



A PARAPROFESSIONAL'S GUIDE TO

Understanding Special Education

Table of Contents

Introduction	4
Welcome to Wayne RESA.....	5
Special Education Administration and Compliance Support Team.....	6
Paraprofessionals and IDEA 2004: Recognizing and Defining the Role	7
The Professional Role of the Paraprofessional: A Historical Perspective	8
Federal Regulations and Michigan Administrative Rules	10
How is Paraprofessional Support Determined?	12
Supervision of Noncertified Personnel Providing Instructional Support	13
Authorized Activities of Non-Instructional Personnel	13
Noncertified Personnel May Assist and Support	14
Inappropriate Responsibilities for a Special Education Paraprofessional.....	15
The Professional Role of the Paraprofessional: Professional Standards and Ethical Practices.....	17
Special Education in a Nutshell.....	19
Contents of the IEP	21
IEP Team Members.....	22
Understanding Students with Disabilities	26
The Student with a Specific Learning Disability.....	27
The Student with a Cognitive Impairment.....	28

Developed October 2014

Table of Contents

The Student with a Physical and/or Other Health Impairment	29
The Student with a Visual Impairment	30
The Student That Is Deaf or Hard of Hearing.....	32
The Student with an Emotional Impairment.....	34
The Student with Autism Spectrum Disorder	35
The Student with a Speech or Language Impairment.....	36
Glossary	37
Sources.....	45
Acknowledgments.....	46



Introduction

Dear Special Education Paraprofessional:

Greetings from Wayne County Regional Educational Service Agency!

As a special education paraprofessional within our county, you will be assisting our students with disabilities in an assortment of functions. As a team member, a special education paraprofessional is a representative of the program, the school, the district, and the overall field of special education as a whole, so collaboration with your fellow team members will be an imperative part of your work. Each paraprofessional has different responsibilities and expectations based upon the needs of the students as assigned, but each of you will share a common thread of supporting the success students with disabilities. The duties of a special education paraprofessional can be challenging at times but also rewarding and satisfying. You will find that possessing a positive attitude and growth mindset will be the essential tools needed to be successful in your role. As a special education paraprofessional, you will be able to contribute to the well-being of the young people that are served in our county. However, there are special responsibilities and expectations that come with your position. This handbook should serve as a guide and resource to support you in your position as special education professional.

Thank you in advance for your dedication, cooperation, and service to our students with disabilities and know that we at Wayne RESA are always available to support your work.

The Gift of Educational Service...

“When defining your multiple roles and purpose in life, be cognizant of the one that is most honorable, which is the role of supporting your fellow human. When one gives a ‘piece’ of themselves to the growth and advancement of another the value of that percentage of self is priceless. As an educational service provider, recall your duty to serve and to give a piece of yourself each day to the development of a child, and note, at times you will desire to serve them all, but remember to focus on the ones most in need.”

—LV-H

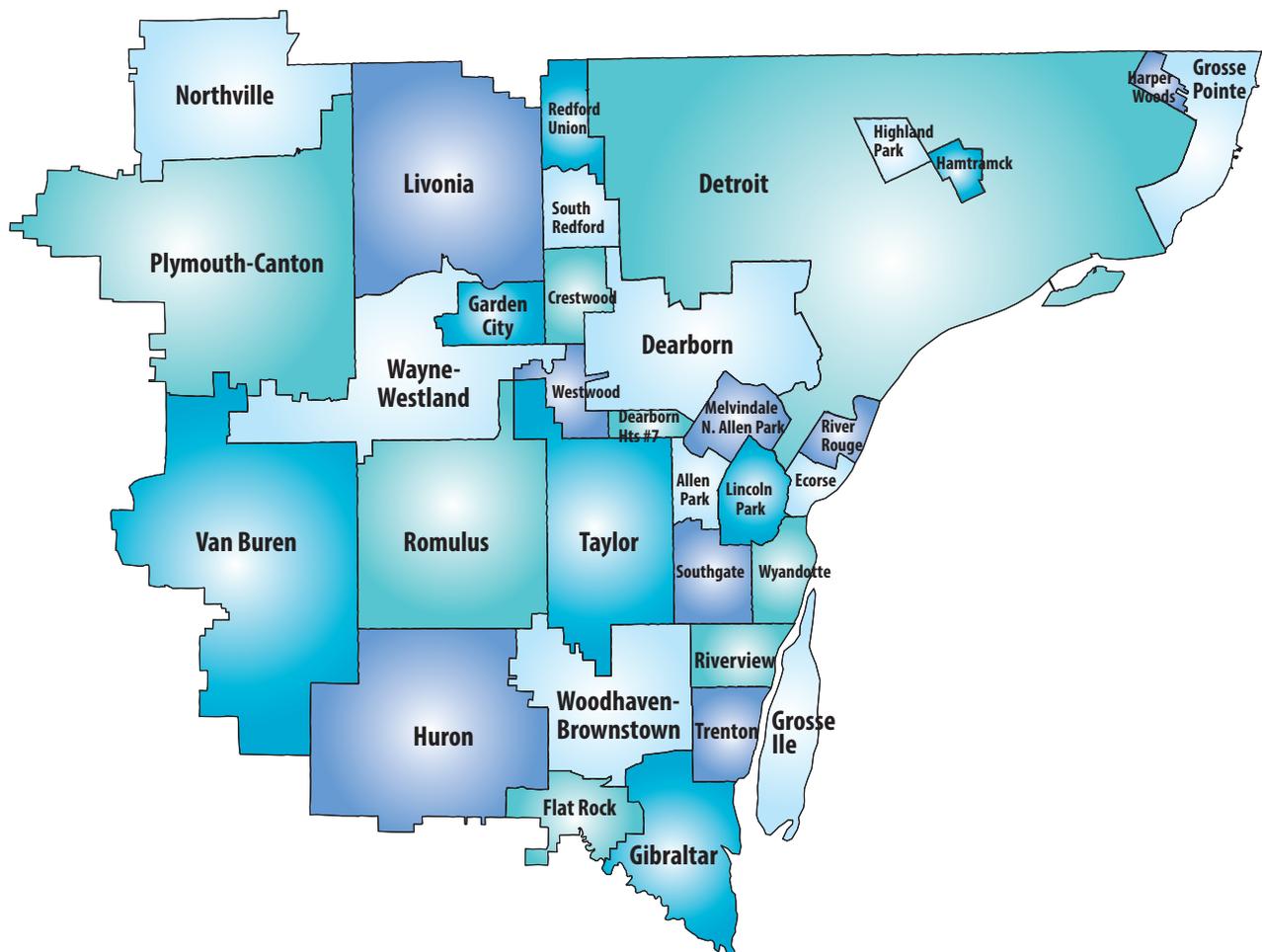


Welcome to Wayne RESA

Welcome to the Wayne County Regional Educational Service Agency (Wayne County RESA)

With a total population of approximately 2.1 million, Wayne County is the most populous county in the State of Michigan and the 13th most populous county in the nation. There are 33 school districts in 43 Wayne County communities serving approximately 260,000 students. Additionally, there are more than 110 Public School Academies (PSAs) serving 53,000 students for a combined total of approximately 313,000 students in public schools county-wide. Wayne County is the most culturally and linguistically diverse community in the State of Michigan with the school age population representing nearly 40 different home languages other than English.

Approximately 40,000 students with disabilities are currently being served by Wayne County's 33 local school districts and approximately 110 public school academies. The large majority of these students are provided appropriate programs within their resident districts. Approximately 7,000 students have more severe impairments (often referred to as "low incidence") that require placement in the 58 special education center programs located throughout the county. A center program serves low incidence students from several local school districts at a single site. All 58 special education center programs are operated by local school districts.



Special Education Administration & Compliance Support Team

Special education services are available to eligible students from birth through high school graduation or age 26, as appropriate. Each school district and public school academy provides special education programs and services to students with disabilities. Fourteen school districts provide centers of educational service for students requiring highly specialized approaches adapted to the severity of student need.

Wayne RESA's special education unit provides guidance and support to parents, teachers, and administrators in meeting the requirements of the Individuals with Disabilities Education Improvement Act (IDEIA, 2004) and Michigan Administrative Rules. Guidelines and standardized forms are accessible on this website to help schools and parents in putting these legal requirements into educational practice.

Children with special needs have unique needs for planning and assistance related to their age. Early Intervention Services coordinate an array of opportunities for infants and young children. Parents are able to access services for infants and young children with developmental delays and identified disabilities across the county. Assistive technology resources increase educational access for students of all ages and all types of educational needs. As students enter adolescence, transition planning is a tool for preparing students for their adult roles. Wayne County RESA's special education unit provides resources to create opportunities for all learners, so please feel free to contact one of our knowledgeable consultants...

www.resa.net/specialeducation/

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"I believe in the concept that you learn by teaching."

—Stephen Covey

Paraprofessionals and IDEA 2004

Recognizing and Defining the Role

According to the National Education Association (NEA) review, paraprofessionals total more than 770,000 in public school districts across the United States. Paraprofessionals play an increasingly important role in improving student achievement by supporting and assisting certified and licensed educators in instructional and other direct services. More than 71 percent of paraprofessionals provide services to students with disabilities. **IDEA 2004**—acknowledges the important role that you play in helping students with disabilities maximize their achievement. First in the 1997 amendments to IDEA, and now in the 2004 reauthorization, paraprofessionals who are appropriately trained and supervised (in accordance with state law, regulation, or written policy) are recognized as personnel who may assist in the provision of special education and related services to students with disabilities [20 U.S.C. 1412(a)(14)]. IDEA 2004 does not define the term paraprofessional nor does it define what paraprofessionals do, instead, within IDEA section § 300.156, titled **Personnel qualifications**, outlines that each State must establish and maintain qualifications for all related service personnel who serve children with disabilities and requires paraprofessionals and assistants are appropriately trained and supervised, in accordance with State law, regulation, or written policy. Therefore in Wayne County, the paraprofessional personnel may include, but are not limited to, para-educators, teacher aides, health care aides, education technicians, instructional or classroom aides, job coaches, bilingual aides, and program assistants in programs for students with cognitive impairment or severe multiple impairments. So, regardless of title, remember your role is to support the individual needs of the children that you are assigned to. The paraprofessional can provide direct or indirect services such as learning new

skills using lessons the teacher has prepared, practicing learned skills, providing a variety of assistance from organization to physical mobility, translation, even job coaching. These instructional supports can include anything from social studies activities to supporting feeding needs. Paraprofessionals are members of the instructional team and are ALWAYS meant to work under the supervision of a qualified staff member who has responsibility for the instruction design and evaluation.



The Professional Role of the Paraprofessional



A Historical Perspective

The Paraprofessional has supported teachers for more than 50 years. Their presence in schools originated as clerical support and worked directly with one student at a time. The role and responsibilities in classrooms gradually increased after federal programs affected the overall positions of the paraprofessional. According to the Annual Report to Congress, there were 250,000 teacher assistants nationwide in 2000; today there are over 770,000, and the numbers continue to grow.

A Brief Review:

In the mid-1950s: After the Great Depression in the 30's and early 40's, America was ready to restructure and recreate the life around them. Birthrates had dropped intensely during the Great Depression due to economic reasons. It was the exact opposite in the 50s when the birthrates dramatically increased. The soldiers had just come home from war in Europe and were eager to start a new life. The marriage rates increased as well as the desire to have families. During

1947, a record 3.8 million babies was born. A baby was born every 7 seconds. The late 40s and all of the 50s marked the Baby Boom era. There were some other positive effects of the Baby Boom as well. In order to keep up with all of the babies in the Baby Boom, more products had to be produced. Food, clothing, diaper and toy sales went up dramatically. So apparently, the Baby Boom not only raised the population, but the economy as well. As happy as all of this seems, some people also worried about the negative effects of the Boom. Since all of those children had been born, all of them had to go to school. More children meant teacher and classroom shortages, not to mention the crowding of the schools as well. Ten million students entered into elementary schools in the 1950s alone.

The Professional Role of the Paraprofessional

In the 1960s and 1970s: There were great demands on our government from many constituencies for changes to occur in the areas of health care, K-12 Education, and human service systems that led to federal legislation which established and supported instructional and other direct services for learners who came from educationally and economically disadvantaged backgrounds. Many of the programs created by Congress to provide these services, including, Title I and Head Start, provided funding for schools and other community organizations to employ and train paraprofessionals and other noncertified workers. In the mid-1970s parents and other advocates for the rights of children and youth with disabilities achieved one of their major goals with the passage of Public Law (PL) 94-142, the landmark Education for all Handicapped Children Act, now titled the Individuals with Disabilities Education Act (IDEA), the passing of this law open the doors to appropriate educational supports for children with disabilities. At the same time that paraprofessional employment was expanding, there was also a growing recognition of the need to reduce obstacles that prevented people from multi-ethnic, multi-cultural, and multi-lingual heritages from entering the professional ranks of education. In the beginning, paraprofessionals were primarily women who were entering the workforce and who lived near the schools where they worked. Throughout the 1960s and 1970s the federal government played a key role in supporting and providing access to teacher educational programs for paraprofessionals and other non-traditional students.

From Aide to Teacher: The Story of the Career Opportunities Program (COP) written by George Kaplan (1977) described the results of a seven-year project supported by the U.S. Office of Education. The most significant goals of COP was to develop flexible degree programs that would not diminish the quality of teacher preparation programs and attract and support “teacher aides” in low income urban and rural areas

who wanted to enter the professional ranks of teaching, but needed to work full time while they earned academic degrees. The program received Federal support. An important factor in the development of this program was the character of the individual trainee (the paraprofessional). Many of the participants belonged to the same ethnic and minority groups as the children to whom they serviced; they brought to the position of teacher aide the needed rapport and sympathetic understanding for those communities. A cooperative working relationship developed between school districts, the COP program, and institutions of higher learning. Many colleges adjusted credit requirements in order for teacher assistants to maintain their full-time positions. This program produced many certified teachers. In addition to earning certifications, the program enabled many low-income and minority groups to advance in the teaching profession and achieving degrees beyond the basic bachelor level.

A Michigan Connection...

A sponsored project by the Ford Foundation that took place in the Bay City, Michigan schools, where college educated women who were not licensed teachers were recruited and trained to perform clerical, monitoring, and other routine classroom tasks. The project was an effort to provide the need for additional classroom “service” providers to support the learning process and provided needed planning time for teachers.



Federal Regulations and Michigan Administrative Rules for Special Education That Support a Paraprofessional's Legal Role

- **Federal: Elementary and Secondary Education Act (formerly known as No Child Left Behind)** limits the duties and responsibilities of paraprofessionals. A paraprofessional “may not provide any instruction to a student unless the paraprofessional is working under the direct supervision of a teacher.” A paraprofessional may not provide one-on-one tutoring at a time when the teacher is available. **(20 U.S.C. § 6319(g)).**

- **Michigan: Utilization of Noncertified Personnel in Elementary and Secondary Schools March 2011**

School districts may employ noncertified personnel to assist teachers and support instruction. This includes instructional personnel, clerical support personnel and other paraprofessional personnel.

The term “noncertified personnel” as used in this document, refers to teacher aides/assistants and other support personnel for whom a valid Michigan teaching certificate is not required as a condition for employment.

The board of a school district is required under **§388.1763 of the State School Aid Act** to ensure that only qualified teachers who hold a valid Michigan teaching certificate are assigned the responsibility of providing instruction and are required under **§380.1231 of the Revised School Code** to hire and contract with qualified teachers.

School districts are prohibited from allowing noncertified personnel employed as teacher aides/assistants or instructional paraprofessional to assume the responsibility of teachers in elementary or secondary schools within the state of Michigan, as indicated in the following quote from **§380.1233(1) of the Revised School Code**:

...the board of a school district or intermediate school board of an intermediate school district shall not permit a teacher who does not hold a valid teaching certificate to teach in a grade or department of the school.

Noncertified personnel may be employed and assigned to assist and support teachers or other approved professional personnel as authorized in Rule 390.1105 of the Michigan Administrative Code.

A Michigan Connection...

All paraprofessionals in Michigan hired after January 2, 2002, must already meet NCLB requirements as a condition of their employment, while those paraprofessionals hired prior to January 8, 2002, had four years, or until June 2006, to meet NCLB/ESEA requirements.



■ **Michigan: Michigan Administrative Rules for Special Education (MARSE)...R 340.1793 Paraprofessional personnel; qualifications states:**

Paraprofessional personnel employed in special education programs shall be qualified under requirements established by their respective intermediate school district plan (Wayne County RESA).

Paraprofessional personnel include, but are not limited to, teacher aides, health care aides, bilingual aides, instructional aides, and program assistants in programs for students with cognitive impairment or severe multiple impairments.

■ **Michigan: Wayne County Regional Service Agency (RESA)... County Special Education Plan - Revised November 2013 Qualifications of Paraprofessional Personnel states:**

All paraprofessionals employed in special education shall, at a minimum, be high school graduates, or equivalent, and also meet any specific requirements established by the employing Local Educational Agencies and Public School Academies LEA/PSA. Paraprofessional personnel must also meet any applicable state or federal requirements.



How is a Paraprofessional Support Determined for any student in Wayne County?

Identify the “problem (s)” the student is having...	What has been tried so far?	How would an “aide” help?
<ul style="list-style-type: none"> • In Class • In School Building • Academics • Behaviors 	<ul style="list-style-type: none"> • Modifications with the instruction • Accommodations for access • A buddy system for support • Behavioral Interventions and Plans • Others? 	<p>Areas that may necessitate a need for Paraprofessional Services...</p> <ul style="list-style-type: none"> • Health/Personal Care: Some students may have significant health issues that require procedures by specially trained employees: <ul style="list-style-type: none"> • Eating/Feeding • Toileting/Personal Hygiene • Mobility/Transferring/ Positioning • Behavior: Students who demonstrate behaviors that are safety concerns to the student and others. • Instruction: Academic assistance due to students having extreme difficulty participating in classroom activities and/ or meeting IEP goals with continuous assistance. • Inclusion: Students may require assistance in safety concerns, supports needed to assist peer interactions, or assistance during specific learning times in the classroom.

Supervision of Noncertified Personnel Providing Instructional Support

Each educational agency must ensure that certified teachers are responsible for students during instructional periods each and every day. When noncertified personnel engaged in complementing, supplementing, or reinforcing instruction, which is counted as part of the instructional day under Rule 340.2(2) of the Michigan Administrative Code, they (the paraprofessional) shall be under the meaningful direction and supervision of a certified classroom teacher.

“Meaningful direction” means that the teacher is responsible for:

- 1) Planning and coordinating all lessons;**
- 2) Presenting the initial lesson;**
- 3) Identifying the type of complementing, supplementing, or reinforcing instruction to be provided; and**
- 4) Specifying the type of methods, materials, and techniques to be used by noncertified staff.**

“Supervision” means the certified teacher periodically:

- 1) Evaluates the performance of noncertified personnel providing instructional support;**
- 2) Reviews the work plans; and**
- 3) Evaluates student progress.**

Noncertified personnel **may not** be given full responsibility for instruction. They may provide complementing, supplementing, or reinforcing instruction to individuals or small groups of students without the teacher physically being present for a limited period of time as long as the teacher knows

the whereabouts of the aide and students at all times, the noncertified personnel are never given full responsibility for instruction, and the activities of the noncertified personnel are always under the meaningful direction and supervision of the teacher.

School Districts are authorized to employ teacher aides/assistants and other paraprofessionals to support teachers in the day-to-day operation of school programs.

Authorized Activities of Non-Instructional Personnel Include:

Districts are authorized to employ teacher aides/assistants and other paraprofessionals to support teachers in the day-to-day operation of school programs. Noncertified personnel in the following programs have special responsibilities or functions as established in rule or as a condition for receipt of state or federal funds. Paraprofessional personnel employed in special education programs are qualified under requirements established by their respective intermediate school district plan. Special education paraprofessional personnel include, but are not limited to, teacher aides, health care aides, bilingual aides, instructional aides, and program assistants in programs for students with cognitive impairments or severe multiple impairments. (Rule 340.1792)

An interpreter for the deaf must be one of the following:

- 1) a certified interpreter as defined by the Deaf Persons’ Interpreters Act;
- 2) a qualified interpreter as defined by the Deaf Persons’ Interpreters Act who has been approved at quality assurance level II or III;
- 3) a high school graduate, or equivalent, with advanced training in a community college, agency, or degree-granting institution.

The training must be approved by the Michigan Department of Education. (Rule 340.1793a)

School districts may employ noncertified personnel to assist and support:

- Maintaining safety and discipline in the lunchrooms, on the playground, or in other school settings;
- Functioning as health care aides, library assistants, or other responsibilities of non-instructional support for the students; and
- Supervising before and after school programs and non-instructional periods (i.e., study hall periods not counted as part of the required minimum number of hours of pupil instruction as required by §380.1284 of the Revised School Code.)
- Assisting in the development of instructional and related materials.
- Complementing instruction, such as assisting the teacher during the lesson by helping students who may need additional support with instruction;
- Supplementing instruction by assisting the teacher with individuals or small groups of pupils on follow-up activities as specified; and
- Reinforcing instruction, by assisting the teacher in administering drill activities for individuals or small groups.
- Presents lessons or portions of lessons to a student or a group of students, checks accuracy of work and presents additional assignments as directed by the teacher.
- Helps students to use books, classroom materials and equipment.
- May keep routine records related to attendance, grades, test scores and lunch money.
- Assists students with all aspects of toileting which may include diapering, and lifting on and off the toilet, changing tables and mats.
- Obtains food from the kitchen, serves food and feeds students or helps them feed themselves.
- Assists teachers in maintaining discipline and encouraging acceptable behavior by the students.
- Facilitates student's use of mobility equipment such as leg braces, walkers, mobile standers, and tricycles.
- Assists teachers on field trips by helping students with physical needs, maintaining discipline, and reinforcing learning situations.
- Assists bus drivers in maintaining discipline and responding to the physical needs of students.
- Assists teachers in directing activities and acts as play leader for assigned groups of students.
- May take temperatures, administer first aid and provide basic medical care as directed or authorized by a school nurse/school personnel.
- Implement behavior management plan consistent with teacher implementation/instruction.
- Operates audio-visual equipment and prepares or uses other materials and methods to assist teachers in presenting lessons to students.
- Adjusts or rephrases portions of texts and classroom instructions.
- Attend the IEP meeting, if requested.
- Assist with translation, written or oral.

Inappropriate Responsibilities for a Special Education Paraprofessional

- Be solely responsible for a special education instructional or related service
- Be responsible for selecting or administering formal diagnostic or psychological assessments or for interpreting the results of those assessments.
- Be responsible for selecting, programming or prescribing educational activities or materials for the students without the supervision and guidance of the teacher
- Be solely responsible for preparing lesson plans or initiating original concept instruction
- Be assigned to implement the Individual Education Program (IEP) for disabled students without direct supervision.
- Be employed in lieu of certificated special education personnel
- Be used as a substitute teacher
- Perform nursing procedures or administer medications without appropriate supervision from an approved health care professional
- Be asked to perform clerical duties on a regular basis

After your assignment is determined, here are some clarifying questions to ask the School Administrator and Supervising Teacher(s) of your district to support the understanding of your role:

- Clarify hours and days you will be working – ask for a school calendar.
- Clarify lunch and break hours based on student's needs.

- What records are you responsible for keeping?
- What special services are available to the classroom and the school in which you work?
- What schedules are you responsible for following?
- When do students arrive and depart?
What are the playground rules and regulations?
- For what lunch time activities will you be responsible?
- Where are the supplies kept and how are they obtained?
- How much time will you spend in inclusion classrooms? How much time in the special education classroom?
- What is the line of communication and authority you are to follow?
- What should be your response when a parent raises questions on their child's functioning in the classroom?
- What pupil records are available to you?
- What is expected of you in terms of student discipline?
- What course should you follow if you feel that you do not have enough to do?
- How does your teacher view the teacher/paraprofessional relationship?
- What is expected of you in terms of confidentiality of student records?
- What is the appropriate dress code?
- How will professional be evaluated?
- What professional development opportunities are available?

The Professional Role of the Paraprofessional

*“Remember that yours is not
the only heart that may be
wishing for love.”*

*—Cameron Dokey
Before Midnight: A Retelling
of “Cinderella”*



The Professional Role of the Paraprofessional

Special education paraprofessionals must follow professional guidelines when working with all students including those with disabilities. They will be involved with many other educational personnel, parents, students, and administrators and encounter highly sensitive information concerning students and families. Paraprofessionals are an integral part of the instructional team, and as such, have an ethical responsibility to work as a team member and to meet the needs of students. You as a paraprofessional have special relationships with teachers, other school personnel, students and the school community. The quality of these relationships not only depends on the work performed, but also on the ethical behavior demonstrated on the job. Paraprofessionals are faced with ethical issues on a daily basis, including confidentiality, record management and the demands placed on them by students and staff. Therefore, it is imperative that paraprofessionals are exposed to and discuss ethical guidelines.

Paraprofessionals often face situations where their own interest, a student's interest or the school's interest may conflict. Ethical standards help us to become aware of the best course of action with regard to a variety of perspectives other than just our own. We need to consider the ethical implications of the decisions that we make and the potential impact on students and other school staff. Ethics are particularly important because paraprofessionals and teachers are placed in a position of authority over students. Students are often vulnerable and have limited influence, relying on paraprofessionals, teachers, and parents to protect their best interests. Paraprofessionals are obligated to be as fully prepared as possible to function ethically, as well as legally, in the school environment. Ethical standards provide a framework for reflecting on appropriate behavior.

Sample of The Council for Exceptional Children (CEC) compiled list of Professional Standards for Paraeducators, which includes Professionalism and Ethical Practices...

General Ethical Considerations for Working with Students with Disabilities

As an important part of the educational team, paraprofessionals have a commitment to maintain ethical standards of behavior in their relationships with students, parents, their supervisor, and other school personnel. Teachers have a responsibility to help the paraprofessional develop ethical responses to situations that arise. A code of ethics, such as the one provided below, can establish guidelines for appropriate behavior.

Accepting Responsibility

- Engage only in non-instructional and instructional activities for which qualified or trained.
- Do not communicate progress or concerns about students directly to parents.
- DO communicate progress and concerns to supervising teachers.
- Refer concerns expressed by parents, students, or others to your teacher or supervisor.
- Recognize that the supervisor has the ultimate responsibility for the instruction and behavior support of students and follow the directions prescribed by him/her.



Confidentiality

All student information is confidential. This is a particularly important component of the law.

There are many Federal laws and state statutes that protect the privacy of educational records.

The main Federal law pertaining to student records is the Family Educational Rights and Privacy Act (FERPA). Information or records falling under this law must remain confidential. Significant penalties can occur from failure to comply with the privacy act. Many school staff fail to realize that even conversations with non-school personnel or school personnel without an educational involvement with a specific child can be a violation of this act. Information and records covered under this act may include but are not limited to: personal and family data evaluation and test data, psychological, medical and anecdotal reports, records of school achievement and progress reports, disability information, and copies of correspondence concerning students. Discussing specific facts about the students with which you work is a violation of the students' confidentiality rights. Remember that matters

regarding students are confidential and cannot be a topic of public discussion – not even in the teacher's lounge, not at the grocery store, not with other paraprofessionals who do not work with the student. Even if you do not mention a student's name, talking about an incident can give identifiable information.

Communication

No matter how well a program is designed, success depends on good communication between the teacher and the paraprofessional. Poor communication skills and negative statements are at the heart of most problems. The learning process is totally dependent upon the staff establishing and maintaining good lines of daily communication. However, communication with students and staff goes beyond verbal interaction and also includes nonverbal interaction. Research has concluded that approximately 80% of communication is nonverbal. Your actions may actually speak more loudly than your words.

Special Education in a Nutshell

What Is Special About Special Education?

Special education is governed by federal law and state rules. Under Individuals with Disabilities Education Act (IDEA), Special Education is defined as:

“Specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability.”

Special education is a service to provide additional supports, programs, specialized placements or environments to ensure that all students’ educational needs are provided. Special education is provided to qualifying students at no cost to the parents.

Number	Step
1	<p>Child is identified as possibly needing special education and related services.</p> <p>“Child Find” districts have policies and procedures in place to identify, locate, and evaluate all children with disabilities who are in need of special education and related services. To do so, school districts conduct “Child Find” activities. A school professional may ask that a child be evaluated to see if he or she has a disability. Parents may also contact the child’s teacher or other school professional to ask that their child be evaluated. This request may be verbal or in writing. Parental consent is needed before the child may be evaluated. Evaluation needs to be completed within 30 school days after the parent gives written consent.</p>
2	<p>Child is evaluated.</p> <p>The evaluation must assess the child in all areas related to the child’s suspected disability. The evaluation results will be used to decide the child’s eligibility for special education and related services and to make decisions about an appropriate educational program for the child. If the parents disagree with the evaluation, they have the right to take their child for an Independent Educational Evaluation (IEE). They can ask that the school system pay for this IEE.</p>
3	<p>Eligibility is decided.</p> <p>A group of qualified professionals and the parents look at the child’s evaluation results. Together, they decide if the child is a “child with a disability,” as defined by IDEA. Parents may ask for a hearing to challenge the eligibility decision. The Michigan Administrative Rules for Special Education (MARSE) define eligibility for special education services within thirteen (13) categories of disability.</p>
4	<p>Child is found eligible for services.</p> <p>If the child is found to be a “child with a disability,” as defined by IDEA, he or she is eligible for special education and related services. After a child is determined eligible, the individualized educational team must meet to write an IEP for the child to address the areas of deficits and needs.</p>
5	<p>IEP meeting is scheduled.</p> <p>The school system schedules and conducts the IEP meeting. School staff must:</p> <ul style="list-style-type: none">• contact the participants, which includes the parents;• notify parents early enough to make sure they have an opportunity to attend and fully participate;• schedule the meeting at a time and place agreeable to parents and the school;• tell the parents the purpose, time, and location of the meeting;• tell the parents who will be attending, and inform patients who will be in attendance• tell the parents that they may invite people to the meeting who have knowledge or special expertise about the child.

Special Education in a Nutshell—continued

Number	Step
6	<p>IEP meeting is held and the IEP is written.</p> <p>The IEP team gathers to talk about the child’s needs and write the student’s IEP. Parents and the student (when appropriate) are part of the team. If the child’s placement is decided by a different group, the parents must be part of that group as well.</p> <p>Before the school system may provide special education and related services to the child for the first time, the parents must give consent. The child begins to receive services as soon as possible after the meeting.</p> <p>If the parents do not agree with the IEP and placement, they may discuss their concerns with other members of the IEP team and try to work out an agreement. If they still disagree, parents can ask for mediation, or the school may offer mediation. Parents may file a complaint with the state education agency and may request a due process hearing, at which time mediation must be available.</p>
7	<p>Services are provided.</p> <p>The school makes sure that the child’s IEP is being carried out as it was written. Parents are given a copy of the IEP. Each of the child’s teachers and service providers has access to the IEP and knows his or her specific responsibilities for carrying out the IEP. This includes the accommodations, modifications, and supports that must be provided to the child, in keeping with the IEP.</p>
8	<p>Progress is measured and reported to parents.</p> <p>The child’s progress toward the annual goals is measured, as stated in the IEP. His or her parents are regularly informed of their child’s progress and whether that progress is enough for the child to achieve the goals by the end of the year. These progress reports must be given to parents at least as often as parents are informed of their nondisabled children’s progress.</p>
9	<p>IEP is reviewed.</p> <p>The child’s IEP is reviewed by the IEP team at least once a year, or more often if the parents or school ask for a review. If necessary, the IEP is revised. Parents, as team members, must be invited to attend these meetings. Parents can make suggestions for changes, can agree or disagree with the IEP goals, and agree or disagree with the placement.</p> <p>If parents do not agree with the IEP and placement, they may discuss their concerns with other members of the IEP team and try to work out an agreement. There are several options, including additional testing, an independent evaluation, or asking for mediation (if available) or a due process hearing. They may also file a complaint with the state education agency.</p>
10	<p>Child is reevaluated.</p> <p>At least every three years the child must be reevaluated. This evaluation is often called a “triennial.” Its purpose is to find out if the child continues to be a “child with a disability,” as defined by IDEA, and what the child’s educational needs are. However, the child must be reevaluated more often if conditions warrant or if the child’s parent or teacher asks for a new evaluation.</p>

“Service is the rent we pay for being. It is the very purpose of life, and not something you do in your spare time.”
—Marian Wright Edelman

Contents of the IEP

By law, the IEP must include certain information about the child and the educational program designed to meet his or her unique needs. In a nutshell, this information is:

- **Current performance:** The IEP must state how the child is currently doing in school (known as present levels of educational performance). This information usually comes from the evaluation results such as classroom tests and assignments, individual tests given to decide eligibility for services or during reevaluation, and observations made by parents, teachers, related service providers, and other school staff. The statement about “current performance” includes how the child’s disability affects his or her involvement and progress in the general curriculum.
- **Annual goals:** These are goals that the child can reasonably accomplish in a year. The goals are broken down into short-term objectives or benchmarks. Goals may be academic, address social or behavioral needs, relate to physical needs, or address other educational needs. The goals must be measurable—meaning that it must be possible to measure whether the student has achieved the goals.
- **Special education and related services:** The IEP must list the special education and related services to be provided to the child or on behalf of the child. This includes supplementary aids and services that the child needs. It also includes modifications (changes) to the program or supports for school personnel—such as training or professional development—that will be provided to assist the child.
- **Participation with nondisabled children:** The IEP must explain the extent (if any) to which the child will not participate with nondisabled children in the regular class and other school activities.
- **Participation in state and district-wide tests:** Most states and districts give achievement tests to children in certain grades or age groups. The IEP must state what modifications in the administration of these tests the child will need. If a test is not appropriate for the child, the IEP must state why the test is not appropriate and how the child will be tested instead.
- **Dates and places:** The IEP must state when services will begin, how often they will be provided, where they will be provided, and how long they will last.
- **Transition service needs:** Beginning when the child is age 14 (or younger, if appropriate), the IEP must address (within the applicable parts of the IEP) the courses he or she needs to take to reach his or her post-school goals. A statement of transition services needs must also be included in each of the child’s subsequent IEPs.
- **Needed transition services:** Beginning when the child is age 16 (or younger, if appropriate), the IEP must state what transition services are needed to help the child prepare for leaving school.
- **Age of majority:** Beginning at least one year before the child reaches the age of majority; the IEP must include a statement that the student has been told of any rights that will transfer to him or her at the age of majority. (This statement would be needed only in states that transfer rights at the age of majority.)
- **Measuring progress:** The IEP must state how the child’s progress will be measured and how parents will be informed of that progress.

IEP Team Members

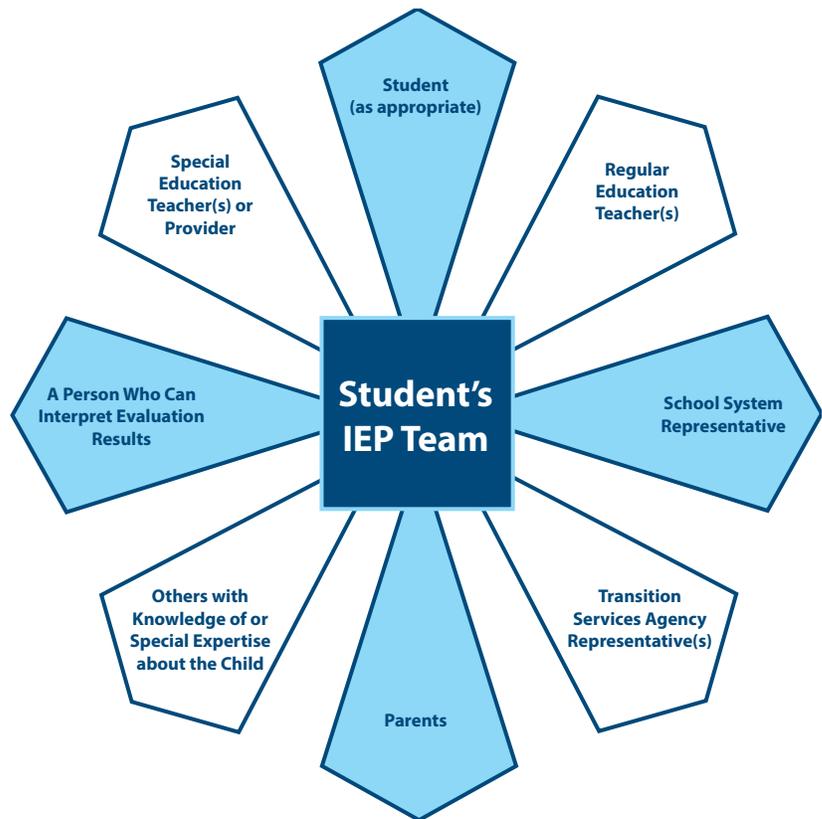
By law, certain individuals must be involved in writing a child's Individualized Education Program. These are identified in the figure at the left. Note that an IEP team member may fill more than one of the team positions if properly qualified and designated. For example, the school system representative may also be the person who can interpret the child's evaluation results.

These people must work together as a team to write the child's IEP. A meeting to write the IEP must be held within 30 calendar days of deciding that the child is eligible for special education and related services.

Each team member brings important information to the IEP meeting. Members share their information and work together to write the child's Individualized Education Program. Each person's information adds to the team's understanding of the child and what services the child needs.

Parents are key members of the IEP team. They know their child very well and can talk about their child's strengths and needs as well as their ideas for enhancing their child's education. They can offer insight into how their child learns, what his or her interests are, and other aspects of the child that only a parent can know. They can listen to what the other team members think their child needs to work on at school and share their suggestions. They can also report on whether the skills the child is learning at school are being used at home.

Teachers are vital participants in the IEP meeting as well. At least one of the child's regular education teachers must be on the IEP team if the child is (or may be) participating in the regular education environment. The regular education teacher has a great deal to share with the team. For example, he or she might talk about:



- the general curriculum in the regular classroom;
- the aids, services or changes to the educational program that would help the child learn and achieve; and
- strategies to help the child with behavior, if behavior is an issue.

The regular education teacher may also discuss with the IEP team the supports for school staff that are needed so that the child can:

- advance toward his or her annual goals;
- be involved and progress in the general curriculum;
- participate in extracurricular and other activities; and
- be educated with other children, both with and without disabilities.

Supports for school staff may include professional development or more training. Professional development and training are important for teachers, administrators, bus drivers, cafeteria workers, and others who provide services for children with disabilities.

The child's special education teacher contributes important information and experience about how to educate children with disabilities. Because of his or her training in special education, this teacher can talk about such issues as:

- how to modify the general curriculum to help the child learn;
- the supplementary aids and services that the child may need to be successful in the regular classroom and elsewhere;
- how to modify testing so that the student can show what he or she has learned; and
- other aspects of individualizing instruction to meet the student's unique needs.

Beyond helping to write the IEP, the special educator has responsibility for working with the student to carry out the IEP. He or she may:

- work with the student in a resource room or special class devoted to students receiving special education services;
- team teach with the regular education teacher; and
- work with other school staff, particularly the regular education teacher, to provide expertise about addressing the child's unique needs.

Another important member of the IEP team is the individual who can interpret what the child's evaluation results mean in terms of designing appropriate instruction. The evaluation results are very useful in determining how the child is currently doing in school and what areas of need the child has. This IEP team member must be able to talk about the instructional implications of the child's evaluation results, which will help the team plan appropriate instruction to address the child's needs.

The individual representing the school system is also a valuable team member. This person knows a great deal about special education services and educating children with disabilities. He or she can talk about the necessary school resources. It is important that this individual have the authority to commit resources and be able to ensure that whatever services are set out in the IEP will actually be provided.

The IEP team may also include additional individuals with knowledge or special expertise about the child. The parent or the school system can invite these individuals to participate on the team. Parents, for example, may invite an advocate who knows the child, a professional with special expertise about the child and his or her disability, or others (such as a vocational educator who has been working with the child) who can talk about the child's strengths and/or needs. The school system may invite one or more individuals who can offer special expertise or knowledge about the child, such as a paraprofessional or related services professional. Because an important part of developing an IEP is considering a child's need for related services, related service professionals are often involved as IEP team members or participants. They share their special expertise about the child's needs and how their own professional services can address those needs.

Depending on the child’s individual needs, some related service professionals attending the IEP meeting or otherwise helping to develop the IEP might include occupational or physical therapists, adaptive physical education providers, psychologists, or speech-language pathologists.

When an IEP is being developed for a student of transition age, representatives from transition service agencies can be important participants. Whenever a purpose of meeting is to consider needed transition services, the school must invite a representative of any other agency that is likely to be responsible for providing or paying for transition services. This individual can help the team plan any transition services the student needs. He or she can also commit the resources of the agency to pay for or provide needed transition services. If he or she does not attend the meeting, then the school must take alternative steps to obtain the agency’s participation in the planning of the student’s transition services.

And, last but not least, the student may also be a member of the IEP team. If transition service needs or transition services are going to be discussed at the meeting, the student must be invited to attend. More and more students are participating in and even leading their own IEP meetings. This allows them to have a strong voice in their own education and can teach them a great deal about self-advocacy and self-determination.

Related Services

Related services are developmental, corrective and/or other supportive services that are required to assist a child with a disability to benefit from special education. A child may require any of the following related services in order to benefit from special education. Related services, as listed under IDEA, include (but are not limited to):

- Audiology services
- Counseling services
- Early identification and assessment of disabilities in children
- Medical services
- Occupational therapy
- Orientation and mobility services
- Parent counseling and training
- Physical therapy
- Psychological services
- Recreation
- Rehabilitation counseling services
- School health services
- Social work services in schools
- Speech-language pathology services
- Transportation

If a child needs a particular related service in order to benefit from special education, the related service professional should be involved in developing the IEP. He or she may be invited by the school or parent to join the IEP team as a person “with knowledge or special expertise about the child.”

Transition Services

Transition refers to activities meant to prepare students with disabilities for adult life. This can include developing postsecondary education and career goals, getting work experience while still in school, setting up linkages with adult service providers such as the vocational rehabilitation agency—whatever is appropriate for the student, given his or her interests, preferences, skills, and needs. Statements about the student’s transition needs must be included in the IEP after the student reaches a certain age:

- Transition planning, for students beginning at age 14 (and sometimes younger)—involves helping the student plan his or her courses of study (such as advanced placement or vocational education) so that the classes the student takes will lead to his or her post-school goals.
- Transition services, for students beginning at age 16 (and sometimes younger)—involves providing the student with a coordinated set of services to help the student move from school to adult life. Services focus upon the student’s needs or interest in such areas as: higher education or training, employment, adult services, independent living, or taking part in the community.



“Alone we can do so little; together we can do so much.”
—Helen Keller

Understanding Students with Disabilities

Michigan Administrative Rules for Special Education clearly states exactly what is meant by a “**student with a disability**” (SWD). Michigan Rule 340.1702 states that:

A student with a disability is defined as any person from birth to age 26 who is determined by an individualized education program team (IEPT) or a hearing officer to have one or more of the impairments (specified below), that necessitates special education, or specially designed instruction.

This instruction is to be at no cost to the parent and designed to “meet the unique educational needs of the student with a disability and to develop the student’s maximum potential.” The impairments specified by the Michigan Administrative Rules are listed below, and will be described in greater detail later in this document:

In order for these students to receive the best education

possible in the least restrictive setting, it is essential that teaching teams understand these various disabilities and become knowledgeable on how these students learn best. The role of the special education teacher, paraprofessional, and/or service provider is crucial in supporting **ALL District/Building staff** that come in contact with students with disabilities. The following information will provide understanding of some common characteristics, instructional, and behavioral strategies for specific disabilities. Note that these are just selected samples from numerous characteristics and strategies that can be used to define and support students with disabilities in the least restrictive environment. In addition to the following suggestive strategies presented, please refer to www.resa.net for a list of additional appropriate IEP accommodations and modifications.

340.1705 <i>Cognitive Impairment</i>	340.1709a <i>Other Health Impairment</i>	340.1715 <i>Autism Spectrum Disorder</i>
340.1706 <i>Emotional Impairment</i>	340.1710 <i>Speech and Language Impairment</i>	340.1716 <i>Traumatic Brain Injury</i>
340.1707 <i>Hearing Impairment</i>	340.1711 <i>Early Childhood Developmental Delay</i>	340.1717 <i>Deaf-Blindness</i>
340.1708 <i>Visual Impairment</i>	340.1713 <i>Specific Learning Disability</i>	
340.1709 <i>Physical Impairment</i>	340.1714 <i>Severe Multiple Impairment</i>	

The Student with a Specific Learning Disability

A learning disability is a neurological disorder that **affects one or more of the basic psychological processes involved in understanding or in using spoken or written language.**

Disability Manifestation	Common Characteristics and Behavior	Strategies
<p>The disability may manifest itself in an imperfect ability:</p> <ul style="list-style-type: none"> • Listening/Reading Comprehension • Oral Expression • Written Expression • Basic Reading Skills • Math Calculations/ Reasoning • Reading Fluency 	<ul style="list-style-type: none"> • Disorganized and frustrated in new learning situations • Overwhelmed in new situations or when new content is presented • Difficulty structuring work time • Trouble following directions • Easily distracted • Poor social decisions • Unclear about connection between effort and success • Difficulty with pencil and paper task 	<ul style="list-style-type: none"> • Break learning into small steps. • Probe to determine if the student is understanding. • Provide regular quality feedback. • Use diagrams, graphics and pictures to support your words. • Provide independent practice. • Model what you want students to do. • Provide prompts of strategies to use. • Engage students in process-type questions like “how is that strategy working and/or where else might you apply it?” (during direct instruction time). • Teach study skills, note-taking strategies, or organizational techniques. • Use adaptive equipment if appropriate (books on tape, laptop computers, etc.).

The Student with a Cognitive Impairment

Students with a cognitive impairment **may demonstrate problems with the ability to think and learn**. Students will often have trouble with such school subjects as math and reading. A cognitive impairment also **affects how a student will function in life skills**, such as, remembering personal information and grooming. Students with this impairment may have significant limitations in adaptive behaviors. A cognitive impairment comes in different forms—mild, moderate, severe and profound. These degrees of a cognitive impairment are measured by a child’s IQ number. A child with a mild cognitive impairment has a higher IQ and can learn more quickly than a child with a severe cognitive impairment.

Common Characteristics and Behavior	Strategies
<ul style="list-style-type: none">• Learn at slower rate• Difficulty structuring work time• Learning may plateau for a period of time• Easily distracted/reduced attention span• Poor problem-solving strategies	<ul style="list-style-type: none">• Provide simple instructions• Sequence slowly, using examples• Use lots of visual tools• Speak clearly and turn so the students can see your face• Allow time to process requests and allow students time to ask questions• Use adaptive equipment if appropriate (books on tape, laptop computers, etc.)• Break learning into small steps• Probe to determine if the student is understanding

The Student with a Physical and/or Other Health Impairment

Students with a physical disability will have **an impairment that adversely affects educational performance**. There is a diverse range of disabilities in this category including such conditions as cerebral palsy, spina bifida, amputations or limb absences, and muscular dystrophy. The term “Other Health Impairment” refers to a variety of health problems that dictate the need for special medical or educational services. Health impairments include convulsive disorders, cystic fibrosis, heart disease, sickle cell disease, hemophilia, asthma, rheumatic fever, cancer, AIDS, or any other **chronic or acute health problem that limits strength, vitality, or alertness and adversely affects the student’s educational development**. Both must be supported by a medical professional.

Common Characteristics and Behavior	Strategies
<ul style="list-style-type: none">• May use assistive devices for mobility• May need assistance with basic needs• May need additional time to travel around the building• May need to see a nurse on a regular basis• May be on grade level or above• May have additional learning issues	<ul style="list-style-type: none">• If necessary, arrange for a room change before the term begins. Special seating arrangements may be necessary to meet student needs. Students may require special chairs, lowered tables on which to write, or spaces for wheelchairs.• If possible, try not to seat students using wheelchairs in the back row. Move a desk or rearrange seating at a table so the student is part of regular classroom seating.• Students with upper body weakness may not be able to raise their hands to participate in class discussion. Establish eye contact with the students and call on them when they indicate that they wish to contribute.• Make arrangements early for field trips and ensure that accommodations will be in place on the given day (e.g., transportation, site accessibility).• Make sure accommodations are in place for in-class written work (e.g., allowing the student to use a scribe, to use adaptive computer technology, or to complete the assignment outside of class).

The Student with a Visual Impairment

Visual impairment including blindness means impairment in **vision that, even with correction, adversely affects a child's educational performance**. The terms partially sighted, low vision, legally blind, and totally blind are used in the educational context to describe students with visual impairments.

They are defined as follows:

- **"Partially sighted"** indicates some type of visual problem has resulted in a need for special education.
- **"Low vision"** generally refers to a severe visual impairment, not necessarily limited to distance vision. Low vision applies to all individuals with sight who are unable to read the newspaper at a normal viewing distance, even with the aid of eyeglasses or contact lenses. They use a combination of vision and other senses to learn, although they may require adaptations in lighting or the size of print, and, sometimes, Braille.
- **"Legally blind"** indicates that a person has less than 20/200 vision in the better eye or a very limited field of vision (20 degrees at its widest point).
- **"Totally blind"** students learn via Braille or other non-visual media.

Visual impairment is the consequence of a functional loss of vision, rather than the eye disorder itself. Eye disorders which can lead to visual impairments can include retinal degeneration, albinism, cataracts, glaucoma, and other muscular problems that result in visual disturbances, corneal disorders, diabetic retinopathy, congenital disorders, and infection. These diagnoses require medical documentation and must meet state visual requirements.

Strategies

- Speak to the class upon entering and leaving the room or site
- Call the student with vision impairment by name if you want his/her attention
- Seat the student away from glaring lights (e.g. by the window) and preferably in front of the class
- Use descriptive words such as straight, forward, left, etc. in relation to the student's body orientation. Be specific in directions and avoid the use of vague terms with unusable information, such as "over there", "here", "this", etc.
- Describe, in detail, pertinent visual occurrences of the learning activities
- Describe and tactually familiarize the student to the classroom, laboratory, equipment, supplies, materials, field sites, etc.

The Student with a Visual Impairment—continued

Strategies

- Give verbal notice of room changes, special meetings, or assignments.
- Offer to read written information for a person with a visual impairment, when appropriate.
- Order the appropriate text books for the students in their preferred medium.
- Identify yourself by name; don't assume that the student who is visually impaired will recognize you by your voice even though you have met before.
- If you are asked to guide a student with a visual impairment, identify yourself, offer your services and, if accepted, offer your arm to the student's hand. Tell the student when he/she has to step up or step down. Let him/her know if the door is to the left or right, and warn of possible hazards.
- Orally, let the student know if you need to move or leave or need to end a conversation
- If a student with a visual impairment is in class, routinely check the instructional environment to be sure it is adequate and ready for use.
- When communicating with a student who has vision impairment, always identify yourself and others who are present.
- Do not pet or touch a guide dog. Guide dogs are working animals. It can be hazardous for the visually impaired person if the dog is distracted.
- Be understanding of the slight noise made by a portable translator.
- Also use an auditory or tactile signal where a visual signal is normally used.
- It is not necessary to speak loudly to people with visual impairments.
- Always notify changes of class schedule in advance.
- May need to use a cane for travel.
- May need additional training to travel around the building.
- May use audio and Braille equipment for written materials. Don't assume that it's a toy or music equipment.
- May need verbal clues for directions.

The Student That Is Deaf or Hard of Hearing

A student that is deaf or hard of hearing **may have a lack of ability to hear sound and/or discern clarity. This disability may range from a slight hearing loss to profound deafness.** Hearing impairments can result in communication and behavior concerns in the regular education environment.

Common Characteristics and Behavior

Depending on the level of the hearing loss, the student may display characteristics like the learning disabled student.

- May or may not wear hearing aids
- Language or speech reading may be used to communicate
- Reading and writing skills may or may not reflect expected ability
- May have some social interaction concerns
- May talk too loudly or softly
- Interrupt others actions incorrectly
- May unintentionally make noises
- May use physical contact to communicate
- May have a sign language interpreter

Strategies

ENVIRONMENT

- Provide the audience with a clear and direct view of your mouth and face.
- Speak from a well-lighted area of the room.
- Reduce background noise by turning off slide projectors or other types of apparatus when not in use.
- Speak clearly and naturally and at your normal pace, unless you are asked to slow down.
- For those with mustaches, trim so the lips show clearly

Strategies—continued

INTERPRETERS

- Sign language interpreters are certified professionals who use American Sign Language or Signed English to interpret spoken English for people who are deaf or hard of hearing.
- If a sign language interpreter is used, introduce yourself to the interpreter and go over technical and specialized vocabulary before beginning presentations.
- Interpreters at conference presentations should stand on one side of the platform at the front of the room, even with extra lighting if needed, in order to be clearly seen from anywhere in the audience.
- When replying to a query from an individual with a hearing impairment using an interpreter, speak to the hearing impaired person, NOT to the interpreter.

CAPTIONING

- Captioning is the on screen text display of spoken words or sounds that are part of a video or film presentation. Captioners are usually trained as stenographers and use special software to add captions to a previously produced video.
- Video or film production services can also include captions as part of your original production.
- If showing a videotape, have it captioned. (Open captions are preferred for this purpose as closed captions can be seen only with the use of a decoder.) If there is a script or transcription already available, this will make the captioner's job easier.
- If captioning is not feasible, arrange for an interpreter to sign the audio portion of the tape. If possible, make the tape available to the interpreter a day, or so, before your presentation.

AUDITORY MATERIALS

- Audiotapes, videotapes, and other auditory materials can be translated into print format to make them accessible to people who are deaf or hard-of-hearing. When transcribing video, be sure to mention any sounds and actions that may occur independent of the spoken text, and indicate settings or changes of scene as well. To find a transcriber, look in the Yellow Pages under "Transcribing Services."
- If available, use Assistive Learning Devices. These devices consist of a transmitter that sends electronically enhanced sound to receivers worn by individuals who are hard-of-hearing.

The Student with an Emotional Impairment

Emotional impairment shall be determined through *manifestation of behavioral problems primarily in the affective domain, over an extended period of time, which adversely affects the student's education.*

Common Characteristics and Behavior	Strategies
<p>Students in this category have:</p> <ul style="list-style-type: none">• Poor social judgment and interpersonal skills• Inability to build or maintain satisfactory interpersonal relationships within the school environment• Inappropriate types of behavior or feelings under normal circumstances• Tendency to develop physical symptoms or fears associated with personal or school problems.• Emotional, not cognitive impairment• Behavior impacts their attention to cognition but does not impede learning• May also range from low to high extreme behavior• Misinterpreting feelings of others• Impulsivity—acting before thinking• Anxiety and depression• Learned helplessness and low self esteem• Oppositional and disrespectful behavior	<ul style="list-style-type: none">• Avoid confrontations and power struggles.• Provide an appropriate peer role model.• Develop a system or code that will let the student know when behavior is not appropriate.• Arrange a designated safe place that student can go to.• Develop a behavior intervention plan that is realistic and easily applied.• Provide immediate reinforcers and feedback.

The Student with Autism Spectrum Disorder

Some children on the spectrum are very severely affected in most or all domains of functioning, while others are only mildly affected. There is considerable overlap of the conditions along the spectrum, meaning that children with different diagnoses may share many characteristics. On the other hand, two children with the same diagnosis may be affected in markedly different ways.

“There is no single behavior that is always typical of autism and no behavior that would automatically exclude an individual child from a diagnosis of autism.”

Common Characteristics and Behavior	Strategies
<ul style="list-style-type: none">• Impaired social relationships• Communication and language deficits• Unusual responsiveness to sensory stimuli• Uneven skill development• Insistence on sameness and perseveration• Visual learners• Concrete thinkers: literal interpretations• Engage in ritualistic routines and repetitive behaviors• Difficulty reasoning and making conclusions• Excessive focus on details	<ul style="list-style-type: none">• Use consistent classroom routines.• Give visual instructions, rules and use visual classroom schedules.• Watch for signs of high anxiety or difficulties a student may be having with sensory and emotional overload, and other signs of stress.• For younger students, give students a visual menu of appropriate behaviors to use when they become agitated or overwhelmed and for older students, give clear written expectations for their work assignments, procedures for completing the task, and a rubric or written guidelines to evaluate their finished product to ensure success.• Understand the need for transition time and plan for it.• Structure the presentation of worksheets. Highlight directions, number the steps to complete harder tasks, and give an example of the completed task to help students transition to and from a work assignment.• Explain clearly the purpose of all work assignments, presentations, multimedia materials, or other learning tasks.• Use special interests as motivators to help students engage in new and/or difficult materials.

The Student with a Speech or Language Impairment

A student with a speech and language impairment refers to **problems with stuttering, articulation, language, or a voice that adversely affects a child's educational performance**. Students with another primary disability (i.e., ASD, CI) may also require/receive speech and language services, and may require the support of a paraprofessional.

Common Characteristics and Behavior	Strategies
<ul style="list-style-type: none">• Receptive and/or expressive language disorders• Voice disorder, including abnormal pitch, loudness or voice quality• Fluency disorder, pauses, hesitations, repetitions• Reluctance to speak	<ul style="list-style-type: none">• Be aware that speech and language problems will affect almost all other areas of student interaction, classroom instruction, and student achievement. Work closely with the teachers and therapists to anticipate problem areas.• Help with instruction by reinforcing important vocabulary words and meanings and checking student understanding• Be a good speech and language model. Speak clearly and use sounds and language structures accurately. Don't reinforce inappropriate vocabulary or sound errors because it sounds "cute".• Work closely with the teacher of the speech and language impaired (TSLI) to incorporate student learned techniques within the classroom setting.• Minimize the pressure to perform verbally and reduce student's anxiety.• Use nonverbal listening skills such as eye contact and facial expressions.• Let the student finish talking.• Don't finish the student's sentences.• Do not allow other students to make fun of the student.• Provide positive feedback for all communication efforts.

Accommodations

Describe changes in format, response, setting, timing, or scheduling that do not alter in any significant way what the test measures or the comparability of scores. Accommodations are designed to ensure that an assessment measures the intended construct, not the child's disability. Accommodations affect three areas of testing: 1) the administration of tests, 2) how students are allowed to respond to the items, and 3) the presentation of the tests (how the items are presented to the students on the test instrument).

Accommodations may include Braille forms of a test for blind students or tests in native languages for students whose primary language is other than English.

Achievement Tests

Standardized tests that measure knowledge and skills in academic subject areas (i.e., math, spelling, and reading).

Age Equivalent

The chronological age in a population for which a score is the median (middle) score. If children who are 10 years and 6 months old have a median score of 17 on a test, the score 17 has an age equivalent of 10-6.

Alternative Assessment

Usually means an alternative to a paper and pencil test; refers to non-conventional methods of assessing achievement (e.g., work samples and portfolios).

Americans with Disabilities Act of 1990 (ADA)

Legislation enacted to prohibit discrimination based on disability.

Aptitude Tests

Tests that measure an individual's collective knowledge; often used to predict learning potential.

Aptitude

An individual's ability to learn or to develop proficiency in an area if provided with appropriate education or training. Aptitude tests include tests of general academic (scholastic) ability; tests of special abilities (i.e., verbal, numerical, mechanical); tests that assess "readiness" for learning; and tests that measure ability and previous learning that are used to predict future performance.

Assessment

Systematic method of obtaining information from tests or other sources; procedures used to determine child's eligibility, identify the child's strengths and needs, and services child needs to meet these needs. The process of testing and measuring skills and abilities. Assessments include aptitude tests, achievement tests, and screening tests.

Assistive Technology Device

Equipment used to maintain or improve the capabilities of a child with a disability.

Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder (ADD/ADHD)

Child with ADD or ADHD may be eligible for special education under other health impairment, specific learning disability, and/or emotional disturbance categories if ADD/ADHD condition adversely affects educational performance.

Audiology

Related service; includes identification, determination of hearing loss, and referral for habilitation of hearing.

Autism

Developmental disability that affects communication and social interaction, adversely affects educational performance, is generally evident before age 3. Children with autism often engage in repetitive activities and stereotyped movements, resist environmental change or change in daily routines, and have unusual responses to sensory experiences.

Autism Spectrum Disorder (ASD)

Disability category in Michigan; refers to having lifelong developmental disability that adversely affects a student's educational performance in 1 or more of the following performance areas: (a) Academic. (b) Behavioral. (c) Social.

Basic Skills

Skills in subjects like reading, writing, spelling, and mathematics.

Benchmark

Levels of academic performance used as checkpoints to monitor progress toward performance goals and/or academic standards.

Behavior Intervention Plan (BIP)

A plan of positive behavioral interventions in the IEP of a child whose behaviors interfere with his/her learning or that of others.

Classroom Assessment

An assessment developed, administered, and scored by a teacher to evaluate individual or classroom student performance.

Cognitive Impairment (CI)

Disability category in Michigan; refers to lack of development primarily in the cognitive domain and adaptive behavior that adversely affects a student's educational performance.

Confidential File

File maintained by the school that contains evaluations conducted to determine whether child is a student with a disability and other information related to special education programs and services; parents have a right to inspect the file and have copies of any information contained in it.

Continuous Improvement and Monitoring System (CIMS)

The Continuous Improvement and Monitoring System (CIMS) is the system used by the state to promote positive outcomes and ensure compliance with the Individuals with Disabilities Education Act (IDEA) of 2004 and the Michigan Administrative Rules for Special Education. CIMS was designed to help districts analyze and interpret data and keep track of all monitoring activities in a single location.

Deaf-Blindness

Disability category in Michigan; includes hearing and visual impairments that cause severe communication, developmental and educational problems that adversely affects educational performance.

Diagnostic Test

A test used to diagnose, analyze or identify specific areas of weakness and strength; to determine the nature of weaknesses or deficiencies; diagnostic achievement tests are used to measure skills.

Disability

In Section 504 and ADA, defined as impairment that substantially affects one or more major life activities; an individual who has a record of having such impairment, or is regarded as having such an impairment.

Early Childhood Developmental Delay (ECDD)

Disability category in Michigan; means a child through 7 years of age whose primary delay cannot be differentiated through existing criteria within R 340.1705 to R 340.1710 or R 340.1713 to R 340.1716 and who manifests a delay in 1 or more areas of development equal to or greater than 1/2 of the expected development. This definition does not preclude identification of a child through existing criteria within R 340.1705 to R 340.1710 or R 340.1713 to R 340.1716.

Emotional Impairment (EI)

Disability category in Michigan; refers to behavioral problems primarily in the affective domain, over an extended period of time, which adversely affect the student's education to the extent that the student cannot profit from learning experiences without special education support.

ESY

Extended school year services

FAPE

Free appropriate public education; special education and related services provided in conformity with an IEP; are without charge; and meets standards of the SEA.

FBA

Functional Behavior Assessment.

FERPA

Family Educational Rights and Privacy Act; statute about confidentiality and access to education records.

Free Appropriate Public Education (FAPE)

Each child who is identified as a student with a disability has an individual entitlement to a Free and Appropriate Public Education (FAPE) under the Individuals with Disabilities Educational Act (IDEA).

Grade Equivalents

Test scores that equate a score to a particular grade level. For example, if a child scores at the average of all fifth graders tested, the child would receive a grade equivalent score of 5.0. Use with caution.

Guardian ad litem

Person appointed by the court to represent the rights of minors.

Hearing impairment (HI)

Disability category in Michigan; permanent or fluctuating impairment in hearing that adversely affects educational performance.

IDEA

The Individuals with Disabilities Education Act.

IEE

Independent educational evaluation.

IFSP

Individualized Family Service Plan.

Inclusion

Practice of educating children with special needs in regular education classrooms in neighborhood schools. See also mainstreaming and least restrictive environment.

Individualized Education Program (IEP)

An annual individualized education program must be convened at least every 12 months.

Intelligence Quotient (IQ)

Score achieved on an intelligence test that identifies learning potential.

Interim Alternative Educational Placement (IAES)

An IAES is where the district places a student with a disability for instructional purposes when it is decided to remove the student from his/her placement for disciplinary reasons.

LEA

Local education agency or school district

LRE

Least restrictive environment; requirement to educate special needs children with children who are not disabled to the maximum extent possible.

Mainstreaming

Practice of placing special needs children in regular classrooms for at least a part of the children's educational program. See also least restrictive environment and inclusion.

Manifestation Determination Review (MDR)

If child with disability engages in behavior or breaks a rule or code of conduct that applies to nondisabled children and the school proposes to remove the child, the school must hold a hearing to determine if the child's behavior was caused by the disability.

Medical Services

Related service; includes services provided by a licensed physician to determine a child's medically related disability that results in the child's need for special education and related services.

Modifications

Changes in the content, format, and/or administration of a test to accommodate test takers who are unable to take the test under standard test conditions. Modifications alter what the test is designed to measure or the comparability of scores. Substantial changes in what the student is expected to demonstrate; includes changes in instructional level, content, and performance criteria, may include changes in test form or format; includes alternate assessments.

Multidisciplinary Evaluation Team (MET)

Established by the district, the primary purpose of the MET is to conduct the evaluations and/or review existing assessment data to recommend or re-determine eligibility to the IEP Team (which may consist of the same members).

Native Language

Language normally used by the child's parents.

Occupational Therapy

Related service; includes therapy to remediate fine motor skills.

OCR

Office of Civil Rights

Orientation and Mobility Services

Related service; includes services to visually impaired students that enable students to move safely at home, school, and community

Other Health Impairment (OHI)

Disability category in Michigan; refers to limited strength, vitality or alertness due to chronic or acute health problems that adversely affects educational performance.

Parent

Parent, guardian, or surrogate parent; may include grandparent or stepparent with whom a child lives, and foster parent.

Physical Impairment (PI)

Disability category in Michigan; refers to severe orthopedic impairment that adversely affects a student's educational performance.

Physical Therapy

Related service; includes therapy to remediate gross motor skills.

Procedural Safeguards Notice

Requirement that schools provide full easily understood explanation of procedural safeguards that describe parent's right to an independent educational evaluation, to examine records, to request mediation and due process.

Progress Monitoring

A scientifically based practice used to assess students' academic performance and evaluate the effectiveness of instruction; can be implemented with individual students or an entire class.

Psychological Services

Related service; includes administering psychological and educational tests, interpreting test results, interpreting child behavior related to learning.

Recreation

Related service; includes therapeutic recreation services, recreation programs, and leisure education.

Related Services

Services that are necessary for child to benefit from special education; includes speech-language pathology and audiology services, psychological services, physical and occupational therapy, recreation, early identification and assessment, counseling, rehabilitation counseling, orientation and mobility services, school health services, social work services, parent counseling and training.

Remediation

Process by which an individual receives instruction and practice in skills that are weak or nonexistent in an effort to develop/strengthen these skills.

Response to Intervention (RTI)

Use of research-based instruction and interventions with students who are at risk and students who are suspected of having specific learning disabilities.

Reviewing of Existing Evaluation Data (REED)

The overall intent of a REED is for districts to review a student's educational, behavioral, and medical data in determining the need for particular evaluations.

School Health Services

Related service; services provided by a qualified school nurse or other qualified person.

Section 504

Section 504 of the Rehabilitation Act protects individuals with disabilities from discrimination due to disability.

Severe Multiple Impairments (SMI)

Disability category in Michigan; refers to having development at a rate of two to three standard deviations below the mean and two or more of the following conditions: (i) A hearing impairment so severe that the auditory channel is not the primary means of developing speech and language skills. (ii) A visual impairment so severe that the visual channel is not sufficient to guide independent mobility. (iii) A physical impairment so severe that activities of daily living cannot be achieved without assistance. (iv) A health impairment so severe that the student is medically at risk.

Special Education

Specially designed instruction, at no cost to the parents, to meet the unique needs of a child with a disability.

Specific Learning Disability (SLD)

Disability category in Michigan; includes disorders that affect the ability to understand or use spoken or written language; may manifest in difficulties with listening, thinking, speaking, reading, writing, spelling, and doing mathematical calculations; includes minimal brain dysfunction, dyslexia, and developmental aphasia.

Speech or Language Impairment (SLI)

Disability category in Michigan; includes communication disorders, language impairments, voice impairments that adversely educational performance.

Speech-Language Pathology Services

Related service; includes identification and diagnosis of speech or language impairments, speech or language therapy, counseling and guidance.

Standard Deviation (SD)

A measure of the variability of a distribution of scores. The more the scores cluster around the mean, the smaller the standard deviation. In a normal distribution, 68% of the scores fall within one standard deviation above and one standard deviation below the mean.

Standard Score

Score on norm-referenced tests that are based on the bell curve and its equal distribution of scores from the average of the distribution. Standard scores are especially useful because they allow for comparison between students and comparisons of one student over time.

Standardized Test

Norm-referenced test that compares child's performance with the performance of a large group of similar children (usually children who are the same age). Tests that are uniformly developed, administered, and scored.

Student with a Disability (SWD)

A student with a disability is defined as any person from birth to age 26 who is determined by an individualized education program team (IEPT) or a hearing officer to have one or more of the impairments (specified below), that necessitates special education, or specially designed instruction.

Subtest

A group of test items that measure a specific area (i.e., math calculation and reading comprehension). Several subtests make up a test.

Supplementary Aids and Services

Means aids, services, and supports that are provided in regular education classes that enable children with disabilities to be educated with nondisabled children to the maximum extent appropriate.

Transition Services

IEP requirement; designed to facilitate movement from school to the workplace or to higher education.

Transportation

Related service about travel; includes specialized equipment (e.e., special or adapted buses, lifts, and ramps) if required to provide special transportation for a child with a disability.

Traumatic Brain Injury (TBI)

Disability category under IDEA; includes acquired injury caused by external physical force and open or closed head injuries that result in impairments; does not include congenital or degenerative brain injuries or brain injuries caused by birth trauma.

Validity

The extent to which a test measures the skills it sets out to measure and the extent to which inferences and actions made on the basis of test scores are appropriate and accurate.

Visual impairment including blindness (VI)

Disability category in Michigan; impaired vision that adversely affects educational performance.

Sources

- *Paraeducators: "Special Education Recommended Core Competencies"*; State of Washington, Office of Superintendent of Public Instruction
- *Supporting Paraeducator Professionalism*; National Education Association
- *Impact: Federal and State Standards for Paraeducators*; University of Minnesota, College of Education and Human Development.
- *Supervising Paraeducators in School Settings* by A.L. Pickett and K. Gerlach
- *Special Education Paraprofessional Handbook*; Los Angeles Unified School District, Division of Special Education.
- *A Paraprofessional Guide to Understanding Students with Disabilities*; Wayne County Regional Educational Service Agency
- *The Paraprofessional Handbook for Effective Support in the Inclusive Classrooms* by Julie Causton-Theoharis



Acknowledgements

Appreciation goes to the following persons who participated in the development of this handbook and our county-wide paraprofessional staff development day. Thanks a million for your dedication and commitment to improving the quality of special education providers.

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Medical Supports and Interventions Specialists:

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Debra Gowanlock-Highe – Nurse, Redford Union Public Schools

Kim King – Teacher Consultant for the Physically and Other Health Impaired Programs, Dearborn Public Schools

Kara Page – Occupational Therapist, Redford Union Public Schools

Sharon Verduzco – Nurse, Dearborn Public Schools

Acknowledgements—continued

Academic Supports and Interventions Specialists:

Katie Dodge – Teacher Consultant for Livonia Public Schools

Sandy Kester – Teacher Consultant for the ASD Programs, Lincoln Park Public Schools

Jadie Kieft – Program Specialist for Livonia Public Schools

Mary Lennox – Teacher Consultant for Livonia Public Schools

Joe Ligaj – Teacher Consultant for the ASD Programs, Lincoln Park Public Schools

Carissa Smith – Teacher of the ASD Program for Lincoln Park Public Schools

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