas of development that meets the requirements of the *Procedures for Initial Comprehensive Evaluation* must be conducted. A comprehensive reevaluation process should be completed within a reasonable period of time. It is recommended that a comprehensive reevaluation be completed at least every six (6) years.

Reevaluation Report

At the conclusion of the reevaluation, the IEP Committee must document the results in a written reevaluation report(s). The IEP Committee may compile all reevaluation information into a single comprehensive report or may allow each examiner to submit an individual report. The reevaluation report(s)

must meet the criteria described in *Evaluation Reports* (p. 30). Public agencies are recommended to provide parents a copy of all reevaluation reports at least seven (7) calendar days prior to the meeting to determine or reestablish eligibility unless the parent has expressed their preference to receive the reevaluation report at the meeting.

Eligibility Determination Meeting

The IEP Committee, which includes the parent, must meet to review the reevaluation report(s) and to draft an eligibility determination report. The parent must be invited in writing to attend the eligibility determination meeting.

Eligibility Determination Report

During the eligibility determination meeting, the IEP Committee must document the decision in an eligibility determination report either to continue or to change the child's eligibility status and/or disability category:

- If the results of the reevaluation support the child's current eligibility status and disability category, the IEP Committee will document the continued eligibility status and disability category.
- If the results of the reevaluation support the child's eligibility status but no longer reflect the child's disability category, the IEP Committee will document the change in disability category as appropriate and provide the parent *Prior Written Notice* of this change. WCSD will document the parent's receipt of the *Prior Written Notice*.
- If the results of the reevaluation no longer support the child's eligibility status, the IEP Committee will document this decision and provide the parent *Prior Written Notice* of the intent to exit the child from special education services.

Individualized Education Program (IEP)

If the child continues to be eligible for special education services, the IEP Committee will revise the child's IEP to reflect any necessary changes in educational programming and provide the parent *Prior Written Notice* for any revisions in the IEP. WCSD will document the parent's receipt of this notice. If the parent attends the IEP Committee meeting, WCSD may provide any required *Prior Written Notice* to the parent at the meeting.

Removal of Students from Special Education Programs (reference 300.305 (a)(e))

If the child is determined to be ineligible for special education services based on the results of a comprehensive reevaluation, the IEP Committee must provide the parents *Prior Written Notice* explaining their intention to exit the child from special education services at least seven (7) calendar days prior to terminating services. The PWN must contain the basis for the decision, an explanation of the parent's right to obtain an Independent Educational Evaluation (IEE), and the parent's right to a due process hearing. WCSD will document the parent's receipt of this notice.

Reevaluations by a review of existing and ongoing progress monitoring data, will be completed as follows:

- A. Teacher
 1. Code the student's IEP goal pages for mastery based on current progress monitoring data
 2. Complete the last two pages of the Teacher Narrative
 3. Obtain a copy of the following:
 - a. Most current report card and/or progress report
 - b. Copy of most current school wide progress monitoring
 - c. Copy of any discipline referrals and behavior plan and/or FBA (if applicable)
 - d. Copy of any documentation pertinent to determination of continued eligibility or need for additional testing
- B. IEP Committee by phone or in person
 1. Determine if the student continues to have the current eligibility and if so,
 - a. Get signatures, or document names if done by phone, on Reevaluation Documentation form
 - b. Document new eligibility date on IEP
 - c. Submit entire packet to Special Services Office
 2. Determine if additional assessment is needed and if so, submit packet to Assessment Team to determine appropriate assessment
 - a. Assessment Team
 - Determine and schedule appropriate assessment
 - Conduct assessment and write reports
 - b. MET
 - Send notice for eligibility meeting and a copy of the assessment report within at least 7 days before the meeting, documenting ATR enclosure on the NOM.
 - Conduct eligibility meeting
 - Return packet to teacher or have teacher conduct the second Reevaluation Meeting
 - c. Teacher (if second meeting not held following MET)
 - Conduct second Reevaluation Meeting
 - Document new eligibility date on IEP
 - Submit entire packet to Special Services Office
- C. Case Manager
 1. Verify Reevaluation packet, Reevaluation Report, and Summary of Eligibility
 - a. If correct, send a copy of Reevaluation Report and Summary of Eligibility to teacher to file with IEP, give a copy to Special Services secretary to update MSIS, and file a copy for documentation of Child Find
 - b. If incorrect, return to teacher for corrections
 2. File original Reevaluation paperwork in the ATR in the Special Services Office

Disability Categories and Procedures for Assessment

Autism (AU)

Autism (Autism Spectrum Disorder) refers to a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three (3), that adversely affects a child's educational performance. Characteristics often associated with Autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual response to sensory experiences. It is not necessary for the student to exhibit all of these additional characteristics to meet the criteria.

Included in the Autism category are the Pervasive Developmental Disorders, including Autistic Disorder, Asperger Disorder, Pervasive Developmental Disorder – Not Otherwise Specified, Rhett’s Disorder, and Childhood Disintegrative Disorder. Autism does not apply if a child’s educational performance is adversely affected primarily because the child has an emotional disability. A child who manifests the characteristics of Autism after age three (3) could be identified as having Autism if the definition is satisfied and data consistently support an eligibility ruling of Autism.

Evaluation Requirements

Personnel must gather, document and carefully consider:

- A. Results of instruments, observations and/or other data which address:
 - 1. Receptive and expressive language skills, including language semantics and pragmatics; prosody (linguistics including intonation, rhythm and focus in speech); and the need for assisted communication
 - 2. Social interactions
 - 3. Responses to sensory experiences
 - 4. Engagement in repetitive activities and stereotyped movements
 - 5. Resistance to environmental change or change in daily routines.
- B. A developmental history and/or other documentation which serves to determine the age of onset of autistic characteristic
- C. A statement by a qualified professional supporting the multidisciplinary evaluation teams’ conclusion that the student meets the eligibility criteria for Autism as defined by federal regulations and State policy. A qualified professional is defined as one of the following:
 - 1. School psychologist currently licensed by MDE,
 - 2. Psychometrist currently licensed by MDE,
 - 3. Board-licensed psychologist,
 - 4. Nurse Practitioner, or
 - 5. Physician

Deaf – Blind (DB)

Deaf-Blindness means concomitant hearing and visual impairments that adversely affect a child’s education performance, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness.

Evaluation Requirements

When the evaluation team is considering eligibility under the Deaf-Blind category:

- A. A statement that the child cannot properly function in a special education program designed solely for children with hearing impairments or visual impairments must be included in the comprehensive evaluation and/or eligibility determination report, and
- B. Procedures for assessing both Hearing Impairment and Visual Impairment must be followed.

Developmentally Delayed (DD)

A child in the age range of birth through nine (9) who is experiencing significant delays in two or more of the five developmental areas (cognitive, fine/gross motor, social/emotional/behavioral, and adaptive behavior) meets the eligibility criteria for Developmentally Delayed if by reason of the developmental delays, he/she needs special education and related services.

- A. Due to a disability that adversely affects a child's pre-academic or educational performance
- B. For preschool age children, the results of the evaluation must indicate an adverse impact of the child's ability to participate in developmentally appropriate activities.
- C. The criteria for DD could also be met if the child has a diagnosed disorder of known etiology which affects development in a negative fashion and has a high probability of resulting in a developmental delay. For diagnosed disorders, a diagnosis from a physician and research that supports the predicted developmental delays is required.

Evaluation Requirements

Developmentally Delayed is for non-categorical identification when the child has a disability and needs special education and related services, but does not clearly fit one to the eleven (11) eligibility categories not including language/speech. If the eligibility criteria are clearly met for one or more of the other (11) eligibility categories (AU, DB, EmD, HI, ID, MD, OI, OHI, SLD, TBI, VI), DD should not be used. Mississippi has determined DD applies to the age range birth through nine (9) years. A new eligibility determination must occur before the child's tenth (10th) birthday. The DD eligibility ruling cannot be maintained beyond the child's tenth (10th) birthday.

The following requirements apply to the DD category:

- A. Standard scores must be used when the instrument(s) yields standard scores.
- B. A significant delay is defined as 1.5 standard deviations below the mean of the test or subtest when the instrument yields standard scores.
- C. If the instrument yields only age equivalents, significant delay is defined as a developmental age 25% below the child's chronological age or corrected age on the test or subtest.
- D. Follow guidelines in the test manual for calculating corrected age for children who were born pre-term. If the manual does not address corrected age calculation, the following guidelines should be considered:
 - 1. Calculate corrected age for children born prior to thirty-eight (38) weeks gestation, and
 - 2. Calculate corrected age up to twenty-four (24) months chronological age

A variety of instruments should be considered and selected to yield information about the full range of the child's functioning in all five (5) developmental areas. When informants are used to gather information, they must have sufficient knowledge of the child's functioning in the areas for which the informant provides input. A description of all methods and informants used must be included in the report and must meet the administration guidelines and standardized procedures for each instrument.

Emotional Disability (EmD)

Emotional Disability (EmD) exists when a student exhibits one or more of the following characteristics over a long period of time and/or to a marked degree, universally affecting educational performances:

- A. Inability to learn that cannot be explained to intellectual, sensory, or health factors.
- B. Inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
- C. Inappropriate types of behavior or feelings under normal circumstances.
- D. General pervasive mood of unhappiness or depression; and/or
- E. Tendency to develop physical symptoms or fears associated with personal or school programs

Emotional Disability includes schizophrenia. The term does not refer to children who are socially maladjusted, unless it is determined that they have an Emotional Disability.

Evaluation Requirements:

When the evaluation team is considering eligibility under the Emotional Disability category, the multidisciplinary team evaluation report and/or eligibility determination report must include:

- A. Narrative descriptions of:
 - 1. The student's behaviors,
 - 2. Situations in which the behaviors occur, and situations in which the behaviors do not occur,
 - 3. Antecedents leading to the behaviors, and
 - 4. Consequences immediately following the behaviors.
- B. Functional assessments of the student's behavior, if conducted; (see discipline)
- C. Attempts to address the behaviors and the results, including:
 - 1. Behavior Intervention Plans, if developed and implemented during the pre-referral process
 - 2. Office discipline referrals and disciplinary actions
 - 3. Documentation to support the behaviors have been exhibited for a long period of time and/or to a marked degree
 - 4. A description of how the behaviors adversely affect educational performance
 - 5. A statement as to whether the behaviors are typical for the student's age, setting, circumstances, and peer group, and if not, how the behaviors are different
 - 6. The association between documented patterns of behavior and results of emotional and behavioral assessments
 - 7. A statement by a qualified professional supporting the team's conclusion that the student meets the eligibility criteria for EmD. Prior to eligibility determination, the qualified professional making the statement must:
 - a. Observe the child
 - b. Review all information gathered during the comprehensive evaluation
 - c. Be qualified to interpret the test instruments administered according to the user qualifications for each measure
 - d. Review the eligibility criteria for EmD

Qualified personnel for this purpose include at least one of the following:

- School psychologist currently licensed by MDE
 - Board-licensed psychologist, or
 - Psychiatrist
8. If the team concludes the child does not meet the criteria for EmD because all behavior patterns appear to be the result of social maladjustment, the eligibility determination report must indicate this conclusion. Documentation must be included to support the team's conclusion that the behaviors are indicative of social maladjustment

Hearing Impairment (HI)

Hearing Impairment (HI) means impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance. Deafness means a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing with or without amplification that adversely affects a child's educational performance.

Evaluation Requirements

When the evaluation team is considering eligibility under the Hearing Impairment category, which includes Deafness, the multidisciplinary team evaluation report and/or eligibility determination report must include:

- A. An audiometric evaluation explaining each of the following items:
 1. Type of loss
 2. Age of onset, if known
 3. Severity of loss
 4. Speech reception or speech awareness thresholds, if obtainable
 5. Speech discrimination scores, if applicable
 6. Recommendations regarding amplification, and
 7. Other recommended interventions, if any, including the need for assistance technology
- B. A description of the follow-up examination and results including:
 1. How the conditions noted during the examination might interfere with educational testing and performance; and
 2. Recommendations for accommodations modifications, and educational programming.
- C. Acoustic Immitance measures.
- D. An audiogram and/or measure of auditory evoked potential, such as Auditory Brainstem Response (ABR), Auditory Steady State Response (ASSR), and Otoacoustic Emissions (OAE) that would define the hearing loss;
- E. How the hearing loss impacts education performances; and
- F. Communication abilities and needs, including the need for assisted communications

The Audiological examination must be conducted by one of the following:

- A. An audiologist who holds MDE licensure in audiology,
- B. An audiologist who holds ASHA –CCC certification,
- C. A physician with expertise in conducting audio logical evaluations using appropriate audio logical equipment,
- D. A qualified audiologist who holds certification from the American Academy of Audiology (AAA),
or
- E. A qualified audiologist who is appropriately licensed through the designated licensure authority for the State of Mississippi

Intellectual Disability (ID)

Intellectual Disability means significantly sub-average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affects a child's educational performance. Significantly sub-average general intellectual functioning is defined as two (2) standard deviations or more below the mean, including a standard score

of 70 on a measure of cognitive ability. A child with an eligibility ruling of Intellectual Disability exhibits learning problems which vary in degree from mild to severe. Delays in cognitive abilities, adaptive behavior, and developmental milestones must have been evidenced during a child's developmental period and, upon entering school, such delays must have adversely affected a child's educational performance.

Evaluation Requirements

When the evaluation team is considering eligibility under the Intellectual Disability category, the multidisciplinary team evaluation report and/or eligibility determination report must include results of:

- A. An individual standardized achievement test
- B. A individual standardized measure of cognitive abilities
- C. A norm-referenced measure of adaptive behavior, which must include the home version of the measure completed by the primary caregiver(s). If the adaptive behavior measure allows for an informant other than the primary caregiver, the informant must be knowledgeable of how the child functions outside the school environment.

Language or Speech Impairment (LS)

Language or Speech Impairment (LS) means a communication disorder, such as fluency impaired articulation, language impairment, or a voice impairment, that adversely affects a child's educational performance. Speech disorders include impairments in articulation, fluency, and/or voice. Language disorders include developmental or acquired impairments in the ability to receive, send, process, and comprehend concepts or verbal, nonverbal, and graphic symbol systems. A communication disorder may range in severity from mild to profound and may appear in combination with other communication disorders. A communication disorder may be the primary disability or secondary to other disabilities.

The American Speech Language and Hearing Association recognized four (4) areas of communication disorders:

- A. An articulation/phonological processing disorder is the atypical production of speech sounds characterized by substitutions, omissions, additions or distortions that may interfere with intelligibility. Phonological processing includes the rules governing the addition or substitution of a phoneme, including but not limited to:
 - 1. Voicing processes
 - 2. Deletion processes
 - 3. Fronting processes
 - 4. Syllable processes
 - 5. Phoneme processes
- B. A fluency disorder is an interruption in the flow of speaking characterized by:
 - 1. Atypical rate
 - 2. Atypical rhythm
 - 3. Repetitions in sounds, syllables, words, and phrasesThese characteristics might also be accompanied by excessive tension, struggle behavior, and secondary mannerisms.
- C. A voice disorder is characterized by the abnormal production and/or absences of:
 - 1. Vocal quality
 - 2. Pitch
 - 3. Loudness
 - 4. Resonance

5. Duration, which are inappropriate for an individual's age and/or sex
- D. A language disorder is impaired comprehension and/or use of spoken, written and/or symbol systems including:
 1. The form of language (phonology, morphology, syntax)
 2. The content of language (semantics), and/or
 3. The function of language in communication (pragmatics)

Evaluation Requirements

When the evaluation team is considering eligibility under the Language or Speech Impairment category, the multidisciplinary team evaluation report and/or eligibility determination report must include:

- A. Results for hearing screening;
- B. Results for an orofacial examination, which is required for suspected articulation disorders, and, if necessary, a statement from a medical specialist noting physical problems which would interfere with language/speech production;
- C. A physician's statement of release and recommendation(s) for services when a voice evaluation has been conducted;
- D. The number, types, and severity of disruption, and a description of secondary characteristics in various settings, (e.g., reading, monologue, conversation) when a fluency evaluation has been conducted;
- E. Results of a standardized measure(s) of language, when a language evaluation has been conducted;
 1. The score(s) must be at least 1.5 standard deviations below the mean of the test in the areas of expressive language and/or receptive language, including morphology, syntax, semantics and/or pragmatics for an eligibility ruling in Language.
- F. When an articulation evaluation has been completed for children ages 30 months and older, evidence that the child's articulation skills are below age-appropriate peers based on normative data, including a measure of stimulability;
- G. Documentation that the child's communication impairment adversely affects educational performance including the child's ability to communicate in academic social and vocational settings; and
- H. Documentation of the child's speech/language skills in conversational speech

Speech Dismissals

When determining whether or not a student is a candidate for release or dismissal from language-speech services, the IEP Committee must determine if the student is no longer in need of specially designed instruction and related services. While current and comprehensive evaluation and performance data need to be available for review by the IEP Committee to make this decision, this does not mean that a full and formal evaluation is always needed. Speech Dismissals are appropriate when the student no longer has a disability; and/or they no longer require language-speech services due to their disability. Information to be considered includes:

1. Review of the IEP
2. Review of current data to determine adverse educational impact
3. Administration of assessments/evaluations when appropriate
4. Interviews with teachers, parents, and therapists
5. Observations across settings

Following a review of this information, the IEP Committee can determine that language-speech services are no longer warranted. Possible reasons for dismissals include the student no longer meeting criteria

based on mastered IEP goals/objectives and/or skills within the normal range; progress that has plateaued or a lack of progress and therefore, a lack of educational benefit; communication skills that no longer have an adverse educational impact on educational, social/behavioral, or vocational performance; and/or skills can now be addressed by others in the student's environment.

Multiple Disabilities (MD)

Multiple Disabilities (MD) means concomitant impairments (such as intellectual disability blindness or intellectual disability-orthopedic impairment), the combination of which causes such severe educational needs that children cannot be accommodated in special education programs solely for one of the impairments. Although disabilities in two (2) or more areas may exist in the following categories, Deaf-Blindness, Specific Learning Disability, Developmental Delay or Language or Speech Impairment, these categories do not constitute Multiple Disabilities, in and of themselves. Language/Speech, along with another disability, is generally viewed as a secondary condition, not MD.

Evaluation Requirements

When the multidisciplinary evaluation team is considering eligibility under the Multiple Disabilities category, the categories that are evidenced by the data and a statement that the child cannot be appropriately served in a special education program designed solely for one of the disabilities must be included in the eligibility determination report.

Orthopedic Impairment (OI)

Orthopedic Impairment (OI) means a severe orthopedic impairment that adversely affects a child's education performance. The term includes impairments caused by a congenital anomaly (e.g., clubfoot or absence of one or more members), impairments caused by disease (e.g., poliomyelitis or bone tuberculosis), and impairments resulting from other cause (e.g., cerebral palsy, amputations, and fractures or burns causing contractures).

Evaluation Requirements

When the multidisciplinary evaluation team is considering eligibility under the Orthopedic Impairment category, the evaluation report and/or the eligibility determination report must include a diagnostic report from a physician or a nurse practitioner that provides information regarding:

- A. The nature of the student's congenital or acquired Orthopedic Impairment, and
- B. Limitations and precautions to be considered, and
- C. Recommendations for educational programming

Other Health Impairment (OHI)

Other Health Impairment (OHI) means 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:

- A. Is due to chronic or acute health problems such as asthma, attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD), diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia or Tourette Syndrome; and
- B. Adversely affects a child's education performance

Evaluation Requirements

When the evaluation team is considering eligibility under the Other Health Impairment category, the evaluation report and/or the eligibility determination report must include a diagnostic report from a physician or a nurse practitioner that provides information regarding:

- A. The nature of the student's health impairment,
- B. Limitations and precautions to be considered and recommendations for educational programming. When the evaluation team is considering eligibility under the Other Health Impairment (OHI) category due to an attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD), the comprehensive evaluation report and/or eligibility determination report must include all of the following:
 1. A description of the student's behaviors, settings in which the behaviors occur, antecedents leading to the behaviors, and consequences immediately following the behaviors
 2. Attempts to address the behaviors and the results, including office discipline referrals and disciplinary actions
 3. A description of how the behaviors adversely affect education performance.
 4. A statement as to whether the behaviors are typical for student's age, setting circumstances, and peer group, and, if not, how the behaviors are different
 5. The correlation between documented behaviors and results of ADHD assessments. For ADD and ADHD, a diagnostic report from a physician or a nurse practitioner is not required.

Specific Learning Disability (SLD)

Specific Learning Disability (SLD) means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. Specific Learning Disability does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of intellectual disability, of emotional disability or of environmental, cultural differences, or economic disadvantage.

- A. May consider whether a process based on the child's response to scientific, research-based intervention(s) (i.e., Response to Intervention—RtI) is sufficient to determine eligibility, and
- B. May use other alternative research-based procedures and/or
- C. May use a severe discrepancy between intellectual ability and achievement. Severe discrepancy is defined as 1.5 standard deviations the measure of intellectual disability.

Pre-Referral Requirements

To ensure that underachievement in a child suspected of having a specific learning disability is not due to a lack of appropriate instruction in reading or math, the multidisciplinary evaluation team must consider, as part of the evaluation:

- A. Data that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate instruction in general education settings, delivered by qualified personnel, and
- B. Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents

WCSD must promptly request parental consent to evaluate the child to determine if the child needs special education and related services and must adhere to the evaluation and reevaluation time frames, unless extended by mutual written agreement of the child's parents and a group of qualified professionals.

Evaluation Requirements

When determining whether a child has a Specific Learning Disability:

- A. May consider whether a process based on the child's response to scientific researched-based intervention(s) is sufficient to determine eligibility (RtI); and in addition
- B. May use other alternative researched-based procedures; and or
- C. May use a severe discrepancy between ability and achievement

NOTE: A severe discrepancy is defined as 1.5 standard deviations below the measure of intellectual disability.

Report Requirements

When the evaluation team is considering eligibility under the Specific Learning Disability category, the eligibility determination report must include:

- A. Documentation of an observation using the following guidelines:
 - 1. The WCSD must ensure that the child is observed in the child's learning environment (including the general education classroom setting) to document the child's academic performance and behavior in the areas of difficulty.
 - 2. The multidisciplinary evaluation team must:
 - a. Use information from an observation in routine classroom instruction and monitoring of the child's performance that was done before the child was referred for an evaluation; or
 - b. Have at least one member of the multidisciplinary evaluation team conduct an observation of the child's academic performance in the general education classroom after the child has been referred for an evaluation and parental consent is obtained.
 - 3. In the case of a child of less than school age or out of school, a group member must observe the child in an environment appropriate for a child of that age.
- B. Statements indicating:
 - 1. Whether the child has a specific learning disability; and
 - 2. The basis for making the determination; and
 - 3. The relevant behavior, if any, noted during the observation of the child and the relationship of that behavior to the child's academic functioning; and
 - 4. The educational relevant medical findings, if any; and
 - 5. Whether;
 - a. The child does not achieve adequately for the child's age or fails to meet State-approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the child's age or State-approved grade-level standards in the following areas:
 - Oral expression

- Listening comprehension
 - Written expression
 - Basic reading skill
 - Reading fluency skills
 - Reading comprehension
 - Mathematics calculation
 - Mathematics problem solving
- b. The child does not make sufficient progress to meet age or State-approved grade-level standards in one or more of the areas identified in the paragraph (5.i.) above when using a process based on the child's response to scientific, research-based intervention; or
 - c. The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State-approved grade-level standards or intellectual development that is determined by the group to be relevant to the identification of a specific learning disability, using appropriate assessments.
6. The determination of the group concerning the effects of a visual, hearing, or motor disability, intellectual disability, emotional disturbance; environmental or economic disadvantage; or limited English proficiency on the child's achievement level; and
 7. If the child has participated in a process that assesses the child's response to scientific, research-based intervention;
 - a. the instructional strategies used and the student-centered data collected; and
 - b. the documentation that the child's parents were notified about;
 1. MDE's policies regarding the amount and nature of student performance data that would be collected and the general education services that would be provided; and
 2. strategies for increasing the child's rate of learning; and
 3. the parents' right to request and evaluation.
- C. Each group member, including parent(s), must certify in writing whether the report reflects the member's conclusions. If it does not reflect the member's conclusions, the group member must submit a separate statement presenting his or her conclusions.

Team Composition

The multidisciplinary evaluation team must include the child's parents and a team of qualified professionals, including:

- A. The child's general education teacher; or
- B. If the child does not have a general education teacher, a general education classroom teacher qualified to teach a child of his or her age; or
- C. For a child of less than school age, an individual licensed by the SBE to teach a child of his or her age;
- D. A special education teacher; and
- E. At least one person qualified to conduct individual diagnostic examinations of children, such as a school psychologist, psychometrist, speech-language pathologist, or remedial reading teacher

Traumatic Brain Injury (TBI)

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. The term 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/or speech. The term does not apply to brain injuries that are congenital or degenerative or to brain injuries induced by birth trauma.

Evaluation Requirements

When the evaluation team is considering eligibility under the Traumatic Brain Injury category, the comprehensive evaluation report(s) and/or eligibility determination report must include the information included in A, B and C below:

- A. Information from a variety of sources such as assessments, evaluations, the student's teacher(s), parents and/or caregivers who are familiar with the student's educational differences in functioning prior to and following the injury, if relevant, in the following areas:
 - Cognition
 - Language
 - Memory
 - Attention
 - Reasoning
 - Abstract thinking
 - Judgment
 - Problem-solving
 - Sensory, perceptual and motor abilities
 - Psychosocial behavior
 - Physical functions
 - Information processing
 - Speech
- B. A description of the acquired brain injury and cause of the injury; and
- C. Reports from physicians, providers of rehabilitation services, and/or other healthcare providers describing precautions, limitations, and recommendations to consider when planning educational services, if available

Visually Impaired (VI)

Visual Impairment (VI) including blindness means impairment in vision that even with correction, adversely affects a child's educational performance. This term includes both partial sight and blindness.

Evaluation Requirement

When the evaluation team is considering eligibility under the Visually Impaired category, the comprehensive evaluation report (s) and/or eligibility determination report must include a report from the ophthalmologist or optometrist that includes all of the following:

- A. Visual acuity
- B. Diagnosed visual problems
- C. A statement of how the child's visual problems might affect educational performance
- D. Recommendations for educational programming

Procedures for Transfer Students

In State Transfer

- A. Student enrolls and school informs the Special Services Office of enrollment with SPED services or parent/guardian contacts Special Services Office and school is informed of eligibility
- B. Special Services Office
 1. Verify eligibility and placement
 2. Request records from previous district
- C. School Psychologist/SPED Director
 1. Review IEP from previous district
 2. Write or revise IEP from previous district with comparable services
 3. Send notice to parent
 4. Conduct IEP meeting
 - a. Obtain permission to place
 - b. Discuss Procedural Safeguards and provide copy to parent/guardian
 - c. Provide copy of IEP to parent/guardian

Out of State Transfer

- A. Student enrolls and school informs the Special Services Office of enrollment with SPED services or parent/guardian contacts Special Services Office and school is informed of eligibility
- B. Special Services Office
 1. Verify eligibility and placement
 2. Request records from previous state
 3. Compile information received and submit to Assessment Review Team
- C. Internal Review Team (IRT)
 1. Determine whether additional assessment is necessary to determine MS eligibility and if no additional assessment is needed, then
 - a. Document received information on Reevaluation Report and Summary of Eligibility and submit to Case Manager
 1. Case Manager
 - Send Meeting Invitation (MI) to parent
 - Conduct Eligibility/IEP meeting
 - Provide copy to parent
 - Submit IEP to appropriate teacher and submit documentation to MSIS clerk at the school site
 2. Special Services Office
 - Maintain original ATR and copy of IEP
 2. Determine whether additional assessment is necessary to determine MS eligibility and if assessment is needed, then
 - a. Document received information on Reevaluation Report and determine additional assessment required for possible MS eligibility
 1. Case Manager/MET Chairperson
 - Send Meeting Invitation (MI) to parent
 - Conduct temporary IEP meeting and Reevaluation meeting
 - Obtain permission for additional assessment
 - Place student based on temporary IEP
 2. Assessment Team
 - Schedule appropriate assessment(s)

- Monitor progress/timelines at weekly staff meeting
 - Conduct assessment and write reports
3. MET
- Send notice for eligibility meeting and a copy of the assessment report within at least 7 days before the meeting, documenting ATR enclosure on the NOM.
 - Prepare a copy of report for parents requesting a copy before meeting
 - Conduct eligibility meeting
 - a. If ineligible, give Notice of Eligibility Decision and stop
 - b. If eligible, submit to Case Manager
 1. Case Manager
 - Obtain permission to place
 - Discuss Procedural Safeguards and provide copy to parent/guardian
 - Provide copy of IEP to parent/guardian
 - Submit IEP to appropriate teacher and submit documentation to MSIS clerk at the school site
 2. Special Services Office
 - Maintain original ATR and copy of IEP

Individualized Education Programs

An Individualized education program (IEP) is a written statement for each child with a disability that is developed, reviewed, and revised periodically but not less than annually. Each IEP is written by a committee of persons including the parents/guardians, a general education teacher, a special education teacher, a representative of the Waltham County School District that is knowledgeable about the curriculum and available resources, an individual who can interpret assessment results, appropriate related services personnel, others with special knowledge of the child, and the child, if transition is being discussed. An IEP includes the following:

1. A statement of the child's present level of academic achievement and functional performance, including how the child's disability affects involvement and progress in the general education curriculum (participation in appropriate activities for preschool children)
2. A statement of measurable annual goals, including academic and functional goals, to enable the child to be involved in and make progress in the general education curriculum, as well as meet other educational needs (short-term objectives are required for students who take alternate assessments)
3. A description of how progress will be measured and at what intervals progress will be measured
4. A statement of services, including related services and supplementary aids and services, that will be provided to allow the student to progress toward the annual goals and to be involved in, and progress in, the general education curriculum
5. A explanation of any non-participation in general education services and activities
6. A statement of accommodations necessary for participation in State- and district-wide assessments or determination of participation in alternate assessments including a statement of the assessment that will be taken
7. Projected dates for special education services and related services

WCSD will develop IEPs based on Standards-Based Reform that includes the idea that special education students have the right to be taught with the same high standards expected for all students and the idea that all students must be provided opportunities to learn the general education curriculum. In doing so, students with disabilities will be given equitable access to the general education curriculum. Content standards from

the general education curriculum are aligned to accountability, IEP goals and objectives are linked to the standards, statewide assessment is based on the standards, and educational benefit is the focus for the student. The following steps will be utilized by WCSD in developing Standards-Based IEPs:

1. Identify grade-level content standards for the grade in which the student is enrolled or would be enrolled based on age
2. Establish how to address the unique needs presented by the student's disability by analyzing the disability and determining how the disability will impact learning
3. Examine classroom and student data to determine where the student is functioning in relation to the grade-level standards. Data to examine should include:
 - a. Courses of study and/or curriculum guides
 - b. Current assessment data
 - c. State assessments
 - Curriculum-based
 - ATR
 - Universal Screeners
 - d. Work samples
 - e. Previous year's IEP
 - f. Other information such as grades, discipline referrals, attendance reports, etc.
4. Use data to summarize the present level of academic achievement and functional performance by developing the PLAAFP. The PLAAFP, Present Levels of Academic and Functional Performance, provides a summary of baseline information that indicates the student's academic achievement by focusing on the student's learning and progressing in the general curriculum, identifies current functional performance which focuses on the student accessing the general curriculum, and explains how the disability affects the student's involvement and progress in the general education curriculum. The PLAAFP must be standards-centered, data-driven, understandable, and measurable.
5. Develop measurable annual goals aligned with grade-level academic content standards. Goals will describe what a student can reasonably expect to accomplish in one school year.
6. Assess and report the student's progress throughout the year using a variety of assessments. This should be done frequently in order to be able to adjust instruction as needed.
7. Identify specially designed instruction, including accommodations and/or modifications needed to access and progress in the general education curriculum
8. Determine the most appropriate assessment option for the state-wide testing program, considering the conditions of the assessment and the testing accommodations

Least Restrictive Environment

WCSD will use the following procedure, developed by Marilyn Friend and endorsed by MDE to help the IEP Committee make a valid decision concerning placement in the least restrictive environment:

1. Review IEP and setting information
 - a. Assume that the appropriate placement is general education classroom for at least 80% of the day
 - b. Determine the characteristics and needs of the student
 - c. Determine the characteristics of the general education setting
 - d. Discuss possible nonacademic and extracurricular settings that should be considered
2. Discuss supplementary aids and services

- a. Identify supplementary aids and services that are needed for success in the LRE and how have they been utilized
- b. Determine if some accommodations and modifications cannot be made in a general education classroom
- c. Establish supports for teachers that will help provide the identified aids and services
3. Address additional factors
 - a. Determine the impact on other students that regular education placement would make
 - b. Address the following questions:
 - How long should this student be out of general education placement?
 - How will progress be documented and monitored?
 - What is the cost to the student?
 - c. Assess the possible harmful effects of the planned setting
4. Document and identify the specific process used to reach the decision
 - a. Document decision on the IEP and on the LRE Worksheet
 - b. Select data collection procedures to monitor progress in the assigned setting

Requirements for IEP Meetings – Initial, Review, Revision, Amendment

The IEP Committee **must** hold a formal IEP Committee to make the following decisions:

- To develop the child’s Initial IEP, including annual goals, short-term instructional objectives or benchmarks, services and supports, secondary transition plans, and behavior support plans and to determine the child’s LRE and need for Extended School Year (ESY) services;
- To make significant changes to the child’s IEP based on the results of formal assessment or reevaluation, due to changing needs or situations (e.g., change in placement, due to insufficient progress on his/her annual goals (e.g., deciding to increase the amount or type of services provided);
- To discuss disciplinary actions or conduct a Manifestation Determination Review (MDR);
- To develop an IEP before the public agency places the child in a private school/facility; and
- To review and revise the child’s IEP, at least once annually; and
- After receiving a request from a parent, teacher, or other IEP Committee member to meet to review and/or revise the IEP

The IEP Committee may review data about the child’s performance collaboratively and make minor changes to the IEP as an Amendment **without** a formal IEP Committee meeting in these situations:

- When conducting a reevaluation, the IEP Committee may opt to review existing data without a meeting to determine if there is a need to collect additional data to establish continued eligibility and to determine appropriate service.
- If the IEP needs corrections or minor changes, such as adding accommodations, between annual meetings, the IEP Committee may agree to amend the IEP without a meeting as long as (1) the changes and the parent’s and public agency’s agreement to the changes are in writing and (2) every member of the IEP Committee is informed of the changes.

Although the IEP is a legally-binding document, it is also living document that may be changed as often as needed to meet the unique needs of the child and to ensure the child benefits from his/her education. The IEP must be updated at least once annually; however, there is no limit to the number of IEP

Committee meetings or IEP changes that may occur throughout the year. A review and/or revision of the IEP may occur for the following purposes:

- To determine whether the annual goals have been achieved and to revise the IEP if additional goals are needed or if a lack of expected progress toward the annual goals and/or in the general education curriculum is found;
- To review and revise the child's postsecondary goals, as needed, and to determine whether the child is making sufficient progress to achieve these postsecondary goals and/or if revisions to the type or amount of transition services are needed;
- To determine whether any additional assessments are necessary and/or to incorporate the results of any assessments conducted;
- To review any new information about the child provided to, or by, the parent; and
- To address the child's new academic, developmental, and functional needs.

The IEP Committee must review and/or revise each child's IEP at least once each year, on or before the date of the last annual review. The IEP Committee may conduct the annual review meeting anytime throughout the year, as long as the twelve (12) month timeframe is met and the IEP is in effect at the beginning of the school year. During the annual review meeting, the IEP Committee must consider and update each section of the IEP as appropriate. Following the IEP Committee meeting, the public agency must provide the parent a copy of the new IEP and a Prior Written Notice of any proposed changes or refused changes with justifications. In addition, every member of the IEP Committee and every service provider responsible for implementing the IEP must be informed of any changes.

Discipline Procedures

Waltham County School District personnel are granted the general authority to enforce discipline procedures according to the policies and procedures of the WCSD. Disciplining children with disabilities who violate a code of student conduct by interrupting the child's participation in education for up to ten (10) school days over the course of a school year, when necessary and appropriate to the circumstances, does not impose an unreasonable limitation on the child's right to a Free and Appropriate Education (FAPE). If the WCSD does not provide services to nondisabled children removed for the same amount of time, the WCSD is not required to provide services to a child with a disability. However, WCSD personnel may use discretion on a case-by-case basis for a child with a disability who has violated the code of conduct. For example, WCSD personnel may give consideration to the individual situation and the child's disability, disciplinary history, ability to understand consequences, and ability to regulate his/her behavior when determining appropriate discipline procedures for the child.

For example, consideration can be given under the following circumstances:

- Are the child's thought processes logical?
- Does the child know and understand the WCSD's code of conduct?
- Does the child understand the consequences for violation of the WCSD's code of conduct?
- Does the child know and understand that the behavior was inappropriate?
- Does the child know and understand that the behavior was inappropriate?
- Has the child demonstrated the ability to follow rules?
- Has the child previously expressed that similar behavior is wrong?
- Has the child expressed an understanding of consequences of behavior?
- Has the child previously followed similar rules?
- In what situations has the child been able to control behavior?
- Are there factors that explain the misconduct?
- Was the behavior premeditated?

In addition, discipline procedures may be individually modified for a child according to an individualized plan or program such as a Behavior Intervention Plan (BIP), Individualized Educational Program (IEP), or 504 Plan.

Disciplinary Removals

Walthall County School District personnel may use disciplinary removals, including removal to an appropriate interim alternative education setting (IAES), removal to another setting, or suspension, for a child with a disability who violates a code of conduct to the extent those removals are used with children without disabilities who violate a code of conduct. However, WCSD personnel may not remove a child with a disability for more than **ten (10) consecutive** school days or instigate serial removals of **ten (10) or less consecutive** school days in a school year unless these removals are for separate unrelated incidents of conduct. However, careful consideration must be given to whether the behaviors, taken cumulatively, are substantially similar and constitute a pattern of behavior.

An in-school suspension (ISS) **is** considered a removal, unless:

- The child is afforded the opportunity to continue to appropriately participate in the general curriculum;
- The WCSD continues to provide the services specified in the child's IEP; and
- The child continues to participate with non-disabled peers to the same extent as s/he does in his/her current placement.

A child with a disability should not be assigned to ISS for more than three (3) consecutive days. Following two (2) incidents of behavior(s) that result in assignment to ISS, the IEP Committee should review the IEP and develop a behavior plan to address the child's behavior subject to the disciplinary action or if a behavior plan is in place, the behavior plan should be reviewed and revised, if appropriate, to address the specific behavior.

Bus suspension would not be considered a "suspension" unless the bus transportation is a part of the child's IEP. In this case, the child's parent has the same obligation to get the child to school as the parent of a nondisabled child who has been suspended from the bus. If the bus transportation is a part of the child's IEP, a bus suspension would be treated as a suspension unless the WCSD provided the bus service in some other way.

Interim Alternative Educational Setting (IAES) is a setting other than the regular school setting that enables a child to continue to participate in the general education curriculum and for a child with a disability to progress toward meeting his/her IEP goals. The IAES must be an alternative which is used with nondisabled children (i.e., not a self-contained special education setting).

Suspension (OSS) is defined as removing a child from the child's regular educational setting.

An *Out-of-school suspension* is a removal of a child to another location (typically the child's home). In an OSS, a child does not participate in the general curriculum, receive special education or related services, or participate with nondisabled peers.

IDEA limits the number of days a child with a disability can be suspended for violating a code of conduct, provided a special circumstance does not apply. A school day is considered to be a day of out-of-school suspension if for any part of that day:

- the child is removed from the school,
- the child's return to school is contingent upon a parent meeting,
- the parent has voluntarily removed the child from the school at the request of the school, or

- the child is suspended from special transportation (i.e., the WCSD transports the child) that results in absenteeism from school

Disciplinary Removals that Do Not Constitute a Change in Placement

Walthall County School District personnel may remove a child for a period of up to ten (10) consecutive school days or less if this removal is in line with removals of children without disabilities. Additional removals for not more than ten (10) consecutive school days in the same school year may be applied if these removals are for separate incidents of misconduct and do not constitute a pattern of behavior. A pattern of behavior is defined as behavior that is substantially similar in each incident. Removals of ten (10) school days or less are not considered a change in placement, except when the child is placed in an interim alternative educational setting (IAES). For removals of ten (10) school days or less, the school district is not required to provide services to the child unless it provides services to a child without disabilities who is similarly removed.

Disciplinary Removals that Constitute a Change in Placement

Any decisions that impact placement must be made by the IEP Committee, including the following:

- A single removal of a child with a disability for ten (10) days or less to an IAES.
- A single removal of a child with a disability for more than ten (10) consecutive school days.
- The child has been subjected to a series of removals that constitute a pattern because:
- The series of removals total more than 10 school days in a school year;
- The child's behavior is substantially similar to the child's behavior in previous incidents that resulted in the series of removals;
- Additional factors such as the length of each removal, the total amount of time the child has been removed and the proximity of the removals to one another.

When a child with a disability is removed to an IAES, the child's IEP committee, including the parent, must determine the appropriate services. The IEP Committee must provide the parent with a Meeting Invitation and the Procedural Safeguards Notice. The WCSD is not required to provide all services in the child's IEP but must continue to provide educational services so as to enable the child to participate in the general education curriculum, although in another setting, and to progress toward meeting his/her IEP goals. The IEP Committee determines the appropriate services to be provided. However, if the child is not making progress toward meeting the IEP goals, the IEP committee should review and revise either the determination of services or the appropriateness of the IAES. The removal to this setting must not exceed more than forty-five (45) school days. When an appeal has been made by either the parent or the Walthall County School District, the child must remain in the IAES pending the decision of the hearing officer or until the expiration of the time period (45 days) unless the parent and the WCSD agree otherwise.

Manifestation of the Child's Disability

The Walthall County School District, the child's parent(s) and relevant members of the child's IEP committee must meet within ten (10) school days from the decision to change the child's placement such as removal to an IAES. This meeting is to review all information in the child's file, the child's IEP, teacher observations and any other information provided by the parent(s) that relate to the impact of the child's disability on the behavior that violated the school's code of conduct. For each incident of removal for more than ten (10) days, it is the responsibility of the IEP committee to determine if there is a relationship between the child's disability and the behavior precipitating a disciplinary action. The relationship must be direct and substantial to the child's disability or be the direct result of the WCSD's failure to implement the IEP.

If the WCSD, the parent(s) and the relevant members of the child's IEP committee determine that the conduct was a manifestation of the child's disability, the IEP committee must either:

- Conduct a functional behavioral assessment (FBA) unless a current assessment exists and implement a behavioral intervention plan (BIP); **or**
- Review the current behavioral intervention plan and modify it, as necessary, to address the behavior.

The child must be returned to the placement from which the child was removed unless the WCSD and the parent agree to a change in placement as part of the behavioral intervention plan.

*NOTE: It is important that districts are mindful of the number of days a child has been removed prior to reaching the ten (10) day threshold, as an FBA **cannot** be done when the child is outside of the educational setting.*

Manifestation Determination Review Process: The Manifestation Determination Review process is a comprehensive problem-solving review of various factors to determine if the child's conduct in question:

- Is caused by the child's disability;
- Has a direct and substantial relationship to the child's disability?
- Is the direct result of the Walthall County School District's failure to implement the IEP?

To begin the process, the IEP committee should review the child's file for:

- Discipline history, including but not limited to the total number of suspensions, the proximity of the suspensions, and the length of each suspension.
- Patterns of misconduct in relation to the child's discipline history (e.g. isolated vs. repeated instances; similarity between instances of misconduct; escalation of instances; increased frequency of misconduct).
- Factors that contribute to the misconduct (e.g. unique circumstances, environmental factors, educational program, home factors and the child's mental, physical and developmental challenges).
- The child's medical, psychosocial, academic, and discipline records.
- The type behavior and if the behavior presents a clear and present danger to the child and/or others.

Relationship to the Child's Disability: After reviewing the relevant information from the child's disciplinary history and file, the IEP committee must determine if the misconduct was caused by the child's disability or if the conduct had a direct and substantial relationship to the child's disability. The IEP committee should consider the following:

- If the child has a significant cognitive disability that may result in impaired judgment and/or reasoning.
 - Does the child have the ability to understand the behavior violated a code of conduct?
 - Does the child have the ability to understand the consequences of the behavior?
- If the child has an emotional disability (e.g. schizophrenia, depression, post-traumatic stress disorder, Bi-polar, obsessive-compulsive disorder) and whether there is evidence that it had a direct relationship to the child's misconduct.
- If the child has a neurological impairment or medical condition that directly impacts and/or produces involuntary or uncontrollable behaviors (e.g. Tourette Syndrome, traumatic brain injury) and whether the medical condition has a direct relationship to the behavior.
- Determine whether the child historically has shown that's/he can/cannot control the inappropriate behavior as evidenced by teacher/staff/parent/child interview.
- Does the child have the ability to control his/her behavior?

- Would it be difficult for the child to control his/her behavior?

Relationship to the Implementation of the IEP: Next, the IEP committee must determine if the misconduct is a direct result of the school district's failure to implement the IEP. If the IEP was not implemented appropriately, the IEP committee must determine the impact of the implementation on the child's behavior. The IEP committee should consider the following:

- Did the child receive reasonable educational benefit from his/her educational program?
- Was the IEP developed to address the child's needs and his/her participation and progress in the general education curriculum?
- Were the necessary resources (e.g., services and supports) available as part of the child's program?
- Was the IEP implemented appropriately and consistently?
- If not, what components of the IEP were not implemented (e.g., services, goals/objectives, positive behavioral supports or the BIP); and
- How did the failure to implement all components of the IEP relate to the functional skills, social competency and behavior of the child and the misconduct of the child?
- Did the child make adequate progress toward his/her goals and objectives as evidenced by progress monitoring results, assessments, and classroom observations?
- Has the IEP been modified over time to reflect changes in the child and/or changes in the child's needs or the instructional program?
- Are Behavioral goals and objectives included in the IEP?
- If any were implemented, were positive behavioral interventions and supports to prevent misconduct and reinforce desirable behavior effective?
- If the child has a Behavior Intervention Plan (BIP):
 - Does it address the current needs of the child?
 - Is it based on research-based practices to address child's needs?
 - Was it implemented with fidelity?
 - If the child does not have a BIP:
 - Has a Functional Behavioral Assessment (FBA) been conducted?
 - What does the FBA show?

If the IEP committee determines that the child's misconduct was caused by or had a direct and substantial relationship to the child's disability, or if the child's conduct was a direct result of the school district's failure to implement the child's IEP, **the child must be returned to his/her current placement.** The only **exception** is when a special circumstance exists (drugs, weapons, and serious bodily injury) or the parent and school district agree to a change in placement.

If the misconduct is a result of the child's disability, the IEP committee must either:

- Conduct a functional behavioral assessment and implement a behavior intervention plan (if no FBA had been completed prior to the conduct); or
- Review and modify, as necessary the existing BIP to address the behavior; and
- Return the child to his/her previous placement location. (The school district and parent(s) may agree to a change of placement as part of the modification of the IEP).

If the misconduct was a result of failure to implement the IEP, immediate steps must be taken to remedy any deficiencies by having the IEP committee review the child's IEP and ensure that it is developed to address all of the child's needs and confer educational benefit. The IEP committee must consider:

- Are the child's goals and/or objectives developed based on his/her assessed needs?
- Are adjustments needed to account for the child's progress or lack of progress?

- Has the child been involved in his/her IEP development? If not, does the child need to be involved in developing the IEP?
- Is the child's placement appropriate to meet the needs of the child, both academic and behavioral?
- Are the necessary supports and services in place in relation to the child's behavior?

If the IEP committee determines that the child's misconduct was **not** caused by or had a direct and substantial relationship to the child's disability, or if the child's conduct was a not a direct result of the school district's failure to implement the child's IEP, **the relevant disciplinary procedures applicable to children without disabilities may be applied.**

Behavior not a Manifestation of the Child's Disability: If, after review of all information, the Walthall County School District, the child's parent(s) and relevant members of the child's IEP committee determine that the violation of the school code is not related to the child's disability, school personnel may apply the relevant disciplinary procedures in the same manner and for the same duration as applied to children without disabilities with the following provisions:

- The child with a disability must continue to receive free and appropriate educational services as specified in the IEP;
- The child must continue to participate in the general education curriculum to the maximum extent appropriate, although in a different setting, and;
- The child must also receive, as appropriate, either an FBA and/or behavioral intervention services.

The behavioral intervention services or modifications must be designed to address the behavior violation, which precipitated the removal from the previous setting to prevent the behavior from reoccurring. When the decision is made for a removal of a child that constitutes a change in placement, the WCSD must notify the parents of the decision and provide to the parents Written Prior Notice (WPN) and Procedural Safeguards. The child's IEP committee, which includes the parent(s), determines the IAES and the appropriate services.

Special Circumstances

School personnel may remove a child to an interim alternative educational setting for not more the forty-five (45) school days without regard to whether the behavior is determined to be a manifestation of the child's disability if there is a violation of the school's code of student conduct under the following special circumstances. This removal of a child with a disability would relate to solely drugs, weapons and infliction of serious of bodily harm offenses. The removal authority applies to a child with a disability:

- Who carries a weapon to or possesses a weapon at school, on school premises or at a school function;
- Who knowingly possesses or uses illegal drugs, or sells or solicits the sale of a controlled substance, at school on school premises, or at a school function; or
- Who inflicts serious bodily injury upon another person while at school, on school premises or at a school function under the jurisdiction of the local educational Walthall County School District?

An illegal drug means a controlled substance but does not include a controlled substance that is legally possessed or used under the supervision of a licensed health-care professional or that is legally possessed or used under any other authority.

Serious bodily injury means injury that involves an extreme physical pain; substantial risk of death; protracted and obvious disfigurement; or protracted loss or impairment of the function of a bodily member, organ or mental faculty.

Dangerous weapon means a weapon, device, instrument, material, or substance, animate or inanimate, that is used for, or is readily capable of causing death or serious bodily injury, except that such term does not include a pocket knife with a blade of less than 2.5 inches in length. If these circumstances occur while at school, on school premises or at a school function under the jurisdiction of the WCSD, the child may be removed to an IAES for forty-five (45) days or less. The WCSD must notify the parents of the decision and provide to the parent, the WPN and Procedural Safeguards. The child's IEP committee, of which the parent(s) is a member, determines the IAES and the appropriate services. Although the manifestation determination need not occur prior to the removal under these circumstances, and the removal can continue for not more than 45 school days, regardless of whether the behavior is later determined to be a manifestation of the child's disability, the WCSD should take prompt action to complete the manifestation determination.

The child may remain in the IAES for up to forty-five days (45), unless the IEP committee reconvenes before the term expires and determines that the IAES is the child's appropriate placement for another forty-five (45) days.

The school district must report crimes that occur on school grounds to the appropriate authorities. Nothing prevents the State law enforcement and judicial authorities from exercising their responsibilities with regard to the application of Federal and State law to crimes committed by a child with a disability. The WCSD must ensure that copies of the special education and disciplinary records of the child are transmitted for consideration by the appropriate authorities to whom the WCSD reports the crime. This transmission must comply with the Family Rights and Privacy Act. The transmission of personal identifiable data must be for the purpose of the juvenile justice system's ability to effectively serve the child whose records are released.

Reporting Criminal Activity to Appropriate Authorities

Agencies are required by State law and State Board of Education policy to report criminal behavior committed by a child, including a child with a disability, to appropriate authorities. agencies must comply with law enforcement and judicial authorities' requests so that these agencies can exercise their responsibilities with regard to the application of federal and State law to crimes committed by a child with a disability.

Knowledge of a Disability

A child who has been identified as a child with a disability, even though the parent(s) has not agreed to the provision of all proposed educational and related services, is still entitled to all the protections under IDEA.

If the parent(s) revokes consent for special education and related services, the disciplinary procedures and timelines as specified in IDEA are not applicable. However, if the parent(s) has expressed a concern that the child needs special education and related services, then the WCSD is deemed to have knowledge that the child is a child with a disability and must afford the disciplinary protections as specified in IDEA until an eligibility determination is established.

The WCSD would also be deemed to have knowledge that the child is a child with a disability if specific concern based on the child's pattern of behavior has been directly expressed by a teacher, or other school personnel, to either the special education director or other supervisory personnel. This expression of concern may be in writing or have been expressed verbally. If the child has been referred to the Multidisciplinary Evaluation Team (MET) for evaluation of a suspected disability but eligibility had not been determined prior to the infraction, the WCSD would still be deemed to have knowledge that the child is a child with a disability. However, if the parent has refused consent for an evaluation or the child is evaluated and determined not to be a child with a disability, the disciplinary protections in IDEA would not

be applicable. It is important to keep detailed records of all suspensions, including in-school suspensions that occur during a school year.

Functional Behavioral Assessment (FBA)

All behavior has a purpose or a function. Most commonly, the function of problematic behavior is to “escape” from a situation or demanding task. The next most common function of problematic behavior is to “get” something such as attention or a tangible item. Many times children come to school without the necessary behavioral, social, or emotional skills to meet expectations. When a child’s behavior becomes disruptive, it is often addressed by actions such as verbal reprimands, isolation, detention, suspension or removal to a different environment such as an IAES. Although sometimes removal becomes necessary, this approach fails to teach the child acceptable replacement behaviors. The general purpose of an FBA is to provide the IEP committee with information as to the function or purpose the problem behavior serves for the child and therefore, assist in analyzing and developing strategies for addressing the undesirable behavior(s). A child will change their behavior only when it is clear that a different response will more effectively and efficiently result in a desired outcome. An FBA is not an intervention but the purpose of the FBA is to identify an intervention with the highest potential for changing the current inappropriate behavior in the current setting. Conducting an FBA is generally considered to be a problem-solving process that looks beyond the behavior itself and focuses, instead, upon identifying biological, social, affective, and environmental factors that initiate, sustain, or end the target behavior. This approach is important because it leads the observer beyond the “symptom” (the behavior) to the underlying motivation for it.

When should an FBA be conducted? An FBA should be conducted while the child is in the current educational setting, to determine the educational and programming needs of the child.

The purpose of the FBA is to identify an intervention with the highest potential for changing the current inappropriate behavior in the current setting. An FBA might also be conducted at other times such as:

- When there is a known history of problem behavior;
- When the child’s suspensions approach ten (10) cumulative days;
- When the child’s behavior presents a danger to self or others.

Who should conduct an FBA? To assist with conducting an FBA, it is best to utilize a professional with training and experience in behavior management and positive behavioral interventions in the educational settings. Individuals who may satisfy these requirements include licensed school psychologist, social workers, and counselors and teachers with a background in behavioral disorders or emotional disabilities.

Is an FBA an Evaluation? An FBA is generally understood to be an individualized evaluation of a child in accordance §§ 300.3010 through 300.311 to assist in determining (a) whether a child is and continues to qualify as a child with a disability, and (b) the nature and extent of special education and related service required to ensure educational benefit including the need for a Behavioral Intervention Plan (BIP). **As an individualized evaluation, parent consent is required to collect any new data.** The IEP committee can review existing data (e.g., student records, previous FBAs, any instrument routinely used with all children) without parental consent. If the parent of the child with a disability disagrees with the FBA, the parent has the right to request an Independent Education Evaluation (IEE) at expense. However, the parent’s right to an IEE at expense is subject to certain conditions, including the WCSD’s option to request a due process hearing to show that its evaluation is appropriate.

The FBA is comprised of four (4) major components:

- Identifying the “target” or problem behavior(s);

- Observing the child, perhaps in different environments, and collecting data on the target behavior, the antecedents to the behavior, time the behavior occurs, situations where the behavior occurs and the consequences of the behavior;
- Formulating a hypothesis about the cause(s) of the behavior and summary statement; and
- Developing an intervention(s) with the highest potential of changing the behavior.

Identify the Problem Behavior(s) In order to conduct the FBA, consider the following:

- Objectively observe the child's behavior in different settings and during different types of activities in order to pinpoint the specific characteristics of the behavior.
- Consider the teacher's expectations for the child's academic performance as well as classroom conduct. It might be that teacher expectations for the child exceed or fall below the child's ability to perform. The resulting behavior problems may stem from a sense of frustration, fear of embarrassment or boredom.
- Determine if a behavior relates to cultural differences or expectations (e.g., eye contact in some cultures is considered rude; in others, peer competition is discouraged).
- Consideration of the following questions may be useful in determining the significance of the behavior:
 - Does the child's behavior significantly differ from that of his/her peers?
 - Does the behavior interfere with the successful learning of the child and/or others?
 - Have past efforts to address the behavior using standard interventions been unsuccessful?
 - Does the behavior represent a skill or performance deficit, rather than a cultural difference?
 - Is the behavior serious, persistent, chronic, or a threat to the safety of the child or others?
 - If the behavior persists, is some disciplinary action likely to result?

It may be necessary to carefully and objectively observe the child's behavior in different settings and during different types of activities. Interviews with other school staff and caregivers may help pinpoint the specific characteristics of the behavior.

Observation and Data Collection. During the data collection phase of an FBA, data may be obtained from a variety of sources. These sources may include but not be limited to:

- Record reviews such as medical records, educational records, discipline records, psychological evaluation or previous intervention attempts;
- Structured interviews with relevant persons including the child's teacher(s), parent(s), and the child, if indicated;
- Rating scales designed to identify the target behaviors and/or environmental events associated with the occurrence of the target behavior; and/or
- Direct assessment or observations designed to identify the target behaviors and/or environmental events associated with the occurrence of the target behavior.

Since problem behavior stems from a variety of causes, it is best to examine the behavior from as many different angles as possible. Depending on the nature of the behavior of concern, it is crucial that multiple means be used to collect information about the behavior. This would include a review of the child's records.

Record reviews may include but not be limited to:

- Review of discipline records and office referrals,
- Review of medical or psychological records, including previous evaluation data,
- Review of academic records including test performance, academic and conduct grades
- Review of previous observation data,
- Review of previous intervention attempts and progress monitoring data, if available.

In addition, various observation procedures, questionnaires, interviews with parents, teachers and other school personnel as well as interviews with the child or other methods needed may be used to better understand the causes of the specific the problem behavior.

Different behaviors may require different data collection techniques. Direct assessment consists of actually observing the problem behavior and describing the conditions that surround the behavior (its context). This context includes events that are antecedent (i.e., that occur before) and consequent (i.e., that occur after) the targeted child's behavior. The description of the target behavior should be objective, clear, and concrete. The description can include examples of the behavior or examples of appropriate behavior, which is not occurring during the observation. The description should use action verbs as opposed to adjectives and should be clearly understandable to non-observers. The description may include summary statements to further describe the problem behavior and its functions.

The direct assessment or observation should include antecedent events: events that occur before the target behavior, prompt the occurrence of the behavior, and serve as potential triggers or "set off" the behavior. The antecedent event may be present when the behavior occurs or may be removed in time and place. The antecedent event may be physical, biological or social in nature. Some examples are:

- High levels of classroom noise or chaotic classroom environment
- Long bus ride or conflict on bus prior to school
- Little personal space or overcrowded classroom
- Health
- Family changes or conflict
- Lack of sleep or fatigue
- Side effects of medication
- Poor quality of the teacher-child relationship
- Time of day

There are various tools for recording direct assessment or observation data. The type of tool used should be determined by the information needed about the presenting behavior. The observation may be an unstructured observation noting behaviors descriptively as they occur. Another way to observe a child would be with an ABC Narrative Observation or Antecedent-Behavior-Consequence form. This approach allows an observer to organize anecdotal or descriptive information on the child's interactions with other children and adults in such a way that patterns of behavior often become clear. A modified ABC chart might be individualized to contain several predetermined categories of teacher or peer antecedent behavior, child responses, and consequent events along with space for narrative recording of classroom observations. There may also be structured observation. This may consist of observations such as Frequency/Event recording; Latency or Duration recording; Time-Sampling Interval recording; or Scatterplots.

Identify the consequences of the problematic behavior. Compare the consequences of the behavior and their effect on increasing or decreasing the behavior. In collecting information regarding the context of a behavior problem, it is important to understand that contextual factors may include certain affective or cognitive behaviors, as well. It can also be that the child does not have the necessary skill to complete an assignment and therefore, prompts the anticipation of failure or ridicule.

To develop the hypothesis, the IEP Committee must first determine the function of the behavior. The function of the behaviors refers to why the child is demonstrating the specified behavior. In addition, the IEP Committee must consider whether the behavior is related to a skill deficit or a performance deficit. A skill deficit is exhibited when a child doesn't know the specific skill/behavior. A performance deficit occurs when a child is capable of performing the appropriate skill/behavior, but does so inconsistently.

- Function – why the child is demonstrating the behavior, usually to get/seek something desired or to escape/avoid something painful or undesired. Examples: to get attention or stimulation, to elicit a desired response, to get a desired activity, to escape demands/requests, to escape an activity or person, to escape an environment, to control something.
- Skill deficit – a behavioral or academic skill that the child does not know how to perform. Example: In a disagreement, the child hits the other child because s/he does not know other strategies for conflict resolution. In cases of skill deficit, the IEP needs to describe how the skill will be taught and how the child will be supported while learning it.
- Performance deficit – a behavioral or academic skill the child does know, but does not consistently perform. Example: A child is chronically late for the classes s/he does not “like” In cases of a performance deficit, the BIP may include strategies to increase motivation.

The Child GAINS...	The Child AVOIDS or ESCAPES...
<ul style="list-style-type: none"> • Attention from Adults/Teachers • Attention from Peers • Desired Items • Preferred Activities or Privileges • Control Over Others/Situations • Sensory Stimulation (Input) 	<ul style="list-style-type: none"> • Attention from Adults/Teachers • Attention from Peers • Non-preferred Activities • Instructional Tasks • Non-preferred Settings • Non-preferred Social Interactions • Transitions • Aversive Physical Sensations • Sensory Stimulation (Reduction)

Develop the Hypothesis and the Summary Statement. The purpose of conducting the FBA is to ultimately find the most effective way to address the problem behavior. Therefore, an important part of the FBA is for the IEP Committee to form a hypothesis or summary statement about why the behavior is occurring.

An example of a hypothesis statement is:

“When (X-target behavior) occurs, it is usually in the context of (antecedent event). The child’s response is (describe in specific behavioral terms). The result of the behavior is usually (XYZ), which serves to (consequences or “pay-off” of the behavior). The function and/or purpose of the response is likely to be a (to get/to seek...to escape/to avoid, etc.). The behavior appears to be a (X-skill deficit or X-performance deficit)

Determine Next Steps. The IEP Committee should determine if the child’s behavior patterns only require instructional modifications or accommodations. In this case, IEP Committee must reconvene the IEP meeting and adjust the IEP accordingly. If the child’s behavior patterns suggest that a Behavioral Intervention Plan (BIP) is warranted, then the IEP committee must create a BIP to address all behaviors. If a BIP is in place, the IEP committee must review and revise the document accordingly. If existing data is insufficient for a complete functional assessment. Additional data is needed. The IEP Committee must get parental consent to conduct additional assessments.

How long is an FBA Valid? An FBA is considered to be valid as long as the results of the FBA are useful to make meaningful behavioral changes for the child; however, it must be reviewed annually during the development of an annual IEP to ensure the data is still applicable. The function of the behavior that was identified in an FBA can change over the course of a day, week, month, or year. An FBA is no longer considered valid if the results of the FBA fail to result in interventions/strategies that produce positive

results. To ensure that the FBA remains current, the IEP committee should review the FBA, at least annually, to determine if the results are still reliable and relevant. The IEP committee should determine:

- Does the FBA address the current problem behavior(s) that are occurring?
- Is the hypothesis statement, regarding the function of the behavior, still appropriate?

If the answer is no to either question, the IEP Committee should conduct another FBA to help with the development of a more appropriate Behavior Intervention Plan (BIP).

Behavioral Intervention Plans (BIPs)

Once the FBA is completed, if it is determined that the child's behavior patterns warrant, the next step is to develop a Behavioral Intervention Plan (BIP), which addresses strategies to correct or eliminate the problem behavior and/or replace the problem behavior with positive behavior(s). The BIP is not focused on controlling the person but instead is focused on redesigning the environment and building new skills that make the problem behavior irrelevant, inefficient and/or ineffective in the environment. The BIP is not to control the child but to enable the child to be successful in his/her environment. The BIP should focus on:

- Increasing positive behaviors;
- Proactive instead of reactive strategies;
- Reinforcement strategies; and
- Corrective strategies.

The following is a list of components that should be included in a BIP:

- Observable and measurable description of the problem behavior identified during the FBA (Operational Definitions of Target Behaviors)
- Identified purpose of the problem behavior as a result of the FBA (Summary Statements and Rationale)
- General strategy or combination of strategies for changing the problem behavior (Predictor/Consequent Strategies and Teaching Strategies)
- Written description of when, where, and how often the strategy will be implemented (Routines)
- Consistent system for monitoring and evaluating the effectiveness of the plan (Treatment Monitoring)
- Consistent system for monitoring the fidelity of implementation of the plan (Treatment Integrity)

The BIP should focus on the observable and measurable description of the problem behavior(s) which includes a definition of the target behavior(s) and an identification of replacement behavior(s). Replacement behaviors should clearly link to the child's target behaviors. The BIP should identify the antecedents and consequences (function) of each problem behavior as a result of the FBA. Each strategy or combination of strategies for changing the problem behavior(s) should consider the individualized function(s). General strategy or combination of strategies for changing the problem behavior should relate to the antecedent(s) for the child's behavior, such as changing classroom or behavior management strategies; reinforcing appropriate behaviors or increasing supervision. The general strategy or combination of strategies for changing the problem behavior should relate to either the function(s) of the child's behavior, such as reinforcement or consequent strategies, or the skill deficit(s) of the child's behavior, such as social skill training, academic intervention or anger management.

The BIP should be monitored consistently and evaluated for integrity through direct observation and intervention checklists to be effective in addressing the child's problem behavior. When developing the

BIP, if there are several problem behaviors, select one of the behaviors to address. The BIP may focus on the behavior that is the most irritating to the people interviewed, the easiest to change or a behavior that occurs early in a chain of problematic behaviors. The IEP Committee may also chose to select approaches that teach or increase alternate behaviors rather than attempt to eliminate or decrease problematic behaviors. It is also best to select approaches that provide opportunities for the child to make positive choices. This allows the child to participate in the process of changing his/her behavior.

For BIPs developed from an FBA, a summary of the FBA data is included in the BIP. Any function-based hypothesis or summary statements from the FBA are included in the BIP and there is a clear link between the summary statements and the intervention strategies listed in the BIP.

The BIP should be reviewed and evaluated prior to and during the implementation with any revisions made if necessary. The following are checkpoints for evaluating the BIP.

- The BIP should be a clear step-by-step plan.
- The person(s) responsible for implementing the prevention, teaching, reinforcement and corrective strategies is specified.
- The strategies and supports provided are listed.
- The location(s) of the strategies and supports are described.
- The review schedule by teaching staff is determined and listed.
- The definitions of the target problem behavior(s) and replacement behavior(s) are written in measurable terms.
- Goals for the acquisition of replacement behaviors are clear and measurable. The goals are linked to the child's IEP.

NOTE: It is best practice to:

Conduct an FBA and implement a BIP well before a child reaches his/her 10th day of suspension and a change of placement occurs. An FBA must be conducted in the child's current educational setting prior to a change of placement. An FBA is a formal evaluation and requires written parental consent.

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- *An FBA is a formal evaluation and requires written parental consent.*
- *The BIP is a living document that should be monitored, reviewed at least annually and updated as needed.*

Implementing the BIP. The individuals responsible for implementing the child's BIP will vary depending on the supports the child requires. Participants in the implementation generally include teachers, intervention specialist, and support staff; however, the IEP committee should consider training others to participate in the implementation (e.g., administration, guidance counselors, cafeteria staff, bus driver). Parents should also be involved in the implementation so that home support in the areas of concern can strengthen the interventions that are conducted at school.

Reviewing the BIP. The child's BIP should be reviewed on a continuous basis to determine if the interventions in place are successful. It should be reviewed on the same basis as the IEP (e.g., 4 ½ weeks, 6 weeks, 9 weeks). The data collected should be reflected in the child's progress report through the behavioral goal(s)/objective(s) that address the child's behavioral concerns.

Extended School Year Services

Extended School Year (ESY) services are special education and related services provided to the child beyond the normal school year, in accordance with the child's IEP in order to provide a free appropriate public education (FAPE), and at no cost to the parent. ESY services may be required for some, but not all, children with disabilities in order to receive a FAPE. ESY services must be provided if a child's IEP Committee determines, on an individual basis, that these services are necessary to ensure educational benefit. ESY services are not limited to children with a particular disability category or set predetermined limits on the type, amount, or duration of ESY services.

Consistent with the obligation to provide a FAPE, ESY services are determined annually and provided in the least restrictive environment (LRE) as determined by the child's IEP Committee. The IEP Committee should determine the need for ESY services early enough to ensure that the parent can meaningfully exercise his/her due process rights if s/he wishes to challenge the ESY decision. The public agency's financial resources must not be a consideration in determining the need for ESY services, the type of ESY services to be provided, or the duration of ESY services.

Qualifying Criteria

There are three (3) qualifying criteria used to determine a child's need for ESY services. The IEP Committee must review the child's IEP and any available data of the child's performance. All IEP Committee members, including the child's parent, must have the opportunity to provide input in the determination of the need for ESY services. The IEP Committee must consider **all** three qualifying criteria in determining the need for ESY services:

- 1. Pattern of Regression-Recoupment:** Refers to a child's loss of skills addressed on the child's IEP after at least two (2) breaks in instruction without regaining the documented level of skills within a period of time equal to the amount of time of the break or a maximum of four (4) weeks.
- 2. Critical Point of Instruction:**
 - **CPI-1:** Refers to a need to maintain a child's skills to prevent a loss of general education class time or an increase in special education service time.
 - **CPI-2:** Refers to a point in the acquisition or maintenance of a critical skill during which a lengthy break in instruction would lead to a significant loss of progress.

- 3. Extenuating Circumstances:** Refers to special situations that jeopardize the child's receipt of a FAPE unless ESY services are provided.

Determination of the Need for ESY Services

A child with a disability may be eligible for ESY services if there is evidence that ESY services are needed to allow the child to benefit from his/her special education services.

Regression-Recoupment

- *Regression* is defined as a loss of skill(s) on an IEP objective after a break in instruction of at least five (5) consecutive days.
- *Recoupment* is defined as the period of time the child requires to regain the level of performance on the IEP objective that was attained prior to the break.

The child's recoupment period must be compared to the length of time of a break in which a regression was noticed (i.e., a comparison of the number of days required to recoup a skill lost during a break to the number of days in the break) or a maximum time frame of four (4) weeks (i.e., twenty-eight (28) calendar days). A pattern of regression-recoupment is characterized as a repeated regression, or loss of skill(s), on an IEP objective or objectives after multiple breaks in instruction requiring more time to recoup, or recover, the lost skill(s) than the length of time of the breaks in instruction. To qualify for ESY services due to a pattern of regression-recoupment, the IEP Committee must document at least two (2) breaks in instruction resulting in a loss of skill(s) that require more time to recover than a period of time equal to the time of the breaks or four (4) weeks (i.e., twenty-eight (28) calendar days), if the break is longer. The IEP Committee will use the *Regression-Recoupment Determination Form* provided by MDE to document the basis for a determination of a child's need for ESY services due to a pattern of regression and recoupment of IEP objectives after a break.

Critical Point of Instruction

There are two (2) definitions of Critical Point of Instruction:

- *Critical Point of Instruction-1* may be defined as a need to maintain skills which prevent a loss of general education class time or an increase in special education service time (i.e., intensive work in specific areas, such as math, reading, or social skills, would prevent the loss of time in general education classes).
- *Critical Point of Instruction-2* may be defined as a point, during the acquisition or maintenance of a critical skill, at which a lengthy break in instruction (e.g., summer break) will precipitate a significant loss of progress (i.e., a significant loss of progress toward the acquisition and/or maintenance of critical self-help, community access, or social skills would occur during the summer break).

The IEP Committee will use the *Determination of Critical Objectives* provided by MDE to document their determination of a critical objectives for a child and the *Critical Point of Instruction Determination Form* provided by MDE to document a child's need for ESY services due to a critical point of instruction.

Extenuating Circumstances

When developing the IEP for a child, the IEP Committee must consider any extenuating circumstances in addition to regression-recoupment or a critical point of instruction. *Extenuating Circumstances* are defined as special circumstances that would significantly jeopardize the child's receipt of benefit from his/her educational program during the regular school year without the provision of ESY services. The IEP Committee must provide a justification based on the need to mitigate the negative impacts of a significant break in services.

In cases such as these the IEP Committee must use all available data, their disability knowledge, their knowledge of the child, and their professional judgment to determine the child's need for ESY services. The IEP Committee will use the *Extenuating Circumstances Documentation Form* provided by MDE to document the child's special circumstances and the justification for the provision of ESY services.

Planning of Extended School Year Services

The planning for ESY is based on the decision by the IEP Committee and must ensure the services to be provided are individually developed to meet the requirements of FAPE and LRE. The planning must include decisions concerning the selection of goals and objectives for the ESY services and the methods for delivering services including the frequency, duration, setting, and personnel. ESY goals/objectives and services are recorded in the ESY section of the IEP.

IEP Committee Composition for Making ESY Decisions

The IEP Committee which determines the need for ESY services and plans the specific ESY services to be provided must include:

- The parent;
- The child, if appropriate;
- At least one of the child's special education teachers;
- At least one of the child's regular education teachers; and
- The local education agency representative.

Other participants who may participate in planning ESY services include, as appropriate:

- The child's speech-language therapist;
- The child's occupational therapist;
- The child's physical therapist;
- A behavior specialist;
- A counselor; and
- The teacher who will provide ESY services.

Designing ESY Programs

In designing the ESY services for the child, the IEP Committee must consider the child's educational needs according to the qualifying criteria (i.e., Regression-Recoupment, Critical Point of Instruction, or Extenuating Circumstances). Based on these needs, the IEP Committee then selects the goals and objectives for the child. The goals and objectives developed for ESY may include some but usually not all of the goals and objectives listed during the school year. Furthermore, the goals and objectives should be related to high-priority needs. For example, the IEP Committee may determine a child with academic, behavioral, and communication goals during the school year only needs ESY services for his behavioral and communication goals.

Once the goals and objectives are determined, the IEP Committee determines the services necessary to ensure a FAPE. The IEP Committee must determine when, where, how much, and by whom services will be provided. Related services may be needed as well. For example, transportation may be one of the ESY services determined to be necessary for the child to participate in the program.

Implementation of Extended School Year Services

ESY Service Provision

WCSD will ensure any ESY services recorded on the IEP are provided as written including the:

- Type(s) of service(s) to be provided;
- Location of the service(s), consistent with the child's LRE;
- Frequency of service(s), including the number of days and amount of time per day; and
- Duration of service(s), number of weeks and beginning/ending dates.

LRE and ESY Service Provision

WCSD provide ESY services in the child's LRE. ESY services may be offered in the same physical site as summer school programs to allow for meaningful interaction with same age nondisabled peers; however, public agencies are not required to create new summer programs for nondisabled peers as a means of providing ESY services to children with disabilities in integrated programs. If the public agency does not provide services for its nondisabled children, the IEP Committee must consider traditional and non-traditional approaches to achieve LRE.

Evaluation of Extended School Year Services

The effectiveness of ESY services must be monitored and reported to parents regularly. The IEP Committee will typically select existing goals or STIO/Bs to be the focus of ESY services; however, the IEP Committee may determine the child needs to master a new goal or objective to be able to master or maintain the critical skill identified as the basis for the ESY determination. Only when new goals or objectives are required to master or maintain a critical skill may the IEP Committee write a new goal and/or objective to be addressed during ESY implementation.

Monitoring Child Progress during ESY Service Provision

Service providers must ensure that they are providing effective services and strategies to meet the individual needs of each child. Measurement of progress must be entered on the ESY services page of the child's IEP using the same codes for Report of Progress, Progress towards Annual Goal and Reason for not meeting the Goal. Progress reports must be disseminated to parents at the intervals specified on the IEP. Effectiveness of the ESY services for each child should be reflected in the match between the needs of the child and the services provided as well as the child's progress toward meeting the ESY service goals. The overall effectiveness of the program provided to all children should be examined to assist the agency in future planning. Program effectiveness is evaluated from both the individual child's progress as well as the entire program.