



BelovED Community Charter School

**Special Education Services
Hudson County**

Book: I RESPONSE TO INTERVENTION (I&RS)

Book: II SPECIAL POLICIES AND PROCEDURES
(SP&P)

Book: III SPECIAL EDUCATION HANDBOOK

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RESPONSE TO INTERVENTION (I&RS)

BOOK: I

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The Basics of I&RS and RTI

The Ins and Outs of Intervention

The term intervention is used when teachers and other school personnel study and creatively problem solve educational issues that place a student at risk for school failure. Using a team approach that involves parent(s)/guardian(s), the I&RS team carefully considers the needs of students who are identified as “at-risk” for learning, behavior, and health problems. By its nature, intervention is a process, and therefore, student I&RS plans are revisited and modified.

In most cases, a successful intervention plan proves to be a powerful method tool for the at-risk student and it is preferable to special education referral.

In some cases, intervention is not successful and a referral for special education is deemed necessary. Even in these cases, the prior period of intervention is valuable. Prior intervention will illustrate that a referral is appropriate, and it will help the team to create goals and to identify necessary accommodations and modifications during the creation of the IEP.

What is I&RS?

The Intervention and Referral Services (I&RS) process is a way for general education teachers or specialists to assist a student who is identified as making minimal academic and/or emotional progress in the general education setting. I&RS is NOT intended to replace traditional methods or resources for helping students to function effectively in school.

I&RS Team Purposes:

- Identify students of concern and then plan and provide appropriate intervention for those students within the general education community
- Involve parents/guardians in the development and implementation of the I&RS plans
- Review and assess the effectiveness of the services provided in achieving the outcomes identified in the I&RS plan
- Provide professional development to general education staff members who either refer students to I&RS or who assist in providing student supports

What is Response to Interventions (RTI)?

RTI is a student monitoring process that emphasizes pre-referral prevention and intervention. This process allows for early and intensive interventions based on learning characteristics, and it does not wait for children to fail before providing necessary services and supports. RTI stands on the premise that early intervening services can both prevent academic problems for many students who experience learning difficulties and determine which students actually have learning disabilities.

The Three Components of RTI:

1. The use of multiple tiers of increasingly intense interventions (see RTI Three Tiers of Support)
2. A problem-solving approach to identify and evaluate instructional strategies that includes:
 - a. *Problem Identification*: What is the problem we are trying to solve?
 - b. *Problem Analysis*: Why is this problem occurring?
 - c. *Intervention*: How will we solve the problem
 - d. *Evaluation*: Did the intervention work to solve the problem?
3. Integrated data collection and assessment system to monitor student progress and guide decisions at every level

Overview of the I&RS Process

1. Tier 1 and Tier 2 interventions implemented with fidelity and data collected for at least 6 weeks
2. Parent(s)/Guardian(s) notified about behavior/academic concerns
3. Request for assistance form submitted via DeansList
4. Initial I&RS team meeting with teacher(s) (see Appendix B for initial meeting structure)
5. Develop I&RS action plan
6. Classroom observation by an I&RS team member
7. Re-evaluate action plan with I&RS team, teacher(s), and parent(s)/guardian(s) (see Appendix B for follow-up meeting structure) as a
8. Support, monitor and continue the process
9. Problem resolved or referral to the Child Study Team (CST)

For more information about the I&RS process, please refer to “I&RS: From a Teacher’s Perspective.”

CST Recommendation

If the I&RS process exhausts all of the available school based general education interventions with

minimal success, often the student is referred to the CST for a comprehensive evaluation. A comprehensive evaluation includes a social, intelligence and a learning evaluation, as well as additional information to determine if the student is eligible for special education and related services.

A CST evaluation recommendation can come directly from the I&RS team or from the parent(s)/guardian(s) at any time during the process.

What if a scholar has a diagnosis?

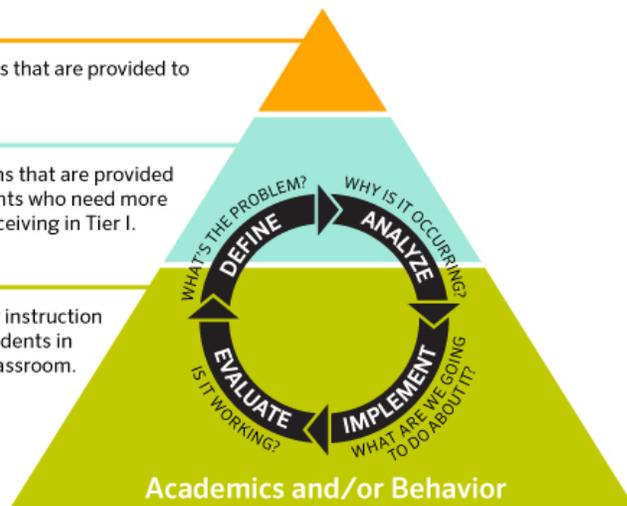
A diagnosis does NOT mean that a scholar is eligible for an IEP. It is worth noting that only an MD or an OD can diagnose ADD, ADHD and Autism. For a scholar to receive special education services, evidence is required to show that the scholar's diagnosis has an academic impact. Academic impact is evaluated based on the scholar's work samples, the scholar's response to implemented interventions, observations, and more.

RTI Three Tiers of Support

TIER 3 refers to the interventions that are provided to individual students.

TIER 2 refers to the interventions that are provided to small groups of students who need more support than they are receiving in Tier 1.

TIER 1 refers to the high quality instruction that is provided to all students in the general education classroom.



Tier 1: High-Quality Classroom Instruction and Group Interventions

Tier 1 refers to high-quality core instruction and addresses the needs of most students. These interventions may include school wide behavioral expectations that are established and taught, and/or positive behavioral supports in classrooms. Tier 1 interventions may also include the teacher presenting information in multiple ways and providing students different options to demonstrate what they have learned.

Tier 1 Interventions should be implemented by classroom teachers first and the corresponding data collection of the results must be tracked and analyzed in DeansLIST. Tier 1 interventions need to be tried for a period of time before they are deemed to be not working. Often a classroom teacher must try several Tier 1 interventions in succession or at one time to ensure fidelity of the intervention. For more examples of Tier 1, 2 and 3 Interventions please or go to the Resource Folder in the Special Education Shared Drive.

Tier 2: Targeted Interventions and Supplemental Supports

Tier 2 interventions includes the core instruction provided in Tier 1 AND supplemental supports and interventions that may be delivered in small-group instruction, delivered in either the general classroom during flexible grouping or centers or during an additional period. When compared to Tier 1, Tier 2 interventions increase in intensity, frequency and duration. Tier 2 interventions are based upon the review of regularly collected data and progress monitoring.

Tier 2 interventions could include pull out for reading or math by a specialist. Additionally, limited, but targeted supports are provided to remediate academic skill deficits and reduce behavior problems to help students succeed in Tier 1.

Tier 3: Intensive Interventions and Comprehensive Evaluation

Tier 3 includes all of the elements practices described in Tiers 1 and 2, AND it is characterized by an increase in the length of time, duration or frequency of the intervention targeted to a student who is not making adequate progress with Tier 2 supports. It is important to note that students may receive Tier 2 or 3 interventions in one content area but not another. Also, students may move in and out of interventions throughout the year.

Intervention and Referral Process: From a Teacher's Perspective

Step 1: Create an RTI Referral on DeansList

A student demonstrates **repeated** academic and/or behavioral difficulty in class. Begin an RTI Referral on DeansList. This will become our database for progress monitoring and documenting interventions. Please make sure that you are documenting *specific, descriptive, observable behavior* (see Appendix A for examples).

The screenshot shows the 'New RTI Referral' form in DeansList. At the top, there are navigation tabs for 'Plans', 'Referrals', 'My Interventions', and 'My Progress Updates'. The 'Referrals' tab is active. The form contains the following sections:

- Student Information:** Three dropdown menus for 'Student', 'Suggested Focus', and 'Trigger Reason'.
- Student Narrative:** A text area with the prompt 'Share key insights about the student. What's going well? What are their strengths?'.
- Problem Identification:** Two text areas with prompts 'What's going on? When is this occurring?' and 'Why do you think this is happening?'.
- Supports To-Date:** A table with three columns: 'What have you tried?', 'For how long?', and 'What were the results?'. The first row is labeled '#1' and has an 'Add Support' button below it.
- Additional Information:** A text area with the prompt 'Please share any additional relevant information about this student.'

At the bottom of the form are two buttons: 'Save as Draft' and 'Submit Referral'.

Step 2: Document Data and Interventions

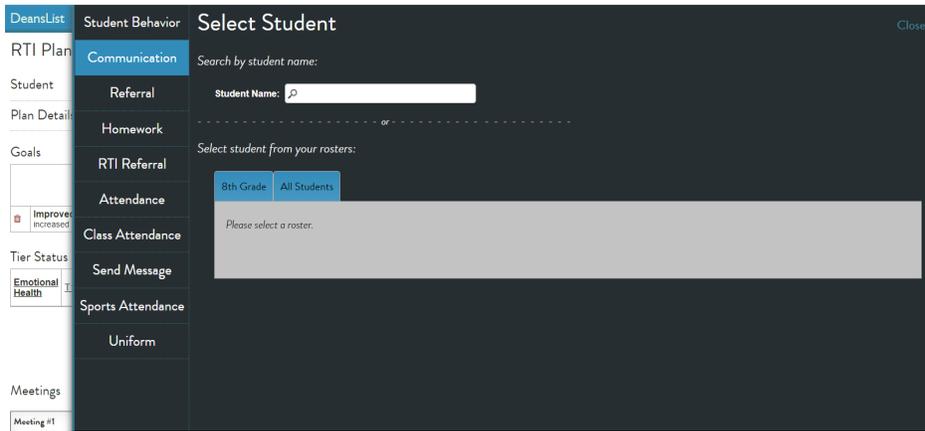
Document data for **at least two interventions tried in class** for **at least 6 weeks** in DeansList. Collect weekly data and document data in DeansList under Progress Update. For intervention ideas, go to the Resource Folder in the Special Education Shared Drive.

The screenshot shows the 'Add Progress Update' dialog box. It contains the following elements:

- Intervention (optional):** A dropdown menu with the text 'Select Intervention...'.
- Progress Update Details:** A large, empty text area for entering details.
- Buttons:** 'Cancel' and 'Save' buttons at the bottom.

Step 3: I&RS Request for Assistance Form and Parent/Guardian Outreach

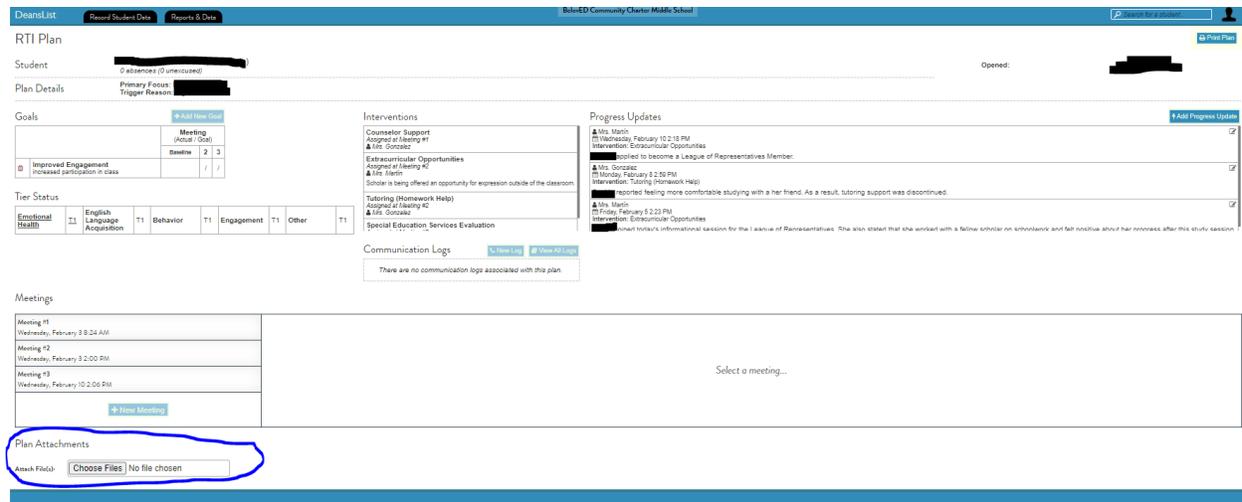
Complete the **I&RS Request for Assistance Form** (see Appendix C) and reach out to the respective family about the scholar's academic and/or behavioral concerns during this initial six-week-intervention period. All communication with the scholar's family is logged in DeansList under Communication.



Step 4: Complete RTI Referral and Request I&RS Team Meeting

Scan and attach the completed I&RS Request for Assistance form to the scholar's RTI Referral in DeansList. Then, email your I&RS point person stating that you have collected at least 6 weeks of data, tried at least 2 interventions in your classroom, and you have completed the I&RS Request for Assistance Form.

Your respective I&RS point person will inform you of the date and time of your meeting with the I&RS team. An additional meeting reminder will be sent out at least one week prior to the meeting.



Step 5: Meet with the I&RS Team

Meet with the I&RS team. Bring at least three samples of scholar's work (if applicable). During the meeting a case manager is assigned. At least one new intervention is proposed and action steps are documented in DeansList under the Meeting section of the RTI plan.

The screenshot displays the DeansList RTI Plan interface. At the top, there are navigation tabs for 'Board Student Data' and 'Reports & Data'. The main content area is divided into several sections:

- Goals:** A table with columns for 'Meeting (Actual / Goal)', 'Score', and 'Status'. The first row shows 'Improved Engagement' with a score of 2/3.
- Interventions:** A list of interventions including 'Counselor Support', 'Extracurricular Opportunities', 'Tutoring (Homework Help)', and 'Special Education Services Evaluation'.
- Progress Updates:** A list of updates with dates and descriptions, such as 'Mrs. Martin' and 'Mrs. Scudiero'.
- Tier Status:** A table with columns for 'Emotional Health', 'English Language Acquisition', 'Behavior', 'Engagement', and 'Other'.
- Meetings:** A section circled in blue, containing three meeting entries with dates and times.
- Plan Attachments:** A section with a 'Choose Files' button and the text 'No file chosen'.

Step 6: Implement Interventions and Monitor Progress

Implement new interventions and collect data on a weekly basis in DeansList under Progress Updates. Case Manager or other team members observe at least twice within the 4-6 week interval and collect observation notes in DeansList under Progress Updates.

The screenshot shows the 'Add Progress Update' form. It includes:

- A title 'Add Progress Update'.
- An 'Intervention (optional):' dropdown menu with the text 'Select Intervention...'.
- A large text area labeled 'Progress Update Details:' for entering notes.
- 'Cancel' and 'Save' buttons at the bottom.

Step 7: Follow-up Meeting with I&RS Team

Reach out to Parents/guardians about the meeting **at least two weeks prior to the meeting**. Parent/guardian attendance is not mandatory. During the meeting, the teacher and case manager update the team on the student's progress. Action steps are discussed and new interventions are proposed, if deemed necessary. If a student shows improvement, then based on the I&RS team and teacher's discretion the case can be closed. All meeting notes are collected in the Meeting section of the RTI plan.

Step 8: Implement New Interventions and Monitor Progress

New interventions are implemented and data is collected on a weekly basis in DeansList under Progress Updates. Case Manager or other team members observe at least twice within the 4-6 week interval and collect observation notes in DeansList under Progress Updates.

Step 9: Second Follow-Up Meeting with I&RS Team

Second follow-up meeting with I&RS team. Notify parents/guardians about the meeting at **least two weeks prior** to the meeting. Parent/guardian attendance is not mandatory. During the meeting, the teacher and case manager update the team on the student's progress. Action steps are discussed. New interventions are proposed, if deemed necessary. If a student shows improvement, then based on the I&RS team and teacher's discretion the case can be closed. **If data and observations suggest minimal to no progress, the team may move forward with submitting a referral to the Director of Special Education and the Child Study Team.**

Step 10: Implement New Interventions and Monitor Progress

New interventions are implemented and data is collected on a weekly basis in DeansList under Progress Updates. Case Manager or other team members observe at least twice within the 4-6 week interval and collect observation notes in DeansList under Progress Updates. Based on the I&RS team and teacher's discretion, continue monitoring progress and meeting with the I&RS team.

I&RS Team Expectations

Point Person for I&RS Expectations:

1. Reach out to I&RS team and relevant stakeholders at least **one week in advance** and schedule the meeting via GoogleCalendar. Remind team to review data and scholar(s) progress prior to meeting.
2. Monitor I&RS calendar schedule to ensure that follow-up meetings are held 4-6 weeks after the initial meeting.
3. Monitor DeansList to ensure that teachers have completed the necessary documentation before signing them up for an I&RS meeting.
 - a. Documentation required prior to initial I&RS meeting includes:
 - i. RTI referral in DeansList
 - ii. At least 2 interventions implemented with at least 6 weeks of data collected in DeansList
 - iii. I&RS Request for Assistance Form uploaded in DeansList
 - iv. Communication Log started in DeansList and at least one notification to parent/guardian about scholar's academic and/or behavioral concern documented
4. Assign Case managers to new RTI cases during initial I&RS Meeting
5. Facilitate I&RS Meetings using the meeting structures provided in Appendix B.
6. Update [I&RS Student Tracker](#) after each meeting

Case Manager Expectations:

1. Observe scholar(s) of concern at least twice within the 4-6 week time period between I&RS meetings and document observation notes in DeansList under Progress Updates.
2. Check-in with the teacher after observation to provide feedback and insights.
3. Monitor DeansList to ensure intervention fidelity and accurate progress monitoring.

I&RS Team Expectations (adopted from NJ DOE The I&RS Team Process)

1. Actively listen to clients' concerns, needs, fears, resistance and defensiveness in order to address clients' issues and better understand and serve clients.
2. Make themselves available to clients.
3. Model the promoted skills and values or use the promoted product.
4. Do not hassle or shame clients to buy their ideas, beliefs or products.
5. Try once to influence the client.
6. Offer support, encouragement, alternatives and ideas, rather than impose.
7. Suggest strategies, solutions and options, rather than demand.
8. Share information, experience and knowledge, rather than preach.
9. Have facts, figures and well thought out ideas.
10. Leave responsibility for change with the client.

Meeting Note Taker Expectations:

1. Take clear, objective notes using the note-taking form provided (located in Special Education Shared Drive in I&RS folder under your respective academy).
2. Type notes either directly into DeansList or copy notes into DeansList after the meeting; within 12 hours of the meeting notes are uploaded into DeansList.
3. Recap action steps at the end of the meeting.

Appendices

Appendix A: Examples of Specific, Descriptive, Observable Behavior

| IMPLIED vs. DESCRIBED BEHAVIOR EXAMPLE #1 | |
|---|---|
| <p><i>Implied, Generalized or Judged Behavior</i></p> <p>“Nicole has been sad and depressed for a while; she’s just not the happy girl she used to be. Her homework has been incomplete, too.”</p> | <p><i>Specific, Descriptive, Observable Behavior</i></p> <p>“For the past two weeks, Nicole has been sitting apart from her classmates, with slumped shoulders and not making eye contact. She stares out the window for most of the class and her eyes appear to tear every day. Her homework continues to be submitted on time, but it has not addressed all assigned criteria.”</p> |
| IMPLIED vs. DESCRIBED BEHAVIOR EXAMPLE #2 | |
| <p><i>Implied, Generalized or Judged Behavior</i></p> <p>“Devon has become extremely disruptive. He regularly acts out and mouths off to me. He also has been picking on other students.”</p> | <p><i>Specific, Descriptive, Observable Behavior</i></p> <p>“Since the beginning of the marking period, Devon has been spontaneously getting out of his seat during silent reading time on average three times a week, which takes the other students off task. When I instruct him to sit down, he tells me that he can read just as well standing up. When he stands, I have observed and other students have reported that he snaps his fingers in their ears, closes their books or throws their belongings on the floor.”</p> |

Appendix A: Examples of Specific, Descriptive, Observable Behavior

| Implied vs. Described Academic Example #1 | |
|---|---|
| <p>“Jamie can’t add single digit numbers together. She doesn’t try on her work. She just guesses and gives random answers.”</p> | <p>“The class is currently working on mastering double-digit addition with regrouping. I pulled Jamie in a small group each day for the last two weeks to work on her addition with single digits. This past week, she averaged 50% on her exit tickets. Each exit ticket contains 10 single-digit addition problems (i.e. $8 + 2$). When I instruct Jamie to use manipulatives and to count out loud, she is able to solve the math problem. But, I am not assisting, she solves about half the problems correctly.”</p> |
| Implied vs. Described Academic Example #2 | |
| <p>“Thomas is reading at least two grade levels behind in reading and writing. He can’t spell multisyllabic words. I don’t think he knows what a complete sentence is. He doesn’t try with his writing assignments. It takes him a really long time to write anything.”</p> | <p>“Thomas scored in ‘urgent intervention’ for the STAR Literacy Assessment. This seems consistent with my classroom observations. When I observed him with on-grade level text, he read about 20 words per minute and with 80% accuracy. In writing, Thomas takes about 20 minutes to write three simple sentences. His sentences frequently do not include correct punctuation or capitalization. Additionally, he is able to spell words with short vowels and magic-e vowel patterns, but spells words with vowel digraphs correctly about 5% of the time.”</p> |

Appendix B: I&RS Meeting Structures

Initial I&RS Meeting

I&RS Team Meeting Roles

1. Time Keeper:
2. Facilitator:
3. Note Taker:
4. Case Manager:

Facilitator (3 minutes): Welcome

- Welcome
- Opening/Introductions
- Assign Case Coordinator
- Review Last Meeting Action Steps (if applicable)

Teacher (5 minutes): Scholar's Profile

- Overview of student's strengths and interests
- Explain why student was referred by describing the problem and presenting trends and a summary of the collected data

Facilitator (3-5 minutes): Identify the Priority Problem

- Team works to select and state the priority problem
- This is the stage where the team distills from all the case information the **primary issues** to be addressed.
- The team should consider what *can* and what *must* be changed.

Facilitator (3-5 minutes): Develop a Behavioral or Academic Objective

- Facilitator moderates team discussion to create an objective that is a short-term, achievable, observable and measurable description of the targeted behavioral (or academic) outcome.
 - Behavioral or academic objective does NOT attempt to address every problem at once.
 - Example: Tanya will be sitting in her assigned seat in homeroom by 8:30 a.m. each day and will be sitting in her assigned seat before the second bell rings for all classes in the second semester.

Teacher: Review Prior Interventions (5 minutes)

- Consider the effects of past efforts, reasons for successes and failures and benefits to the students and others involved for not changing.

Facilitator (5-7 minutes): Brainstorm Solutions

- Facilitator moderates the brainstorming session, with the timekeeper providing assistance. The rules for brainstorming are as follows:
 - Set and adhere to a time limit
 - Identify as many ideas as possible
 - Post each idea for all to share
 - No discussion, evaluation or judgment of ideas
 - Creative and unique ideas are encouraged, in addition to the traditional
 - Build upon and/or modify posted ideas

Facilitator (5-7 minutes): Analyze and Evaluate Brainstormed Solutions

- Facilitator moderates team conversation around evaluating solutions.
- Things to consider when evaluating options:
 - General feasibility of brainstormed ideas
 - Positive and negative consequences
 - Benefits to the student and family
 - Benefits to the person requesting assistance
 - Available resources

Facilitator (5-7 Minutes): Identify Action Steps

- Mutually agree upon 1-2 interventions
- Identify persons responsible for each strategy
- Document timelines for completion of each strategy
- Create plans for supporting implementers and evaluating progress

Facilitator and Notetaker (2 minutes): Closing

- Note taker recaps action steps
- Schedule follow-up meeting (if applicable)
- Closing

Follow-Up I&RS Meeting

Team Leader (3 minutes): Welcome

- Welcome
- Opening and introductions
- Briefly review priority problem and behavior and/or academic objective

Teacher and Case Manager (5-7 minutes): Student Progress Updates

- Describe progress trends and provide a brief summary of the collected data

- Consider the effects of past efforts, reasons for successes and failures and benefits to the students and others involved for changing (or not changing).

Parent (7 minutes):

- Relevant medical information (to parent's discretion)
- Academic and/or behavioral concerns
- Child's strengths
- Extracurricular activities
- Academic supports provided at home
- Homework environment
- Night time routine

Team (3 minutes): Follow-up Questions

- Ask relevant questions of parent and teacher

Facilitator (5-7 minutes): Brainstorm Solutions

- Facilitator moderates the brainstorming session, with the timekeeper providing assistance. The rules for brainstorming are as follows:
 - Set and adhere to a time limit
 - Identify as many ideas as possible
 - Post each idea for all to share
 - No discussion, evaluation or judgment of ideas
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- Mutually agree upon 1-2 interventions
- Identify persons responsible for each strategy
- Document timelines for completion of each strategy
- Create plans for supporting implementers and evaluating progress

Facilitator (2 minutes): Closing

- Recap action steps

- Schedule follow-up meeting (if applicable)
 - Closing
-



SPECIAL EDUCATION PROCEDURAL SAFEGUARDS

BOOK: II

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Part I. General Policies and Procedures

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Part 1: General Policies and Procedures

Section A: Parental Prior Written Notice of Meetings and Required Participates

Parental Prior Written Notice of Meetings and Required Participates

In accordance with (N.J.A.C. 6A:14) A district board of education shall take steps to ensure that the parent is given the opportunity to participate in meetings regarding the identification, evaluation, classification, or educational placement of, or the provision of a free, appropriate public education to the student.

Prior Written Notice of Meetings:

The district ensures that parents will be given prior written notice of a meeting early enough to ensure that they will have an opportunity to attend. The district's Special Education Coordinator will ensure that meetings shall be scheduled at a mutually agreed upon time and place. If a mutually agreeable time and place cannot be determined, the parent(s) will be provided the opportunity to participate in the meeting through alternative means, such as virtually and conference calls. Within the notice of the proposed meeting, the purpose, time, location, and participants will be identified. Additionally, at the discretion of the parent or district, other individuals who have knowledge or special expertise regarding the student, including related services personnel, will be included within the notice.

Required Participates:

The district ensures that any meeting for students classified according to N.J.A.C. 6A:14 will include the following participants:

1. The parent
2. A teacher who is knowledgeable about the student's educational performance or, if there is no teacher who is knowledgeable about the student's educational performance, a teacher who is knowledgeable about our school and our school's programs;
3. The student, where appropriate;
4. At least one child study team member who participated in the evaluation;
5. The case manager;
6. Other appropriate individuals at the discretion of the parent or district; and
7. At least one general education teacher of the student, if the student is or may be participating in the general education classroom;

Method of Implementation:

- A meeting type guide which will include the procedures, protocols and required members will be implemented to ensure that the district consistently document that the parent receive prior written notice and that the required participants are in attendance to the specified meeting,
- An annual training will be provided and facilitated by the Special Education Coordinator to appropriate staff members to provide an understanding of state and district procedures to ensure compliance with Special Education protocol and child find.

Part 1: General Policies and Procedures

Section B: Parental Written Request for Evaluation

Parental Written Request for Evaluation

According to New Jersey *Administrative Code 6A:14*, when there is a written parental request for an evaluation, within 20 calendar days of the request, excluding the district's holidays, but not summer vacation, the district will conduct a meeting with the parent and all required members as identified in Section A to determine if a child study evaluation is warranted. Upon the completion of the meeting, a written notice of the determination shall be provided within 15 calendar days of the meeting. When a determination is made to conduct or not to conduct an initial evaluation, the parent shall be provided with copies of the special education rules (N.J.A.C. 6A:14) and due process hearing rules (N.J.A.C. 1:6A).

Method of Implementation:

- A meeting type guide which will include the procedures, protocols and required members will be implemented to ensure that the district consistently document that the parent receives prior written notice and that the required participants are in attendance to the specified meeting,
- An annual training will be provided and facilitated by the Special Education Coordinator to appropriate staff members to provide an understanding of state and district procedures to ensure compliance with Special Education protocol and child find.

Part 1: General Policies and Procedures

Section C: Individualized Education Plans and Annual Meetings

Individualized Educational Plans and Annual Meeting

Individualized Educational Plans and Annual Meeting:

According to New Jersey *Administrative Code 6A:14*, the district will conduct on an annual basis, or more often if necessary, Individualized Education Plan meetings (IEP). The IEP team which includes all members as identified in Section A, will meet to review and revise the IEP and determine placement for any student that has an IEP.

Signatures of persons who participated in the meeting to develop the IEP shall be maintained by the district and either a copy of the IEP or written notes setting forth agreements with respect to the IEP as determined by the IEP team shall be provided to the parents at the conclusion of the meeting.

According to New Jersey *Administrative Code 6A:14-2.5*, the district, when conducting an evaluation, will use a variety of assessment tools and strategies to gather relevant functional and developmental information, including information:

1. Provided by the parent that may assist in determining whether a child is a student with a disability and in determining the content of the student's IEP;
2. Related to enabling the student to be involved in and progress in the general education curriculum or, for preschool children with disabilities, to participate in appropriate activities;
3. Not use any single procedure as the sole criterion for determining whether a student is a student with a disability or determining an appropriate educational program for the student;
4. Use technically sound instruments that may assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

Method of Implementation:

- A meeting type guide which will include the procedures, protocols and required members will be implemented to ensure that the district consistently document that the parent receives prior written notice and that the required participants are in attendance to the specified meeting,

- An annual training will be provided and facilitated by the Special Education Coordinator to appropriate staff members to provide an understanding of state and district procedures to ensure compliance with Special Education protocol and child find.

Part 1: General Policies and Procedures

Section D: Conducting Reevaluation Plan Meetings

Conducting Reevaluation Plan Meetings:

The district will conduct a multi-disciplinary reevaluation plan meeting within three years of an identified student's previous classification, to determine whether the student continues to be a student with a disability. A reevaluation shall be conducted earlier if conditions warrant or if the student's parent or teacher requests the reevaluation. However, a reevaluation will not be conducted prior to the expiration of one year from the date the parent is provided written notice of the determination with respect to eligibility in the most recent evaluation or reevaluation, unless the parent and district both agree that a reevaluation prior to the expiration of one year is warranted.

Method of Implementation:

- A meeting type guide which will include the procedures, protocols and required members will be implemented to ensure that the district consistently document that the parent receives prior written notice and that the required participants are in attendance to the specified meeting,
- An annual training will be provided and facilitated by the Special Education Coordinator to appropriate staff members to provide an understanding of state and district procedures to ensure compliance with Special Education protocol and child find.

Part 1: General Policies and Procedures

Section E: Conducting Initial Evaluations for Special Education Services

Conducting Initial Evaluations for Special Education Services

Conducting Initial Evaluations for Special Education Services

The child study team, the parent, and the general education teacher of the student who has knowledge of the student's educational performance or, if there is no teacher of the student, a teacher who is knowledgeable about the school district's programs shall:

1. Review existing evaluation data on the student including evaluations and information provided by the parents, current classroom-based assessments and observations, and the observations of teachers and related services providers, and consider the need for any health appraisal or specialized medical evaluation;
2. On the basis of the review at (a)1 above, identify what additional data, if any, are needed to determine: i. Whether the student has a disability. The present levels of academic and functional achievement and related developmental needs, and educational needs of the student; Whether the student needs special education and related services; and
3. Determine which child study team members and/or specialists shall conduct each assessment that is part of the evaluation. (b) Prior to conducting any assessment as part of an initial evaluation, the district board of education shall request and obtain consent to evaluate according to N.J.A.C. 6A:14

After parental consent for initial evaluation of a school age student has been received, the evaluation, determination of eligibility for services and, if eligible, development and implementation of the student's IEP shall be completed within 90 calendar days.

1. If the parent repeatedly fails or refuses to produce the child for the evaluation, the time period above shall not apply.

An initial evaluation shall consist of a multi-disciplinary assessment in all areas of suspected disability. An initial evaluation shall include at least two assessments and shall be conducted by at least two members of the child study team in the areas in which the child study team members have appropriate training or are qualified through their professional licensure or educational certification and other specialists in the area of disability as required or as determined necessary.

Apply standards of validity, reliability, and administration for each assessment by trained personnel in accordance with the protocols and instructions of the producer of the assessment;

1. Include, where appropriate or required, the use of a standardized test(s) that shall be:
 - Individually administered;
 - Valid and reliable;

- Normed on a representative population; and
- Scored as either standard score with standard deviation or norm referenced scores with a cutoff score;
- Include a functional assessment of academic performance and, where appropriate, a functional behavioral assessment, an assessment of the language needs of a child who is an English language learner, assessment of the student's communication needs, and assessment of the need for assistive technology devices and services.

Each of the following components shall be completed by at least one evaluator:

- A minimum of one structured observation by one evaluator in other than a testing session; (1) In the case of a student who is suspected of having a specific learning disability, one evaluator shall observe the student's academic performance in the general education classroom;
- In the case of a preschool-age student, a child study team member in an environment appropriate for a child of that age;
- An interview with the student's parent;
- An interview with the teacher(s) referring the potentially disabled student;
- A review of the student's developmental/educational history, including records and interviews;
- A review of interventions documented by the classroom teacher(s) and others who work with the student;

Method of Implementation:

- A meeting type guide which will include the procedures, protocols and required members will be implemented to ensure that the district consistently document that the parent receives prior written notice and that the required participants are in attendance to the specified meeting,
- An annual training will be provided and facilitated by the Special Education Coordinator to appropriate staff members to provide an understanding of state and district procedures to ensure compliance with Special Education protocol and child find.

Part 1: General Policies and Procedures

Section F: Transition Plan Process

Transition Plan Process

Transition Plan Process

Beginning at age 14, or younger if determined appropriate by the IEP team, consider the need for consultation from the Division of Vocational Rehabilitation Services, Department of Labor and Workforce Development and other agencies providing services for individuals with disabilities;

Beginning with the IEP in place for the school year when the student will turn age 16, or younger if deemed appropriate by the IEP team, a statement consisting of the elements set forth:

- Appropriate measurable postsecondary goals based upon age-appropriate transition assessments related to training, education, employment, and, if appropriate, independent living, and the transition services including a course of study needed to assist the child in reaching those goals.

The transition services for a student with a disability, as defined in IDEA, shall consist of a coordinated set of activities that is designed within a results-oriented process, that is focused on improving the academic and functional achievement of the student with a disability to facilitate the student's movement from school to post-school activities, including postsecondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation, and is based on the individual student's needs, taking into account the student's strengths, preferences, and interests.

In addition to the above, transition services shall include:

1. Instruction;
2. Related services;
3. Community experiences;
4. The development of employment and other post-school adult living objectives; and
5. If appropriate, acquisition of daily living skills and functional vocational evaluation;

The person(s) responsible to serve as a liaison to postsecondary resources and make referrals to the resources as appropriate. If the student with disabilities does not attend the IEP meeting where transition services are discussed, the district shall take other steps to ensure that the student's preferences and interests are considered;

- Beginning at least three years before the student reaches age 18, a statement that the student and the parent have been informed of the rights that will transfer to the student on reaching the age of majority;
- A statement of how the student's progress toward the annual goals described in above will be measured;
- A statement of how the student's parents will be regularly informed of their student's progress toward the annual goals and the extent to which the progress is sufficient to enable the student to achieve the goals by the end of the year. The parents of a student with a disability shall be informed of the progress of their child at least as often as parents of a nondisabled student are informed of their child's progress

Method of Implementation:

- A meeting type guide which will include the procedures, protocols and required members will be implemented to ensure that the district consistently document that the parent receives prior written notice and that the required participants are in attendance to the specified meeting,
- An annual training will be provided and facilitated by the Special Education Coordinator to appropriate staff members to provide an understanding of state and district procedures to ensure compliance with Special Education protocol and child find.

INITIAL ELIGIBILITY/INELIGIBILITY MEETING

What you will need to do to conduct the meeting:

_____ Email school’s contracted Psychologist & Learning Disability Teacher Consultant to find out their availability to schedule the meetings.

_____ Call parents to schedule the meetings

_____ Follow-up the call with a confirmation email. Attach the Psychological Report, Educational Report and if needed, the Social Assessment to each individual parent confirmation email. (Please Note: If the meeting will be virtual, the meeting link should be sent at this time).

_____ Send home a meeting invitation for the type of meeting scheduled

_____ Prior to the meeting, create a draft Eligibility Document

_____ Complete NJSpED tab on PowerSchool

_____ Upload Psychological, Educational, and Social Assessment reports into PowerSchool Special Program

_____ Place Psychological, Educational and Social Assessment reports into student’s folder

****** Please Note: If the student is determined to be ineligible, the process stops here******

_____ Input parent information onto the Academic Achievement page of the draft IEP document

_____ Review all necessary parts of the draft IEP information with the parent

_____ Once agreed upon, finalize the IEP document

_____ If the meeting is in person, ensure to IEP document is signed by all members of the IEP team that are in attendance.

_____ If meeting is virtual, ensure IEP staff members that are in attendance sign the IEP document and signed document to the parent for an e-signature.

*****After the meeting has been held*****

_____ Email/send copy home of the finalized completed IEP document

_____ Place new IEP document, Parent invitation & email confirmation into the student's IEP folder

_____ Complete NJSpED tab on PowerSchool

_____ Complete NJSLA tab on PowerSchool (for accommodations)

Team Members invited: Parent(s), Psychologist, Learning Disability Teacher Consultant, General Education Teacher, Special Education Teacher, Social Worker/Case Manager, Related Service Provider(if needed: Speech/Language Pathologist and/or Occupational Therapist)

Annual Review Meeting

What you will need to do to conduct the meeting:

_____ Call parent to schedule the meeting

_____ Follow-up scheduled meeting with a confirmation email (Please Note: If the meeting will be virtual, the meeting link should be sent at this time).

_____ Send home a meeting invitation for the type of meeting scheduled

_____ Email proper members of the IEP team to inform them of the scheduled meeting

_____ Draft the IEP document

What you will need to do to conduct the meeting:

_____ Ensure all members of the team are in attendance

_____ Conduct introductions so that the parents are aware of the individuals and title of persons in attendance

_____ Allow parent to discuss the student's academic progress with the team(add this information to the Academic Achievement tab of the IEP document)

_____ Allow all other members of the team to discuss the student's academic progress, pausing to allow parent to ask questions

_____ Review the draft IEP document with the parent

_____ Once agreed upon, finalize the IEP document

_____ If the meeting is in person, ensure to IEP document is signed by all members of the IEP team that are in attendance.

_____ If meeting is virtual, ensure IEP staff members that are in attendance sign the IEP document and signed document to the parent for an e-signature.

******After the meeting has been held******

_____ Email/send copy home of the finalized completed IEP document

_____ Place new IEP document & Parent invitation & email confirmation into the student's IEP folder

_____ Complete NJSpED tab on PowerSchool

_____ Complete NJSLA tab on PowerSchool (for accommodations)

Team Members invited: Parent(s), General Education Teacher, Special Education Teacher, Social Worker/Case Manager, Related Service Provider(if needed: Speech/Language Pathologist and/or Occupational Therapist)

Consent for Reevaluation Meeting

What you will need to do to conduct the meeting:

_____ Two months prior to a student's re-evaluation date, complete a Service Request Form and email a PDF copy to the Educational Services Commission of New Jersey

_____ Email school's contracted Psychologist & Learning Disability Teacher Consultant to find out their availability to schedule the meetings.

_____ Call parents to schedule the meetings

_____ Follow-up the call with a confirmation email. Attach the Psychological Report, Educational Report and if needed, the Social Assessment to each individual parent confirmation email. (Please Note: If the meeting will be virtual, the meeting link should be sent at this time).

_____ Send home a meeting invitation for the type of meeting scheduled

What you will need to do to conduct the meeting:

_____ Ensure all members of the team are in attendance

_____ Explain the purpose of the meeting

_____ Conduct introductions so that the parents are aware of the individuals and title of persons in attendance

_____ Allow parent to discuss the student's academic progress with the team

_____ Allow all other members of the team to discuss the student and his or her student's academic progress, pausing to allow parent to ask questions

What you will need to do after the meeting:

_____ Email and/or send home a consent to evaluate form to be signed

_____ Once the signed consent form has been returned to you, (date stamp it) send the signed form to the testing evaluators (Contracted Psychologist, Learning Disability Teacher Consultant, Related Service Provider(Speech/ Language Pathologist, Occupational Therapist)

(Once testing has concluded for all parties, follow the initial eligibility/ineligibility outline)

Team Members invited: Parent(s), Psychologist, Learning Disability Teacher Consultant, General Education Teacher, Special Education Teacher, Social Worker/Case Manager, Related Service Provider(if needed: Speech/Language Pathologist and/or Occupational Therapist)



SPECIAL EDUCATION HANDBOOK

Book: III

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Introduction

As the parent of a special education student, you are a key part of the process that provides an appropriate and caring educational experience for your child. You are the advocate who remains a constant in your child's life as he or she progresses through the school system. This handbook is an effort to provide you with clear and accurate information that will help you work effectively with district personnel. It does not replace state laws and guidelines, which are detailed in separate handbooks that you will receive throughout your child's education. This handbook is a resource in tandem with your personal communication with district professionals.

What is Special Education?

Under the Individuals with Disabilities Education Act (IDEA), special education means, "specially designed instruction, at no cost to parents, to meet the unique needs of a child with disability." Children who receive special education and related services are entitled to a free and appropriate public education (FAPE). This includes opportunities to participate in the school's general curriculum and to make progress towards meeting annual goals. Children who receive special education must have opportunities to take part in other typical school activities that are appropriate to their individual needs.

To qualify for special education, a child's performance must be "adversely affected" by one of the 13 disabilities listed below:

- Specific Learning Disability (SLD)
- Other Health Impairment (OHI)
- Autism Spectrum Disorder (ASD)
- Emotional Disturbance
- Speech or Language Impairment
- Visual Impairment, including blindness

- Deafness
- Hearing Impairment
- Deaf-Blindness
- Orthopedic Impairment
- Intellectual Disability
- Traumatic Brain Injury
- Multiple Disabilities

There are specific criteria that need to be met in order to qualify for special education. Although medical information is important to provide to your child's educational team, know that the criteria needed to meet educational criteria may differ from medical diagnoses.

The Individuals with Disabilities Act (IDEA) is the federal special education law. Congress will revise and reauthorize the IDEA statute periodically. You should be aware of your rights under these regulations, as they may affect the placement of your child and the curriculum in the school. The most recent reauthorization was in 2004, the Individual with Disabilities Education Improvement Act (IDEIA-2004). Children with disabilities are entitled to receive a free, appropriate public education (FAPE). There are procedural safeguards in place so each student receives an appropriate evaluation and an individualized education program that meets specific needs. Parent and student (when appropriate) participation is encouraged.

Your child should be educated with his or her peers as closely as possible. You should only consider alternative programming when the needs of your child cannot be met within the regular school setting with supplementary aid and services. This is referred to as the least restrictive environment (LRE).

Each state has special education laws. IDEA-97 is the minimum and some states offer more. In New Jersey, the Department of Education is responsible for the rules and regulations affecting special education. More detailed information about laws, regulations, and statutes are available on their website: <http://www.nj.gov/education/specialed/rules.pdf>

In accordance with the requirements of the special education code (N.J.A.C. 6A:14-2.3(e) 7, the New Jersey Department of Education has developed a document titled "Parental Rights in Special Education (PRISE)." This Parent Handbook is intended to be an additional resource for parents whose children attend Delran Schools. The information that is included in PRISE will not be repeated in this handbook. PRISE is available from the Special Education Coordinator upon request. It is also available on the following website: <http://www.nj.gov/njded/parights/>

New Jersey Administrative Code for special education (N.J.A.C. 6A:14) is based on the federal Individuals with Disabilities Education Act (IDEA). A copy of the N.J.A.C. 6A:14 regulations is available upon request. Both regulations are available on the web:

- N.J.A.C. 6A:14 is available at <http://www.nj.gov/njded/code/title6a/chap14/>
- The IDEA is available at <http://www.ideapractices.org/law/index.php>

This document is provided as a guide for the provision of special education and related services. If any portion of this document conflicts with law or regulation, the law or regulation takes precedence.

Child Study Team:

The Child Study Team works with parents and teachers to screen, evaluate and determine whether a child needs special education

Case Manager

Students are assigned a case manager at the time of the referral, however, periodically there are changes in assignments. The case manager, along with the Special Education Coordinator, coordinates the evaluation process and IEP development, as well as the monitoring and evaluation of the effectiveness of the IEP. The case manager facilitates communication between home and school and coordinates the annual review and reevaluation process. The case manager is knowledgeable about the student's educational needs and program, about special education procedures and procedural safeguards, and is responsible for transition planning. The case manager at BelovED also serves as the social worker on the IEP team. The social worker conducts a needs assessment which is best known as a "social history evaluation." This needs assessment includes a study of biophysical factors that interfere with children's adjustment to and performance in school. It is through this evaluation that social, emotional, physical, behavioral, and cultural factors are identified in order to assess their impact on the student's learning.

Learning Disabilities Teacher Consultant (LDTTC)

The LDTTC reviews the student's educational history, confers with the classroom teachers and evaluates and analyzes academic performance and learning characteristics. The LDTTC's role is to determine the student's academic levels of functioning, areas of strengths and weaknesses, learning style, and educational needs.

School Psychologist

The school psychologist confers with the student's teachers and assesses the student's current cognitive (thinking and learning), social, adaptive, and emotional status. The activities involved in the evaluation vary at times from student to student but, in general, most children are given a cognitive assessment to determine a child's likelihood for success within the academic arena. For certain students the school psychologist provides counseling, crisis intervention or consultation services.

Special Education Coordinator

The SPED Coordinator is responsible for gathering the information needed for a referral and supplying the information to the case manager. The SPED coordinator works with the teachers to get data on the student and support in developing the student's IEP.

Referral Process

First Step/Pre-Referral (Response to Intervention):

The Response to Intervention team serves as a resource for teachers and is an integral part of the prereferral process. RTI members typically include, but are not limited to, the head of school, the special education coordinator, the intervention specialist, the ESL teacher, and classroom teachers. The purpose of the RTI team is to address any possible concerns teachers may have regarding their students' academic, social, or emotional functioning. Based on meetings with teachers, the RTI team develops casespecific strategies for use in regular education classrooms. Teachers then implement these strategies according to RTI recommendations. Parents are informed about the progress of their child through contact with the teacher. There are 3 tiers of RTI; tier 3 would be the phase in which students would go through before being referred for an evaluation. If the strategies are not effective, they may be revised or if it is suspected that the student is potentially educationally disabled, a referral will be made to the Child Study Team. For more information on RTI, please refer to the RTI Handbook.

**Parents will be notified if their child is referred to RTI.* Parents can always request a CST evaluation before, during, or after the RTI process. Written requests for CST evaluations should be directed to the Special Education Coordinator.

Referral

A student is generally referred for evaluation by school personnel through the RTI team or by the child's parent/guardian. Parent referrals must be made in writing with an original signature and should explain the reasons for a suspicion that the child may exhibit an educational disability; an email correspondence is not sufficient to initiate a CST referral. CST referrals should address the specific presenting concerns and the child's current strengths and needs. The referral is presented to the Special Education Coordinator who assigns the referral to a designated case manager. The assigned case manager has responsibility for managing the referral process.

Within 20 days of receipt of a referral an initial planning meeting of the CST will be convened. If an evaluation is agreed upon, once it is completed, parents, teachers, and specialists will reconvene another meeting within 90 days to discuss assessment results and, if necessary, subsequently develop an IEP.

Evaluation

Informed, signed, parental consent must be received in order for the school to proceed with the evaluation. It is important for the parent to understand the components of the evaluation and how the results of the evaluation will be used to determine eligibility for special education services. An initial evaluation shall consist of a multidisciplinary assessment in all areas of suspected disability. Such evaluation shall include at least two assessments and shall be conducted by at least two members of the Child Study Team in those areas in which they have appropriate training or are qualified through their professional licensure or educational certification and other specialists in the area of disability as required or as determined necessary.

The specific kind of evaluations a child needs is decided on an individual basis and will include professionals trained to assess specific areas. Persons from varying disciplines including a school psychologist, learning disabilities consultant, speech-language pathologist, and/or occupational therapist may conduct evaluations.

The common elements of a comprehensive assessment generally include the following:

- a) A psychological evaluation, which includes a standardized aptitude test that measures cognitive functioning, a clinical interview, observation, and as needed social-emotional and adaptive behavior rating scales;
- b) A social history, which includes developmental, medical, and educational histories, and parent, teacher, and student interviews;

- c) An educational evaluation, which includes achievement testing, learning style inventory, and a classroom observation;
- d) A medical evaluation/health appraisal, which includes a physical examination and visual and auditory acuity testing.

At this step of the process, parents should receive *Parental Rights in Special Education* (PRISE).

After parent consent for initial evaluation of a preschool age or school age student has been received, the evaluation, determination of eligibility for services under this chapter, and, if eligible, development and implementation of the IEP for the student shall be completed within 90 calendar days.

Parents can provide the school with information about your child that would be helpful in deciding if your child has a disability that requires special education and related services. In the event that a parent does not give permission for the school to evaluate the child and the school

personnel believe that the child is in need of special education, the school system may, but is not required to, pursue the initial evaluation of the child by utilizing due process procedures. and federal law to address your concerns, such as complaint resolution, medication or a due process hearing.

Eligibility

After the required evaluations are completed and summary reports are written and shared with parents, the Individualized Education Program team (IEP Team) conference is held to determine if a child has a disability and needs special education and/or related services. The IEP Team includes the child's parents and professionals who are knowledgeable about the child's learning and behavior in the school environment. The team should discuss every area of physical, behavioral and academic functioning that affects the child's educational performance. The team must decide if the student (a) meets the eligibility criteria for a disability area as outlined in the New Jersey Special Education Administrative Code, Chapter 14, Title 6A; (b) if the disability adversely affects educational performance; and (c) is in need of specially designed instruction and related services. All three criteria must be met in order for the student to be found eligible for special education.

According to IDEA 2004, students may not be deemed eligible for special education services if they do not meet the eligibility criteria of the law or if their eligibility is based on a lack of instruction in reading and math. A student may also be deemed not to be eligible if the

disability does not adversely affect the child's educational performance.

If a student does not qualify for special education and still struggles in school, there are other options that may be available. General education supports include: guidance counselors, 504 Plan, reading/math interventionists, or other building support. The student's classroom teacher also may be able to provide additional support.

The Individualized Education Plan (IEP)

Upon completion of the evaluation, an eligibility meeting will be held to discuss whether the student meets the code criteria making them eligible for special education and/or related services. A copy of the collaborative Child Study Team finding report will be given to the parents. Subsequently, but usually immediately following this conference, an Individualized Education Plan (IEP) conference will be held. At this meeting, the student's educational strengths and needs will be considered. Goals and objectives will be developed to address identified needs. The team will then determine the appropriate program for each individual student with consideration of the least restrictive environment as a priority. The evaluations, determination of eligibility for services, and (if eligible), the development and implementation of the IEP shall be completed within 90 calendar days of the district's receipt of parental permission to evaluate.

The implementation of a child's individual education program should occur 15 days after the IEP Team's completion of the plan, unless parents and school personnel mutually agree to an earlier implementation date. Times may vary, for example, if a child is assigned to another school for services and transportation must be arranged; if supplemental aids must be acquired and/or staff must receive specialized training in order to fully implement the IEP. The IEP document should identify the student's primary educational placement, the projected date for the beginning of the services and modifications described in the plan, and the frequency, location and duration for each service.

The IEP team includes, but is not limited to the following people:

- The child's parents
- General education teacher
- Special education coordinator/provider
- A representative of the Child Study Team
- Other members may include:
 - Speech-language pathologist
 - Occupational therapist

- Instructional support service provider
- School administrator
- School social worker

The IEP team process should be a collaborative process between parents, school staff members, and other professionals involved with your child. As a parent, you have a unique and critically important perspective on the child's learning style, strengths and needs. The school staff should ensure you feel comfortable when communicating with school staff.

You have the right to be involved in ALL meetings that discuss the identification, evaluation, IEP development and educational placement of your children. The law ensures you and school personnel are equal partners in all steps during the team process.

Contents of an IEP

- A statement of the student's present levels of educational performance
- A statement of measurable goals and benchmarks or short-term objectives
- A statement of the special education and related services and supplementary aids and services that shall be provided for the student, or on behalf of the student.
- A statement of the program modifications or supports for school personnel that shall be provided for the student:
 - A statement, as appropriate, of any integrated therapy services to be provided addressing the student's individualized needs in his or her educational setting;
 - An explanation of the extent, if any, to which the student shall not participate with nondisabled students in the general education class and in extracurricular and nonacademic activities;
 - A statement of any individual modifications in the administration of Statewide or district wide assessments of student achievement needed for the student to participate in such assessment.
 - A statement which specifies the projected date for the beginning of the services and modifications described in (e)4 above, and the anticipated frequency, location, and duration of those services and modifications;
 - Beginning at age 14, a statement of the State and local graduation requirements that the student shall be expected to meet.
 - Beginning at age 14, a statement of the transition service needs
 - A statement of student's transition from an elementary program to a secondary program
 - A statement of how the student's parents will be regularly informed of their student's

progress toward the annual goals and the extent to which that progress is sufficient to enable the student to achieve the goals by the end of the year.

- In the case of a student whose behavior impedes learning, the inclusion of a behavior intervention plan
- For students in an out-of-district placement, the IEP shall set forth how the student will participate with nondisabled peers in extracurricular and nonacademic activities, and delineate the means to achieve such participation, including, if necessary, returning the student to the district in order to effectuate such participation.

*Please refer to N.J.A.C. 6A:14-3.7 for more detailed information on the contents of the IEP.

Accommodations and Modifications in the Classroom and for Testing

The IEP team determines whether accommodations, modifications of curriculum or testing , or alternative testing are needed. When the decision is made it must be documented in the student's IEP. The decision regarding the need for special consideration is based on the student's evaluation results, current level of functioning and unique learning characteristics. Essentially, accommodations and modifications are determined based upon the nature and severity of the student's educational disability. The purpose of the accommodations is to level the playing field and to allow the student to exhibit their knowledge without a hindrance from their educational disability. The appropriate application of their accommodations and modification may result in improved school grades; however, accommodations and modifications are not recommended for the sole purpose of maximizing school grades.

District Wide Assessments

Start Strong
Renaissance Star360
NJSLA or DLM
ACCESS

Annual Review and Reevaluation

The IEP Team will meet once a year, or more if necessary, to review and revise the IEP. The Team will discuss strengths, weaknesses, and progress of the student and plan for the following year accordingly. In addition to annual reviews, the Child Study Team must complete a reevaluation of the student once every three years. The IEP Team determines the scope of the reevaluation by reviewing existing data. Further assessments are not conducted if the IEP Team finds that continued eligibility could be determined from existing data. However, if a

reevaluation is warranted, the IEP Team will determine the assessments needed and obtain parental consent.

Once testing is complete (within 60 calendar days) the IEP Team meets to discuss findings and plan programming. As with initial evaluations, copies of the reevaluation reports are provided to parents at least ten days in advance of that IEP Team meeting.

What Services Does the School District Offer?

There is a range of services offered through the school district in order to meet the goals of a child's IEP. Not all services are needed by each child, and a child may need a particular service at one time in his/her educational career, but not at other times. For example, a child who requires speech therapy in first grade may have met the speech goals in his/her IEP by third grade and no longer need this service.

- Counseling may be provided by certified social workers or guidance counselors.
- to master the job of being a student. This includes organization and caring for belongings, as well as other skills appropriate to the child's age and level in school.
- Speech/Language Therapy- The Speech and Language Services assists students with disorders of articulation, language, voice, fluency, and auditory skills. Therapeutic interventions are designed and implemented for those children whose difficulty interferes with their academic success or ability to communicate effectively. The Speech and Language Specialist provides individual and/or small group opportunities for the sequential development of speaking and listening skills.
- Resource Programs- Resource programs shall offer individual and/or small group instruction to students with disabilities. Resource programs may be provided in a general education class or in a pull-out classroom that meets the requirements of N.J.A.C. 6A:26-6. When a resource program is provided, it shall be specified in the student's IEP.

Resolving Disagreements

Most disagreements can be resolved by communication with your child's teacher, case manager, the school principal, or other school district personnel. There are also procedures

established under state and federal law to address your concerns, such as complaint resolution, medication or a due process hearing.

*Please refer to N.J.A.C. 6A:14-2.6 for more detailed information on mediation. *Please refer to N.J.A.C. 6A:14-2.7 for more detailed information on due process hearings

Section 504 of the Rehabilitation Act of 1973

Section 504 sets forth the requirement that no qualified student with a disability shall, on the basis of disability, be denied services and access to general education. If a student is disabled under IDEA 97, the student will automatically qualify as disabled under Section 504 of the Rehabilitation Act of 1973. It is possible for a student to qualify for Section 504 services and not qualify for special education services.

At BelovED Community Charter School, the determination for whether a general education student will receive services under Section 504 is made through a variety of sources including, but not limited to, independent assessments (i.e. doctor's report), and teacher and parent input.

If the 504 Team believes that there is "the presence of a physical or mental impairment that substantially limits a major life activity such as walking, seeing, hearing, speaking, breathing, or learning," the team then assesses the student and develops an accommodation plan that describes the impairment (disability), the life activity, and the accommodations and modifications needed to offer the student equal access to the curriculum.

The "504 Accommodation Plan" requires the written consent of the parent before it can be implemented. Copies are shared with each staff member responsible for implementation of the accommodations and the parent. Accommodation Plans must be reviewed annually (12 months from the date of implementation) and revised as needed.

Some examples of services a student may receive under Section 504 include:

- Nurse's services for blood/sugar disorders, heart malfunctions,

etc...

- Monitoring of medication for an Attention Deficit Disorder
- Accommodations and modifications for statewide assessments
- Specific accommodations in the classroom
- Additional information on Section 504 can be accessed by visiting the following websites:
 - <http://www.fcsn.org/peer/ess/pdf/ada504fs.pdf>
 - <http://www.ed.gov/policy/rights/guid/ocr/disability.html>
 - <http://www.ed.gov/about/offices/list/ocr/504faq.html>

**More information regarding special education in the state of New Jersey can be found at the following website:

<http://www.state.nj.us/education/code/current/title6a/chap14.pdf>

Physical Restraint and Seclusion Policy

USE OF PHYSICAL RESTRAINT AND SECLUSION TECHNIQUES ON STUDENTS WITH

DISABILITIES I. Definitions.

For the purposes of this Policy, the following definitions are utilized relative to the use of physical restraint and seclusion techniques on students with disabilities:

- a. "Physical restraint" means the use of a personal restriction that immobilizes or reduces the ability of a student to move all or a portion of his or her body.
- b. "Seclusion technique" means the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving, but does not include a timeout.
- c. "Timeout" means a behavior management technique that involves the monitored separation of a student in a non-locked setting, and is implemented for the purpose of calming.

II. Use of Physical Restraints on Students with Disabilities.

In accordance with N.J.S.A.46-13.5, BelovED Community Charter School will ensure that when utilizing any physical restraint on students with disabilities, that:

- a. Physical restraint is used only in an emergency in which the student is exhibiting behavior that places the student or others in immediate physical danger.
- b. A student is not restrained in the prone position, unless the student's primary care physician authorizes, in writing, the use of this restraint technique.
- c. Staff members who are involved in the restraint of a student receive training in safe techniques for physical restraint from an entity determined by BelovED Community Charter School District to be qualified to provide such training, and that the training is updated at least annually.
- d. The parent of a student is immediately notified when physical restraint is used on that student, which notification may be by telephone or electronic communication. A full written report of the incident of physical restraint shall be provided to the parent within forty-eight (48) hours of the occurrence of the incident.
- e. Each incident in which physical restraint is used is carefully and continuously visually monitored to ensure it was used in accordance with established procedures set forth in Policy developed in conjunction with the entity that trains staff in safe techniques for physical restraint, in order to protect the safety of the child and others.
- f. Each incident in which physical restraint is used is documented in writing in sufficient detail to enable staff to use this information to develop or improve the behavior intervention plan at the next individualized education plan meeting.
- g. In addition, the School Nurse is to examine the student after a restraining incident.

BelovED Community Charter School shall attempt to minimize the use of physical restraints through inclusion of positive behavior supports in the student's behavior intervention plans developed by the individualized education plan team.

III. Use of Seclusion Techniques on Students with Disabilities.

In accordance with N.J.S.A. 18A:46-13.6, BelovED Community Charter School shall ensure that when utilizing seclusion techniques on students with disabilities, that:

- a. A seclusion technique is used on a student with disabilities only in an emergency in which the student is exhibiting behavior that places the student or others in immediate physical danger.

b. Each incident in which a seclusion technique is used is carefully and continuously visually monitored to ensure that it was used in accordance with established procedures set forth in Policy developed in conjunction with the entity that trains staff in safe techniques for physical restraint, in order to protect the safety of the child and others.

c. Each incident in which a seclusion technique is used is documented in writing in sufficient detail to enable the staff to use this information to develop or improve the behavior intervention plan at the next individualized education plan meeting.

d. The parent of a student is immediately notified when a seclusion technique is used on that student, which notification may be by telephone or electronic communication. A full written report of the incident of seclusion shall be provided to the parent within forty-eight (48) hours of the occurrence of the incident.

e. In addition, the School Nurse is to examine the student after a seclusion incident.

BelovED Community Charter School shall attempt to minimize the use of seclusion techniques through inclusion of positive behavior supports in the student's behavior intervention plans developed by the individualized education plan team.

IV. New Jersey Department of Education Guidelines.

In accordance with N.J.S.A. 18A:46-13.7, the New Jersey Department of Education shall establish guidelines for school districts, educational services commissions, and APSSDs to ensure that a review process is in place to examine the use of physical restraints or seclusion techniques in emergency situations, and for the repeated use of these methods for an individual child, within the same classroom, or by a single individual. The review process shall include educational, clinical, and administrative personnel. Pursuant to the review process the student's individualized education plan team may, as deemed appropriate, determine to revise the behavior intervention plan or classroom supports, and a school district, educational services commission, or APSSD may determine to revise a staff member's professional development plan pursuant to N.J.S.A. 18A:46-13.7.

Community Resources

- NJ Protection and Advocacy, Inc. 800-922-7233
- Parent Education Network 800-522-5827

- Statewide Parent Advocacy Network, Inc. (SPAN) 800-654-SPAN Autism NJ 800-4AUTISM
NJ Coalition for Inclusive Education 732-613-0400
- National Center for Learning Disabilities 212-545-7510
- National Federation of the Blind 410-659-9314
- Children and Adults with Attention Deficit Disorder (CHADD), <http://www.chadd.org>

- The Council for Exceptional Children (CEC), 1110 North Glebe Road, Suite 300 Arlington, VA 22201-5704, 703/620-3660; 888/232-7733, <http://www.cec.sped.org/> ● Department of Education, Office of Sp. Ed. Programs 609-633-6833
<http://www.nj.gov/njded/specialed/>
- New Jersey Law Network, <http://www.njlawnet.com/edlaw.html>
- Education Resource Information Center (ERIC) 800-328-0272
- Learning Resource Center, 2351 Route 130 South, Suite 3, P.O. Box 1012 Dayton, New Jersey 08810-1012, (732) 274-5570 e-mail: lrccent@doe.state.nj.us
- National Information Center for Children and Youth with Disabilities (NICHCY) 800-695-0285, <http://www.nichcy.org/>
- NJ Center for Outreach and Services for Autism Community, Inc. (COSAC), <http://www.njcosac.org/cosacindex>
- NJ Coalition for Inclusive Education 732-613-0400
- NJ Education Law Center 973-624-1815
- NJ Protection and Advocacy, Inc. 800-922-7233
- Parents of Blind Children – NJ (POBC-NJ) 973-377-0976
- Parent Education Network 800-522-5827
- Statewide Parent Advocacy Network, Inc. (SPAN) 800-654-SPAN

Education

Dept. of Ed. Office of Sp. Ed. Programs 609-633-6833

Education Resource Info. Center (ERIC) 800-328-0272

Government Agencies and Committees

- Division of Developmental Disabilities 800-832-9173
<http://www.state.nj.us/humanservices/ddd/>
- Division of Vocational Rehabilitation 856-757-2775
- Library for the Blind and Handicapped 800-792-8322
- NJ Commission for the Blind and Visually Impaired 732-255-0720
- NJ Developmental Disabilities Council 609-792-7114

Organizations and Support Groups

Children and Adults with Attention Deficit Disorder (CHADD) National 800-233-4050

National Information Center for Children and Youth with Disabilities (NICHCY)

800-695-0285 Parents of Blind Children — NJ (POBCNJ) 973-377-0976

United Cerebral Palsy Assoc. of NJ (UCP) 888-322-1918

Variety Club, The Children's Charity 215-735-0803