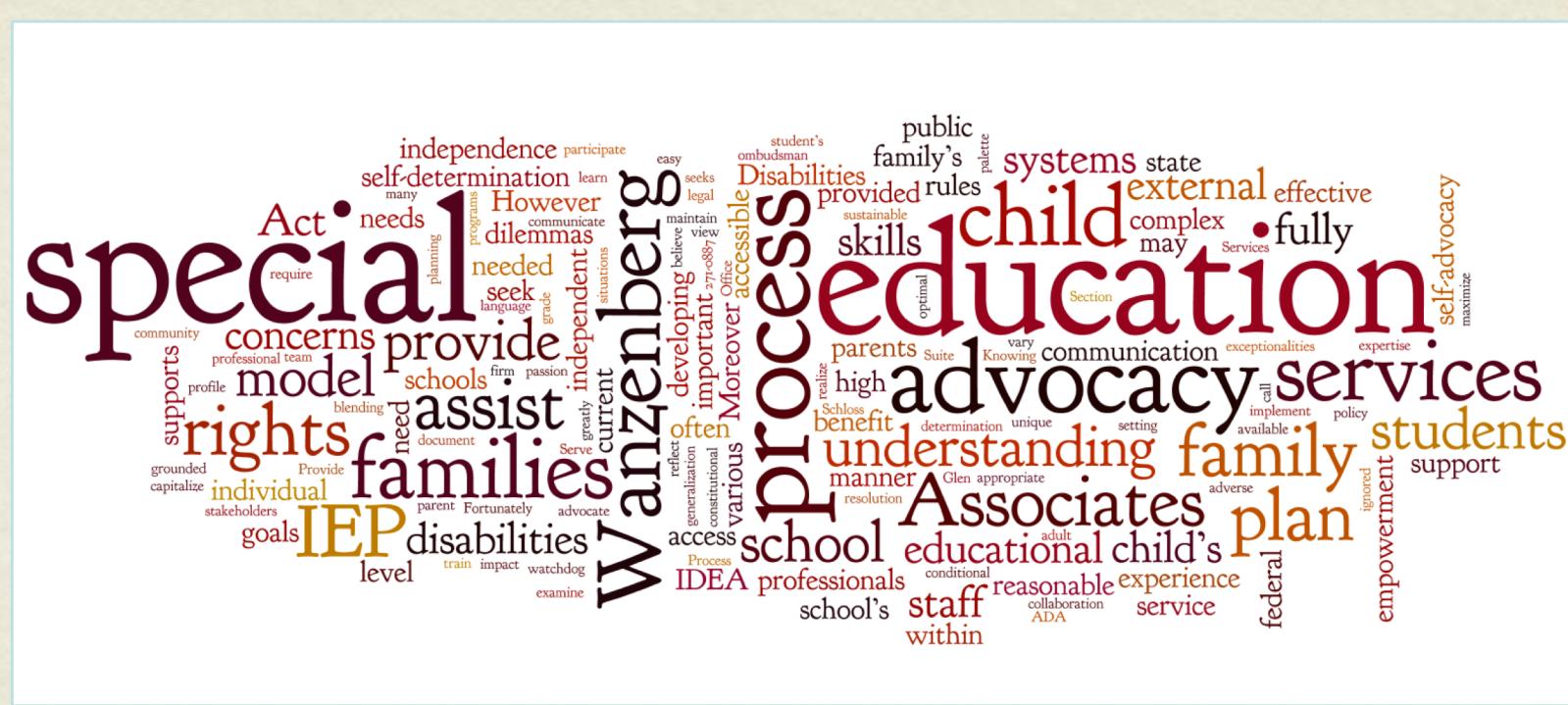


Navigating the School System: Ways to Get Your Child Services



A Presentation to The 2019 Parent Empowerment Workshop by Dianne Thornburg, M.A., M.S.Ed. and Stacy Onak Wade B.S.Ed., M.S.Ed Educational Consultants Wanzenberg & Associates

www.iepguardians.org

Overview of Today's Presentation

- Our background as special education and general education administrators and –now-- lay advocates
- Our practice overview: lay advocacy, educational consultation, and executive skills coaching
- Ground rules for questions and confidential info
- We offer free consultations to family up front to ensure our services are a good match
- What we plan to cover today: Brief review of rules and regulations governing Individual Education Programs (IEPs), tips to enhance communication with school teams and also to build the record to support effective programming
- Presentation will be available online at www.iepguardians.org under “Presentations”

Special Education Lingo

- FAPE
- LRE
- RTI/MTSS
- FBA/BIP
- MDR
- AYP
- ISBE
- AT
- OCR
- PWN

<http://dredf.org/special-education/special-education-resources/special-education-acronyms-and-glossary/>

Navigating the “Black Hole”

- Prior to entitlement/identification
- Do you suspect something is not right with your child's educational progress?
- We've come to trust a parent's “*gutteral instinct*”
 - Parents are always –holistically– a child's most effective advocate



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What areas do schools have a responsibility to serve?



- “Fair game” for services from the school (aka, Domains)
- **Academic Achievement:** standardized and authentic data supporting academic needs across all areas of instruction
- **Functional Performance:** when the *wheels hit the pavement* in the school setting; skill or performance deficits in regulation and attention
- **Cognitive Functioning:** how the child takes in, understands, and expresses information
- **Communication:** articulation, expressive/receptive language, pragmatic language, fluency
- **Health:** current diagnoses or needs impacting learning
- **Hearing/Vision:** all students in Illinois screened at least once a year; perceptual disabilities
- **Motor:** coordination, mobility, strength/endurance, and physical accessibility needs
- **Social Emotional:** adaptive behavior, school based relationships, coping skills needs

INITIATING SCHOOL SUPPORTS



- We should be monitoring more than just quarterly grades in the report card
- Most school districts benchmark all students, three times a year in reading, math, and --in some cases-- writing
- Typical school capacity is emphasis on screening students who are significantly discrepant from district peers
- Parent teacher conferences are important qualitative data source
- Standardized testing (State and district level assessments)

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USING OUTSIDE EVALUATIONS EFFECTIVELY *

The DOMAIN meeting is a non-IEP meeting where the referral questions are determined

It is --pound for pound-- the most important meeting you can participate in!

PARENT/GUARDIAN CONSENT FOR EVALUATION Identification of Needed Assessments					
This form must be completed by the IEP Team					
DOMAIN	RELEVANT		EXISTING INFORMATION ABOUT THE CHILD	ADDITIONAL EVALUATION DATA NEEDED	SOURCES FROM WHICH DATA WILL BE OBTAINED
	YES	NO			
Academic Achievement Current or past academic achievement data pertinent to current educational performance.	<input type="checkbox"/>	<input type="checkbox"/>			
Functional Performance Current or past functional performance data pertinent to current functional performance.	<input type="checkbox"/>	<input type="checkbox"/>			
Cognitive Functioning Data regarding cognitive ability, how the child takes in information, understands information and expresses information.	<input type="checkbox"/>	<input type="checkbox"/>			
Communication Status Information regarding communicative abilities (language, articulation, voice, fluency) affecting educational performance.	<input type="checkbox"/>	<input type="checkbox"/>			
Health Current or past medical difficulties affecting educational performance.	<input type="checkbox"/>	<input type="checkbox"/>			
Hearing/Vision Auditory/visual problems that would interfere with testing or educational performance. Dates and results of last hearing/visual test.	<input type="checkbox"/>	<input type="checkbox"/>			
Motor Abilities Fine and gross motor coordination difficulties, functional mobility, or strength and endurance issues affecting educational performance.	<input type="checkbox"/>	<input type="checkbox"/>			
Social/Emotional Status Information regarding how the environment affects educational performance (life history, adaptive behavior, independent function, personal and social responsibility, cultural background)	<input type="checkbox"/>	<input type="checkbox"/>			

REFERRAL QUESTIONS WHICH SHOULD DRIVE THE EDUCATIONAL PROCESS FOR STUDENTS WITH BEHAVIORAL NEEDS

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- What are the student's strengths? What appear to be the student's areas of deficit?
- Do we have sufficient information about each deficit area?
- Is there sufficient assessment in all recommended domain areas?
- Does our assessment include both formal and informal assessment tools?
- Does the information gained from the formal assessment support what is seen in the informal assessment results?
- Do we have information from parents on their observations and concerns?
- Are there any unanswered questions in any area?
- Is there conflicting information in any domain?
- Do our results match the behavior(s) reported by parents?
- Has the student been observed by multiple team members in multiple settings?



ACADEMIC DIFFICULTIES: READING

- **Reading Fluency:** how quickly and efficiently a child processes text (with emphasis on building automaticity and expression)

2006 Hasbrouck & Tindal Oral Reading Fluency Data

Jan Hasbrouck and Gerald Tindal have completed an extensive study of oral reading fluency. The results of their study were published in a technical report entitled, "Oral Reading Fluency: 90 Years of Measurement," which is available on the University of Oregon's website, brt.uoregon.edu/tech_reports.htm, and in *The Reading Teacher* in 2006 (Hasbrouck, J. & Tindal, G. A. (2006). Oral reading fluency norms: A valuable assessment tool for reading teachers. *The Reading Teacher*. 59(7), 636-644.).

The table below shows the mean oral reading fluency of students in grades 1 through 8 as determined by Hasbrouck and Tindal's data.

You can use the information in this table to draw conclusions and make decisions about the oral reading fluency of your students. **Students scoring 10 or more words below the 50th percentile using the average score of two unpracticed readings from grade-level materials need a fluency-building program.** In addition, teachers can use the table to set the long-term fluency goals for their struggling readers.

Average weekly improvement is the average words per week growth you can expect from a student. It was calculated by subtracting the fall score from the spring score and dividing the difference by 32, the typical number of weeks between the fall and spring assessments. For grade 1, since there is no fall assessment, the average weekly improvement was calculated by subtracting the winter score from the spring score and dividing the difference by 16, the typical number of weeks between the winter and spring assessments.

Grade	Percentile	Fall WCPM*	Winter WCPM*	Spring WCPM*	Avg. Weekly Improvement**
1	90		81	111	1.9
	75		47	82	2.2
	50		23	53	1.9
	25		12	28	1.0
	10		6	15	0.6
2	90	106	125	142	1.1
	75	79	100	117	1.2
	50	51	72	89	1.2
	25	25	42	61	1.1
	10	11	18	31	0.6

*WCPM = Words Correct Per Minute

**Average words per week growth

www.readnaturally.com

Grade	Percentile	Fall WCPM*	Winter WCPM*	Spring WCPM*	Avg. Weekly Improvement**
3	90	128	146	162	1.1
	75	99	120	137	1.2
	50	71	92	107	1.1
	25	44	62	78	1.1
	10	21	36	48	0.8
4	90	145	166	180	1.1
	75	119	139	152	1.0
	50	94	112	123	0.9
	25	68	87	98	0.9
	10	45	61	72	0.8
5	90	166	182	194	0.9
	75	139	156	168	0.9
	50	110	127	139	0.9
	25	85	99	109	0.8
	10	61	74	83	0.7
6	90	177	195	204	0.8
	75	153	167	177	0.8
	50	127	140	150	0.7
	25	98	111	122	0.8
	10	68	82	93	0.8
7	90	180	192	202	0.7
	75	156	165	177	0.7
	50	128	136	150	0.7
	25	102	109	123	0.7
	10	79	88	98	0.6
8	90	185	199	199	0.4
	75	161	173	177	0.5
	50	133	146	151	0.6
	25	106	115	124	0.6
	10	77	84	97	0.6

ACADEMIC DIFFICULTIES: READING

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- **Reading Comprehension:** gathering meaning from decoded text
- How do teams identify a problem with reading or math?
 - AIMSWEB, NWEA, MAP, MAZE, CBM
 - Comparison against peers in district, and to some degree national norms
 - There's no magic number, but less than 25th percentile warrants intensive study
- What do teams do when they think there is a problem with reading or math?

ACADEMIC DIFFICULTIES: AFFECTIVE DOMAIN

- Students who maintain social or emotional needs which impact their ability to learn and progress, academically
- How do teams identify and intervene when a social emotional difficulty is identified?
- A diagnosis --by itself-- is insufficient to generate a support plan
- Covers both internalized and externalized (or a combination of the two) needs, but must manifest themselves in the school day
- Typically, observational and longitudinal (social history) data is used to develop a picture of the students functioning
- Standardized rating scales (teacher, parent, and often student report)
- School counseling services (social work, guidance counselor, school psychologist) are often brought to bear BEFORE any plan is developed
- While targeted behaviors can be charted, affective needs less sturdy in the RTI process due to emphasis on more qualitative aspects of identification



ACADEMIC DIFFICULTIES: FUNCTIONAL PERFORMANCE

- Functional Performance: what is it?
- Access-based concept: can the student effectively and independently navigate the school environment by applying age-appropriate skills? If not, what barriers exist which can be mitigated by school assistance?
- Layman's definition: Can students functionally manage the school day without help?
- Examples:
 - Student who is unable to manage time during class periods (locker, socialization, distractions)
 - Student who is unable to effectively attend to certain types of lessons
 - Student who has difficulty in following complex, multi-step directions



ACADEMIC DIFFICULTIES: FUNCTIONAL PERFORMANCE

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Executive Functioning Domains (includes coordinated efforts across domains)

- **Shift**: moving from one activity to another and adapting to various classroom demands in a reasonable time
- **Inhibition**: the ability to stop a target behavior at the appropriate time
- **Emotional Control**: modulation of emotional responses by bringing rational thought and coping strategies to the situation
- **Initiation**: the ability to begin a task independently; generating ideas, responses, problem solving strategies
- **Working Memory**: the capacity to hold info in suspension for the purpose of completing a task
- **Planning/Organization**: the ability to manage current and future demands
- **Organization of Materials**: imposing order on school materials and storage spaces
- **Self-monitoring**: self-examination and active monitoring of student's own progress

ACADEMIC DIFFICULTIES: FUNCTIONAL PERFORMANCE

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Problems resulting from inefficient Executive Functioning skills

- Procrastination and inefficient use of planning opportunities
- Difficulty in adhesion of disparate concepts in writing
- Easily diverted from task by stimuli
- Slow completion of tasks
- Poor modulation of emotional responses
- Impairments with social judgement
- Ineffective model of self-monitoring
- Difficulties in moving from one task to another



ACADEMIC DIFFICULTIES: FUNCTIONAL PERFORMANCE

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- How do teams identify a problem with functional performance?
- How do team tend to address deficits of functional performance?
- Standardized rating scales (Conners, ADDES, BASC, BRIEF) which compare ratings to national norms
- Time on task observations (BOSS, etc.) which examine a students degree of active and passive task orientation against peers
- Teams tend to accommodate rather than address the skill directly
- Data collection, meaningfully explicit and measurable goals are essential due to the “slippery” nature of these behaviors

USING OUTSIDE EVALUATIONS EFFECTIVELY

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- We have observed a relationship between the competencies, initiative, and leadership of a peak-performing school psychologist or speech and language therapist and the value of a school based evaluation
- Some districts in Illinois lean heavily on the expertise of program specific consultants (e.g., Autsim, Behavioral Specialist, etc.) through the special education cooperative networks, but this role can be compromised by the capacity for a district or school to effectively implement the recommendations
- As a general rule, school evaluations tend to be less confident in the actual recommendations for intervention, and tend to be utilized for purposes of eligibility only
- We typically recommend that families seek out the objective guidance of a private evaluator with experience in a wide range of your child's needs, who will also assist --if asked-- to present and consult with the team on appropriate peer reviewed methodologies for students
- Private evaluations may be risky and require good external advocacy to be effective: school districts are only required by law to consider the evaluation (not to necessarily implement the recommendations)
- It is essential that the initial evaluation include a broad range of measures to rule out all known areas of; **beware of an initial evaluation, re-evaluation, or exit evaluation that is simply a records review**
- RESPONSE TO INTERVENTION (now referred to as Multi-Tiered Systems of Support) procedures are not required by law for students with suspected disabilities OTHER than LD and Emotional Disturbance (e.g., Autism, Other Health Impaired, etc.).

ACADEMIC DIFFICULTIES: HEALTH NEEDS

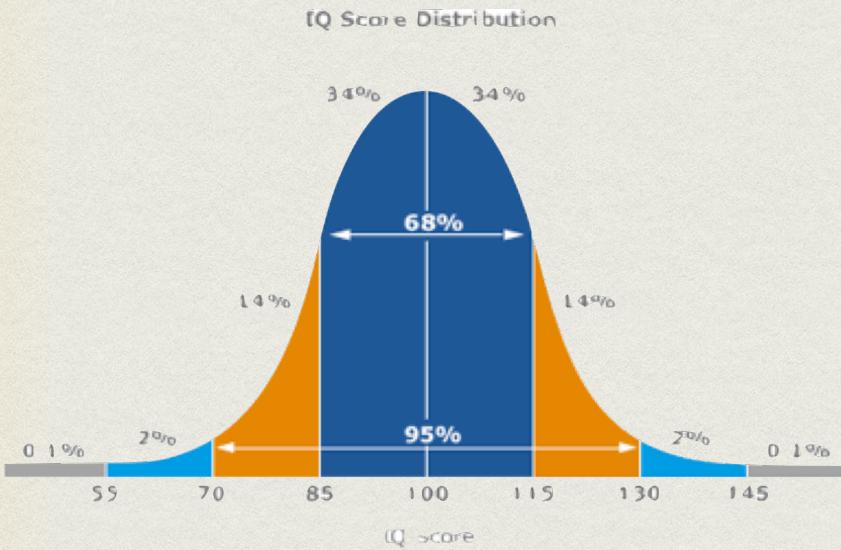
- Again, we are moving away from an educational system that provides specific services based on a diagnosis or script: remember that a clinical diagnosis is typically NOT sufficient to get “the ball rolling”
- Working closely with the school nurse or school health aide to document diagnosis, history, medication, and in-school and extracurricular treatment modalities is critical
- There must be marked, observable, and substantial impairment which impacts learning for a medical diagnosis to inform a support plan
- Tendency is for accommodation of needs as opposed to individualized instruction, thus the prevalence of 504 plans (aka, ADA “life function” plan) that have no provisions for individualized instruction to teach coping skills



ACADEMIC DIFFICULTIES: COGNITIVE NEEDS

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- Mental Retardation, Eduably Mentally Handicapped, Trainably Mentally Handicapped, Cognitively Disabled, have given way to current nomenclature, “Intellectual Disabilities”
- ISBE currently recognizes Cognitive Disabilities
- The only domain that requires norm referenced, standardized cognitive (aka, “IQ”) testing
- Some districts administer cognitive tests (typically as part of their gifted/accelerated screening process)
- Classic categories within this area include Perceptual Reasoning (left hemisphere), Verbal Comprehension (right hemisphere), Processing Speed, and Working Memory
- True cognitive deficits require standardized assessment **and** adaptive rating scales to provide a comprehensive picture of where the deficits impact functioning



ACADEMIC DIFFICULTIES: MOTOR AND SENSORY NEEDS

- How do teams identify and intervene?
- Team based referral to Occupational Therapists and Physical Therapists
- Observation based
- Norm-referenced tests (VMI)
- Can include assessment or analysis of sensory processing needs (aka, “sensory diet”) that may impact learning



ACADEMIC DIFFICULTIES: SPEECH AND LANGUAGE

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- Covers difficulties in expressive (output), receptive (input), pragmatic (social), and articulation (organic) language usage
- Largest portion of school-based services are considered highly remediable (primary school intervention: articulation)
- Listening comprehension and oral communication are functional skills
- Typically norm-referenced need
 - How do schools identify and address S/L needs?

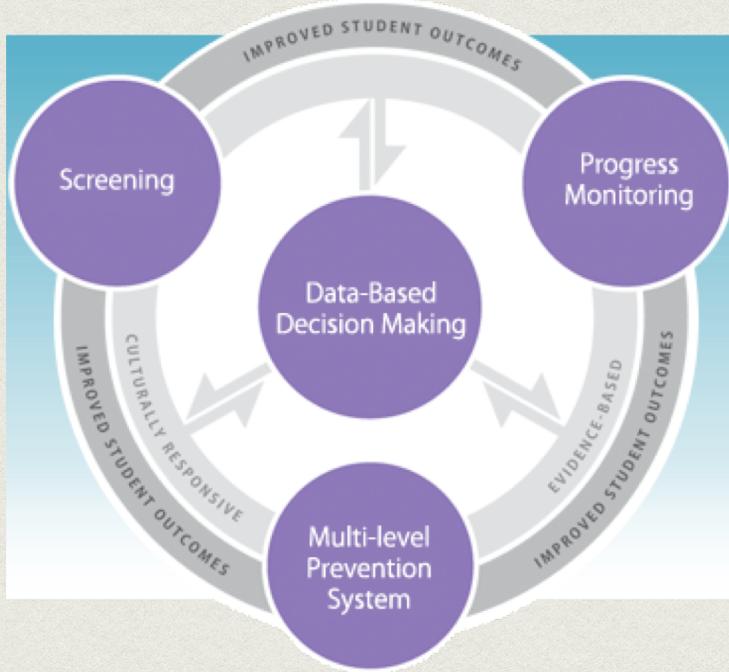
ACADEMIC DIFFICULTIES: HEARING AND VISION

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- Severe perceptual disabilities are among the lowest incidence of all disabilities
- State requires yearly screenings for all children
- Discrepancies typically refer parents to pediatrician or hearing/vision specialist
- Largest percentage of need involves simple accommodation; more pervasive need involves itinerant teacher support
- How do teams typically intervene?



SO... WHAT DO SCHOOLS DO WHEN THERE IS A PROBLEM?



- Referrals for school problems are typically internally driven (from within the school)
- Referrals for problem solving and intervention can also come externally from caregivers and clinicians
- Schools and families must first agree that there is a need before the scope and sequence of remedies is applied
- The natural response is for schools to gradually escalate interventions, and reflect on data as to whether the interventions are working

KNOW THE DIFFERENCE BETWEEN ACCOMMODATIONS AND MODIFICATIONS



ACCOMMODATIONS and
MODIFICATIONS include
the following domains:

- Pacing
- Environment
- Presentation of Material
- Materials and Equipment
- Supplementary Grading
- Assignments
- Reinforcement/Follow through
- Testing Adaptations

KNOW THE DIFFERENCE BETWEEN ACCOMMODATIONS AND MODIFICATIONS

Accommodations are provisions made in how a student accesses and demonstrates learning.

These do not substantially change the instructional level, the content or the performance criteria. The changes are made in order to provide a student equal access to learning and equal opportunity to demonstrate what is known.

Accommodations appropriate for school support systems include adjustments to the identified domains.



KNOW THE DIFFERENCE BETWEEN ACCOMMODATIONS AND MODIFICATIONS

Modifications: Substantial changes in what a student is expected to learn and demonstrate. These changes are made to provide a student the opportunity to participate meaningfully and productively in learning experience and environments. Modifications include changes in instruction level, content, and/or performance criteria. When provided on a daily basis, these approaches are generally reserved for students with identified learning needs who are eligible for special education.



KNOW THE DIFFERENCE BETWEEN ACCOMMODATIONS AND MODIFICATIONS

*Substantial modifications can impact a parent and team's ability to effectively monitor performance and evaluate if interventions are actually working!

*Modifications should be focused and specific: the IEP should reflect --to the greatest degree practicable-- what and why major modifications should be implemented.

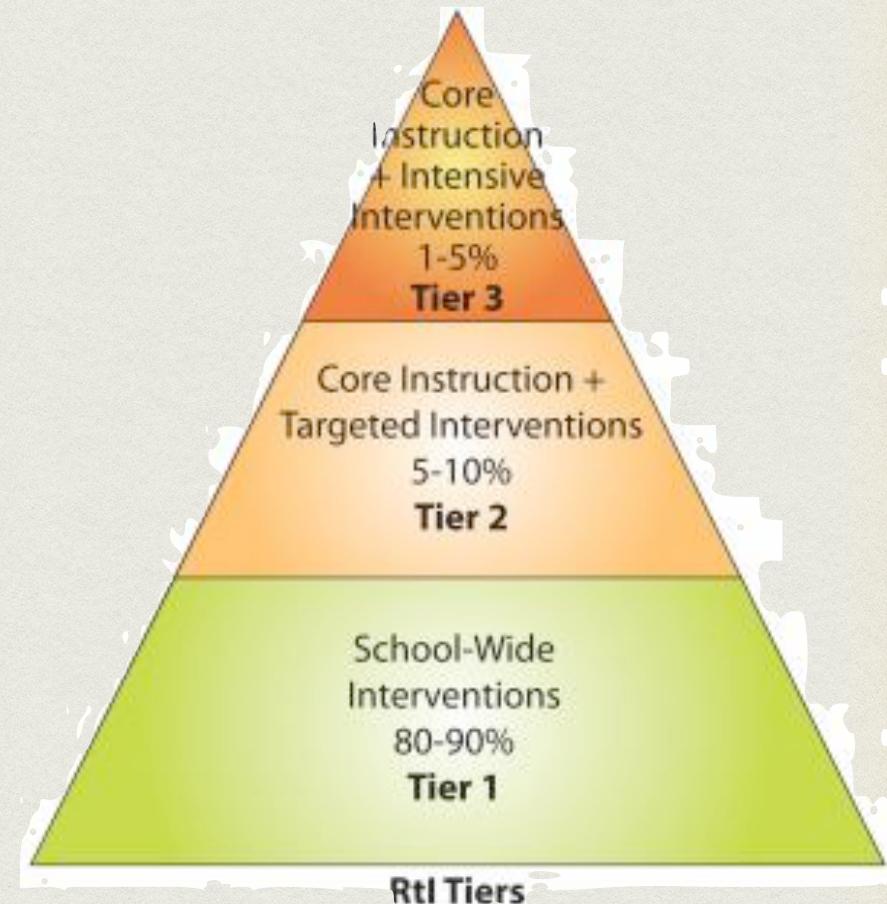
*Avoid the cosmetic convenience of modifications (particularly with grades)

*Any substantial curriculum modifications should follow a thoughtful and organized process.



WHAT IS RESPONSE TO INTERVENTION (RTI/MTSS)?

- A series of formal and informal levels of intervention that seeks to address performance discrepancies by differentiating instruction WITHOUT the need for formal identification (e.g., IEP, 504 plan)
- A system within each district is required by law
- Students must demonstrate data-driven “response” from intervention, or more intensive intervention is warranted
- Excels at targeting large, general populations who are below standards
- Interventions are provided in Tiers



PARENT RIGHTS AND RTI/MTSS

- No specific rights exist for parents/guardians
- There is no specific accountability or recourse for errors, omissions, or delays. However, ISBE requires/recommends Tier 2 interventions are monitored at least twice a month, and Tier 3 intervention are monitored at least four times a month
- Most problem solving teams operate without active parent involvement. Best practice suggests that parents/guardians are part of key progress monitoring meetings
- Caregivers should take the initiative to ask:
 - What type of data will be collected?
 - How will the data be collected?
 - How frequently will we monitor progress?
 - What strategies will be utilized to address the need?
- Monitor qualitative information in parent conferences, disciplinary incidents, and feedback on assignments



WHAT IF RTI/MTSS IS NOT SUFFICIENT TO MEET THE NEEDS OF MY CHILD?



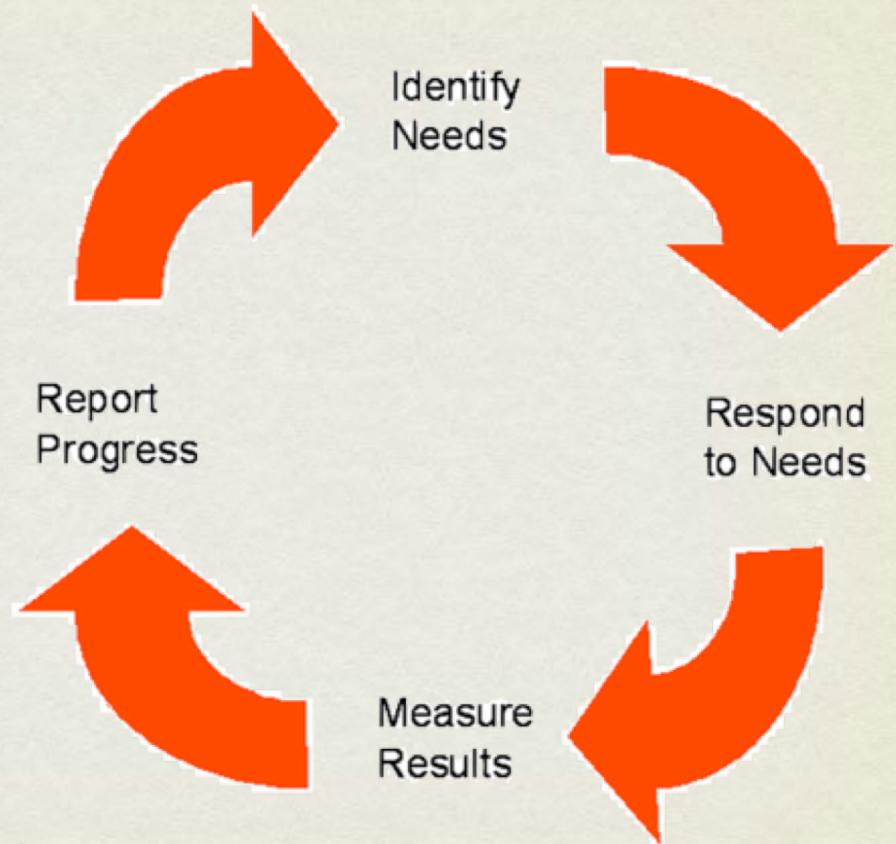
- While --in Illinois-- RTI/MTSS may be used as part of the screening and identification of students with learning or emotional disabilities, nothing in the law absolves the district from digging deeper for formal entitlement if a disability or disabilities exist or are suspected
- Parents, guardians, caregivers, or clinicians may initiate requests for more formal entitlement under a section 504 plan or an Individualized Education Program (IEP)
- Maintaining documentation or suspicion of a disability is the first step in the process

How to begin...

- Start the documentation process early
- Maintain logs and journals of all school contact (i.e., archive and access past email correspondence; follow up after informal meetings with recap of discussion, etc.)
- Be clear and concise with your needs statement: *“Johnny is struggling with understanding double digit math; he cannot write a paragraph without assistance; he complains nightly about attending school and has experienced bullying from students on the playground on [dates].”*
- In matters where a disability is suspected, utilize prior written notice to ensure schools are responding in a timely manner to your requests.
- If a case study evaluation is needed, submit this request in writing to building level administrator. (Our advice: take two executed copies; time stamp both; leave one with administration; follow up after presentation to discuss next steps)

Creating a timeline and chronology to develop a illustration of the *progression of need*

- Maintain a log of all email, phone calls, conferences (both formal and informal); outline outcomes and follow up items; determine if follow up was conducted
- Maintain a list of all outside providers, including therapists, tutors, physicians, and other professionals who maintain a “special understanding of the child”
- 10 school days (less any non attendance days) is a general timeframe for school responses.
- Schools sometimes need to be “drawn” into data driven discussion to persuade them that a need may be relevant for entitlement under IDEA
- Prior knowledge of a disability changes the landscape and discussion



How to follow up...

- If not getting response/answers from school staff, learn the chain of command and how to appropriately escalate
- Request a meeting with all relevant school staff to address your concerns.
- Request to prior provision of the following data:
 - Attendance
 - Discipline/behavior
 - Grades over time
 - standardized data/progress monitoring/benchmarking and any supporting anecdotal records regarding academic achievement
- If presenting outside data, give school 10 school days for “full and thoughtful review” of findings
- If a need area is validated, request that a “research-based intervention” be put in place and progress monitored (RTI/MTSS)
- Request a follow up meeting in 8 weeks to review data and effectiveness of intervention
- Ask for weekly or bi-weekly progress updates on intervention
- If —after 8 weeks— adequate progress is not being made, consider requesting a case study evaluation
- If progress is evidenced, discuss how intervention will be sustained

IEP OR 504 PLAN? COMMON CHARACTERISTICS

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- Both IEP's and 504 plans require the presence of a disability that impacts learning
- Both IEP's and 504 plans require some degree of "adverse effect" or harm if the disability is not mitigated with school support
- Both IEP's and 504 plan maintain parent/guardian protections under state and federal law
- Both IEP's and 504 plans can include accommodations and related services
- Both IEP's and 504 plans have other protections under the law including procedures for discipline, re-evaluation, and integrity of service
- Both IEP's and 504 plans require the district to inform you in writing of your rights under each scenario
- Both IEP's and 504 plans operate under the ethic of Free and Appropriate Public Education (FAPE)

IEP OR 504 PLAN? DIFFERENCES

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- IEP's provide educational benefit, through an individualized instruction under the concept of a "free and appropriate public education" (FAPE), "least restrictive environment" (LRE) at no cost to families
- There is a more comprehensive set of options for placement under an IEP, and is far more descriptive and prescriptive than a 504 plan
- IEP's and 504 plans differ in how dispute resolution is handled (Due-Process)
- IEP's maintain a comprehensive list of timelines for requests, meetings, evaluations, dispute resolution, and prior written notice of any changes to the plan
- IEP's require clear and measurable goals for service, and must be reviewed at least annually, but also in staffing, as a parent/guardian requests

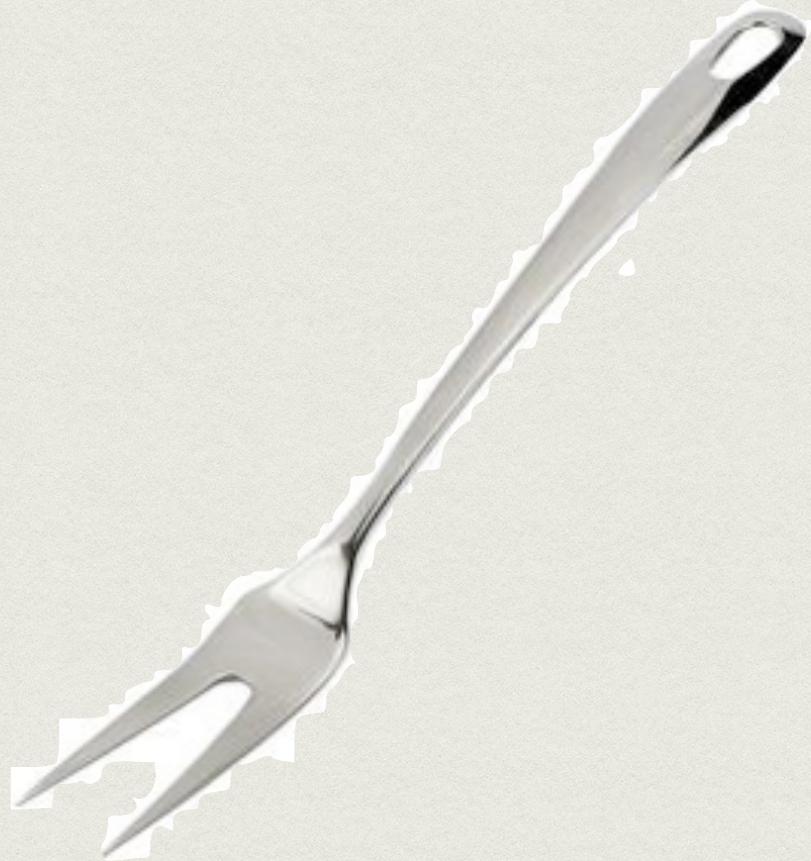
IEP OR 504 PLAN? DIFFERENCES (CON'T)

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- IEP teams must include certain specialists, including individuals that the family invites with “special understanding” of the child’s needs
- 504 plans are General Education documents that emphasize the need for reasonable accommodations and “access” to the general education environment (Americans with Disabilities Act)
- Section 504 plans are unfunded federal mandates and no monies are directly associated with service provision; IEP’s are funded by a local, state, and federal partnership
- IEP’s may provide these services and protections up to the day before he/she turns 22

TWO PRONG APPROACH TO ELIGIBILITY FOR SPECIAL EDUCATION

- 1.** Student must have an established disabling condition or handicap that impacts school performance
- 2.** The student requires specialized instruction (content, methodology, instructional strategies, etc.) to compensate for this disability



THE “MINIMALIST” IEP: THE BARE BONES

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- Minimum components of an IEP:
 - **Baseline data** on how the student functions in the school setting (PLOP)
 - Statement of **annual goals** in various goal areas (academic, social, communication, behavioral, etc.)
 - Conditions for **progress monitoring** towards attainment of the goals
 - A descriptive statement of what the school will provide to **compensate for the student’s attachment needs in school**. This statement can include:
 - Specialized teaching (including setting, frequency, and other factors)
 - Specialized related services to assist student (speech and language services, social work, transportation, occupational therapy)
 - The amount of time the child will be in a specialized program (or placement) vis-a-vis non-disabled peers
 - Statement of the **degree to which the student will be educated with non-disabled peers** with supporting rationale
 - **Accommodations and modifications** to standardized and classroom assessment
 - Initiation dates and duration of plan
 - At age 14.5 in Illinois, a plan to develop skills for **transition** to the adult world

THE “BEST PRACTICE” IEP

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- A comprehensive evaluation which has ruled out all possible disabilities, including those which may be primary or secondary to the child's learning difficulties
- In many cases, the level of data and confidence of recommendation required for an exemplary IEP for students with attachment needs requires the services of a third party evaluator (aka, a “private evaluation”) which may or may not be covered under a family’s insurance. In some cases, this can be provided at no expense to families (“IEE at public expense”)
- A thorough understanding of functional performance and how a holistic view of a child’s skill deficits tease out into the classroom and other school settings
- Ample provisions for communication, including --as appropriate-- a method of frequent home to school communication

THE “BEST PRACTICE” IEP (CONT)

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- Solid communication between the child's external network of caregivers (SLP, OT, therapist etc.) and the school team
- Meaningful, observable, and practical goals written in behaviorist style (current levels of performance, subject, intended behavior, treatment, setting, frequency, and duration)
- Frequent reflections on data, with adjustments to intervention plan as appropriate
- Emphasis on teaching of skills as opposed to accommodation/modification
- If applicable, well-informed functional analysis of behavior and a dynamic behavioral intervention plan
- Intensive support for acquisition of daily living skills, including access to community and employment

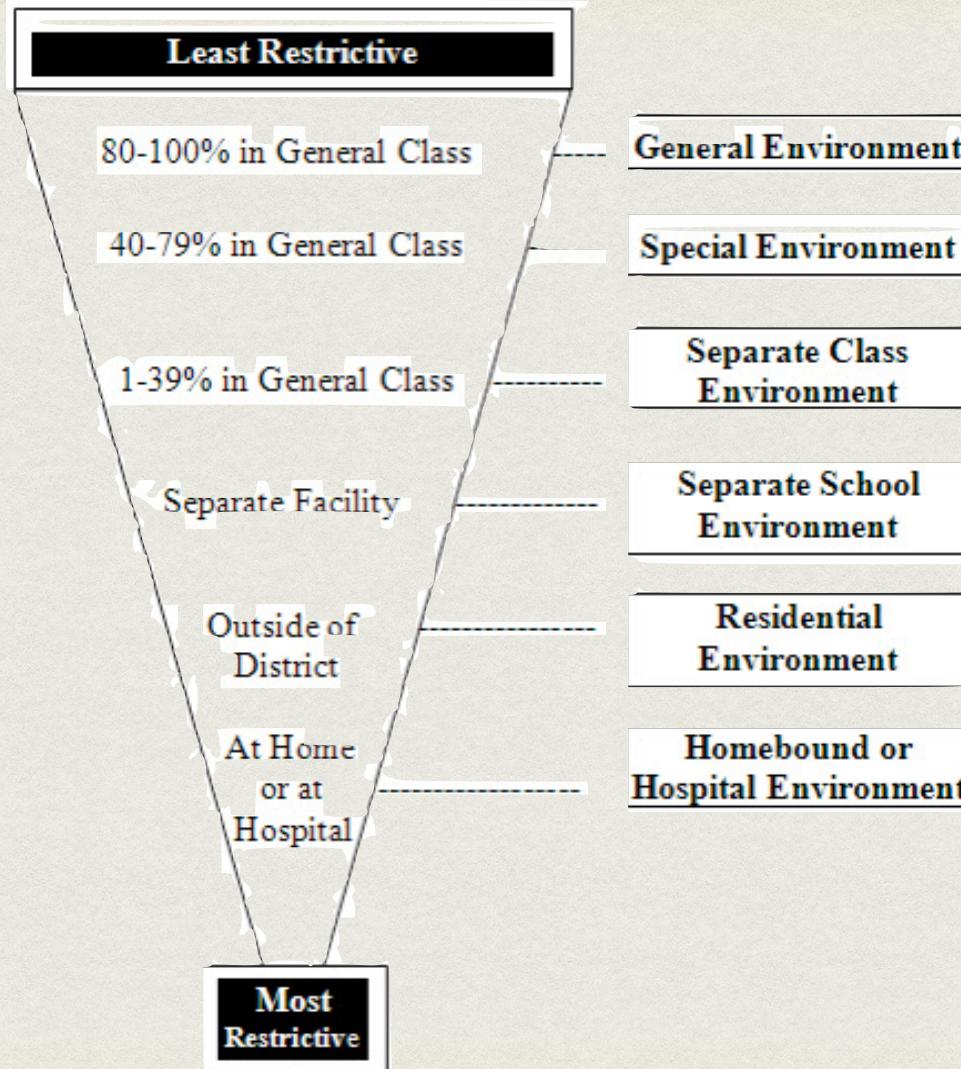
CREATIVE USE OF YOUR RIGHTS UNDER IDEA *

- IDEA provides for district-subsidized staff training if needed to fully implement the IEP
- Use of prior written notice, if used judiciously, can iron out ambiguities in the record
- Parent/guardian comments and statements can be integrated by submission so that the record accurately reflects your position
- Districts are required to consider (but not necessarily accept) outside data. If this data is not accepted, the district must provide some rationale as to the refusal and what methods the district will employ to address the need
- While parent/guardians have a legal weakness in arguing for specific methodologies, families can target monitoring for “peer-reviewed, practicable, and effective methodologies”. If these methodologies are not effective over time, requests for compensatory education may be constructed

CREATIVE USE OF YOUR RIGHTS UNDER IDEA (CON'T)

- There are grave sanctions for districts who ignore their responsibilities for a struggling disabled child, by failing to identify the need. Once the district has “knowledge” of a disability or specific learning need, they have a responsibility to study and possibly intervene
- Districts cannot pre-determine placement before an IEP meeting, and must consider any request for a more therapeutic placement
- IDEA does provide clear steps for dispute resolution that may not involve an attorney

PLACEMENT AND THE LRE CONTINUUM



COMMUNICATION AND THE IEP PROCESS

- Virtually all of the referrals we receive involve some degree of communication breakdown between home and school
- Many parents perceive changes or shifts in service delivery that are not adequately explained. Many parents are confused by many school staff approaches to foster independence when a skill is not consistently generalized between home and school
- Home to school journal may be appropriate for many students
- Consent for release of information should be established (and even re-established) at the onset of every school year to ensure third parties who work with the child are a functional part of the intervention team
- Translating clinical terms to educational terms is an important skill to develop and often warrants external advocacy

RESOURCES

- www.Wrightslaw.com
- <http://isbe.net/spec-ed/>
- <http://www.fetaweb.com/free.htm>
- <http://www2.ed.gov/policy/speced/guid/idea/index.html>
- <http://ies.ed.gov/ncee/wwc/>
- <https://sec1.isbe.net/sedsinquiry/dueprocessdecisions.aspx>
- Copy of todays presentation available at www.iepguardians.org under “Presentations”