



# Handbook for Paraeducators in Special Education Programs

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Paraeducator Safety Memorandum of Understanding Committee

Spring 2016

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## Preface

The *Handbook for Paraeducators in Special Education Programs* is a result of the collaboration between the Boulder Valley School District (BVSD) and the Boulder Valley Paraeducator Association (BVPA) to address concerns about student and paraeducator safety, especially those who work in Special Education programs.

Boulder Valley School District (BVSD) paraeducators are professionals who are: Employees of BVSD, members of their school community, and contributors to the success of their departments and programs. BVSD and the BVPA work together towards the same goal: Educating our students for a 21st century world. With over 50 schools and individual programs within BVSD, this handbook is a guideline for all special education paraeducators, from the newly-hired to the veteran paraeducator.

Our roles and responsibilities, policies and regulations, district forms, and websites are topics that are important to every paraeducator and hopefully, they will open conversations between paraeducators and their colleagues to provide our students with a comprehensive BVSD education.

This handbook is intended as a reference guide and does not supersede the BVPA negotiated agreement.

# **BVSD Mission, Vision, Values and Goals**

## **Mission**

The mission of the Boulder Valley School District is to create challenging, meaningful and engaging learning opportunities so that all children thrive and are prepared for successful, civically engaged lives.

## **Vision**

We develop our children's greatest abilities and make possible the discovery and pursuit of their dreams which, when fulfilled, will benefit us all. We provide a comprehensive and innovative approach to education and graduate successful, curious, lifelong learners who confidently confront the great challenges of their time.

## **Values**

Societal inequities and unique learning needs will not be barriers to student success.

We address the intellectual growth, health and physical development, and social emotional well-being of students.

We value accountability and transparency at all levels. We respect the inherent value of each student and incorporate the strengths and diversity of students, families, staff and communities.

## **Goals**

GOAL #1 – Boulder Valley School District will partner with students, families, staff, and community members to address the unique learning needs of each student and to create meaningful and engaging opportunities for each child.

GOAL # 2 - Boulder Valley School District will ensure that each student meets or exceeds appropriate expectations relative to intellectual growth, physical development and social/emotional well-being.

GOAL #3 - Boulder Valley School District will ensure that students, families, staff, and community members experience a safe, healthy, and inclusive environment.

# Table of Contents

<b>Section 1: Professional Duties</b>	<b>5</b>
1.1 Job Descriptions/Duties	5
A. Status Definitions	5
B. Role of Paraeducators	5
C. Equitable Assignments	5
1.2 Work Days	6
1.3 Professional Learning (PL) Time	6
A. Required Trainings	6
1. CPR/First Aid Training	7
2. CPI Training	7
3. Well Managed Schools	7
B. Additional Requests for Support	7
1.4 Work Calendars	8
1.5 Collaboration Time	8
A. Team Norms	8
1.6 Probationary Period	9
1.7 Substitute Paraeducator Plans	9
<b>Section 2: Special Education Programming and Policies</b>	<b>9</b>
2.1 Definitions	9
A. Autism Spectrum Disorder	9
B. Deaf-blindness	9
C. Serious Emotional Disability (SED)	10
D. Hearing Impairment, Including Deafness	10
E. Intellectual Disability (ID)	10
F. Multiple Disabilities	10
G. Orthopedic Impairment	10
H. Other Health Impairment	10
I. Specific Learning Disabilities (SLD)	10
J. Speech or Language Impairment	11
K. Traumatic Brain Injury	11
L. Visual Impairment, Including Blindness	11
M. Developmental Delay	11
2.2 BVSD Continuum of Support	11
A. “Resource” programming	11
B. Intensive Learning Centers (ILC)	11
B-1. Intensive Learning Center for Students w/ Affective Needs (ICAN)	12
B-2. Intensive Learning Center for Students w/ Multiple Needs (Multi ILC)	12
B-3. Intensive Learning Center for Students with Autism (Autism ILC)	12
B-4. Intensive Learning Center for Students who are Deaf or Hard of Hearing	12

(D/HOH)	12
C. Day Treatment	13
2.3 Caseload	13
2.4 Teacher/Paraeducator Ratios to Number of Students	13
2.5 Understanding the Individual Educational Plan (IEP)	13
A. Accommodations	14
B. Modifications	14
C. Behavior Support Plans (BSP)	15
D. Goals	16
E. Service	16
E. Service Delivery	16
F. Least Restrictive Environment (LRE)	17
2.6 Referrals and Change of Placement	18
2.7 Student Transfers Into BVSD	18
<b>Section 3: Safety Protocols and Procedures</b>	<b>19</b>
3.1 Restraint Policies and Procedures	19
3.2 Protective Gear	19
3.3 Transfer and Lift Guidelines	19
3.4 Reporting Staff and Student Injuries	20
3.5 Student Accident Reports	20
3.6 Student Behavior Reports	21
3.7 Data Sheets	21
3.8 Developing and Using Individualized Healthcare Plans (HCP)	21
<b>Section 4: Resources</b>	<b>21</b>
4.1 Employee Assistance Program	21
4.2 Child Abuse Reporting	22

# Section 1: Professional Duties

## 1.1 Job Descriptions/Duties

Each paraeducator job classification has its own job description. Job descriptions can be found on the job description page of the [BVSD website](#). Click on the category “BVPA” to view each of the job descriptions. This link also provides the Classified evaluation standards for your reference: [Classified/APT Content Standards](#)

### A. Status Definitions

Per the [BVPA Negotiated Agreement](#): D-1.1 STATUS DEFINITIONS: Assigned and/or available hours are either temporary or regular. This is determined by the funding source and/or the reason for available hours. An employee may have both regular and temporary hours.

1. Temporary Employees: Employees who are assigned hours that are available for a short term or intermittent basis, where it is impractical to employ on a regular basis. Examples would include, but not limited to, hours from conversions, hours from an appeal or filling in for an employee on a leave of absence.
2. Regular Employees: Employees that are assigned hours that are available in a continuing scheduled, on-going position.

### B. Role of Paraeducators

Per the [BVPA Negotiated Agreement](#): C-1.2 PARAEDUCATORS: The Board reaffirms the important role paraeducators play in assisting the students and staff in the educational program of the District. It further agrees to provide paraeducators in both the elementary and secondary school as determined by the effective practices and staffing guidelines. Priority for paraeducator time may be given to: Relieve class overloads, staff resources centers and libraries, meet the unique and or unusual needs of particular school, work directly with students to meet their individual needs of a particular school, work to meet their individual needs as overseen by the certified staff member, and support programs in non student contact positions. Assignment of paraeducator schedules at the building level may be made through a shared decision making process.

### C. Equitable Assignments

The safety and supervision of each student is the responsibility of all staff members. A paraeducator in a special education program may be assigned to work with one specific student or several different students throughout the school day. Schedules will be created by the special education teacher in consultation with the building administrator. Paraeducators have unique skills, training, and interests that are brought to the learning environment. These skills will be considered when creating schedules. Flexibility is a key attribute of a paraeducator as they can be assigned to work with multiple students in multiple content areas. Schedules of paraeducators can change throughout the school year. All changes will be communicated with the paraeducator by the special education teacher. When special skills are required to meet the needs of a student, training for the program staff will be provided per the [BVPA Negotiated Agreement](#) D- 11.1 COLLABORATION TIME.

### 1.3 Contract Year/Work Days

- Non-instructional, Instructional, Intensive and Health Room Paras = 175 workdays (link is an example) (172 student contact days and three Professional Learning days)
- Pre School #1/Early Childhood Education (ECE) First Paras -167 workdays
- Pre School #2/Early Childhood Education (ECE) Second Paras - 135 workdays
- Special Skills Aides (SSAs) workdays vary by department

### 1.4 Professional Learning (PL) Time

Per the [BVPA Negotiated Agreement](#) D-6.1 PROFESSIONAL LEARNING: Professional Learning (PL) will be provided to support individualized professional learning opportunities that promotes and reinforces improved job performance, career advancement, and professional growth.

1. The *paraeducator and supervisor are mutually accountable for trainings* required for the position, such as CPR/First Aid, CPI and other school and district protocols. Required trainings shall be scheduled at the earliest available opportunity.
2. A minimum of three days training, prorated by FTE (incumbent of all paraeducator FTE), will be provided to each paraeducator every school year.

The three professional learning days are based on the daily number of hours in which a paraeducator works. (Total annual PL hours = 3 x daily hours). If paraeducators attend a professional learning training on a student contact day, they may come in on another nonstudent contact day to fulfill their 175 days.

ECE First Paraeducators do not have 3 extra days of professional learning because the district ECE programs builds in professional learning on Mondays when Pre-k students are not in the building. This is the only paraeducator group to which this applies.

The building administrator and the paraeducator will collaborate to establish an initial calendar defining professional learning and scheduled days of work for the upcoming school year no later than June 1. The parties may amend for PL opportunities outside the established working calendar. [Paraeducator recommended Professional Learning Pathways](#) are available to assist in the planning of yearly PL. Contact your level Special Education Director for District led professional learning opportunities.

Professional learning opportunities offered within BVSD are listed in [MyPassport](#).

#### A. Required Trainings

Professional learning includes trainings required for specific positions. Outlined below are the required trainings for specific paraeducator groups. These trainings are to occur as a part of the paraeducators 175 days, most typically provided on non student contact days (see 1.1 above for more information.) Scheduling for these trainings should be coordinated between the paraeducator and their supervisor.

##### Intensive Paraeducators\*

- CPR/First Aid/AED (every 2 years)
- CPI (Initial 8 hour course, then 3 hour refresher annually)
- Well Managed Schools (for paraeducators in ICAN programs)

\* Paraeducators in Preschool Programs are not required to have CPI training but may take the course.

### Health Room Paraeducators

- Current First Aid/CPR/AED (every 2 years)
- Medication Training (every 3 years)
- Nursing delegation of medications and tasks (annually)
- CDPHE immunization online course (annually)
- Child Abuse Training (annually for ECE schools)
- Standard/Universal Precautions (annually)
- Emergency Response Team (ERT) training if new member of the ERT (only initial training is required)

### Early Childhood Education First Paraeducator

- Current First Aid/CPR/AED (every 2 years)
- Medication Training (every 3 years)
- Nursing delegation (annually)
- Standard/Universal Precautions (annually)
- Child Abuse Training (annually)

### Early Childhood Education Second Paraeducator

- Medication Training (every 3 years)
- Nursing delegation (annually)
- Standard/Universal Precautions (annually)
- Child Abuse Training (annually)

## **1. CPR/First Aid Training**

Individual schools are now responsible for training staff in CPR/First Aid. Each school has a trainer and will offer courses to staff at least once a year. Paraeducators should consult with their principal when needing to participate in a training.

## **2. CPI Training**

Crisis Prevention Intervention (CPI) training is required of all paraeducators who work in Special Education programs. The initial course is 8 hours and then a 3 hour refresher course is required each year thereafter unless the certification has expired. Certification expires in June each year, so paraeducators can take the refresher course at any time throughout the current school year. It is not dependent upon when they took the course during the year. If a refresher is not taken, the initial 8 hour training must be taken again. Paraeducators must register for a course in [MyPassport](#) by October 1 each year. This will ensure that all paraeducators have the opportunity to fulfill their requirements. Please visit the [CPI Guidelines in BVSD document](#) for more information about CPI certification.

## **3. Well Managed Schools**

Well Managed Schools training is offered to all paraeducators working in our Intensive Centers for Affective Needs (ICAN.) In addition to taking a 16 hour training, paraeducators are provided on the job coaching and consultation regarding the skills learned in this training.

## **B. Additional Requests for Support**

Should a student demonstrate significant behaviors of concern, each site has a building assigned psychologist (psych) or social worker (SW) who has specific training and expertise to address these needs. Concerning behaviors should be referred to the building based psych/sw and changes should be reflected in a Behavior Support Plan (BSP.) The BSP should be shared with the staff who work with the specific child per the BVPA [Negotiated Agreement](#) (C-8.1 EMPLOYEE ASSIGNED TO STUDENT(S) EXHIBITING PATTERNS OF AGGRESSION OR INTIMIDATION). Should a



program or student need additional resources, including training, building administrators may request additional district specialist support. This request should be made by the building administrator to the assigned grade level Special Education Director.

## 1.5 Work Calendars

Per the [BVPA Negotiated Agreement](#) D. 9.1 EMPLOYEE ASSIGNMENT NOTIFICATION B: The building administrator and the paraeducator will collaborate to establish an initial calendar defining professional learning and scheduled days of work for the upcoming school year no later than June 1. The parties may amend for PL opportunities outside the established working calendar.

## 1.6 Collaboration Time

Per the [BVPA Negotiated Agreement](#) D-11.1 COLLABORATION TIME: The District and the Association believe that it is important for paraeducators to receive necessary information regarding students in order to provide appropriate support. Time will be provided by the building administrator for paraeducators working 20 hours or more to collaborate with staff regarding students. Appropriate staff and paraeducators will collaborate to address student safety and learning needs as per the Family Educational Rights and Privacy Act (FERPA) and other state and federal guidelines, including but not limited to the student's individual educational plan, health care plans, behavior support plans and other relevant data.

All intensive programs should schedule regular collaboration time for teams (teachers/paraeducators) to meet and discuss program/student needs. Collaboration time should be scheduled during working hours when possible. Scheduling collaboration time outside of the school day or normal paraeducator work hours must be approved by the building principal and district special education administrator. Paraeducators should add the approved time to their weekly timesheets.

### A. Team Norms

Norms are the rules that a team agrees to follow as it conducts its work. Intensive teams should collaboratively develop team norms and review these norms at the beginning of each meeting. High performing teams generally have a set of norms that govern individual behavior, facilitate the work of the group, and enable the group to accomplish its task in a professional manner.

#### Samples of Norm Statements

- I agree that all discussions are confidential
- I agree to be on time so that the meeting can start and end on time
- I agree to be present, informed, prepared, and focus all comments to the issue at hand
- I agree to create a safe and positive community atmosphere by treating other members with dignity, avoiding judgmental comments, and honoring the individuality of each member of the group
- I agree to focus on what is best for students; to set aside vested interests and concentrate on the "big picture"
- I agree to support and implement the decisions of the team
- I agree to share relevant questions and concerns at the meeting either in small groups or whole group
- I agree to listen with respect, empathy, and an open mind in order to understand all sides of an issue

#### Responsibilities of each team member

I will:

- Adhere to the team norms
- Enforce team norms
- Be informed of what takes place at the Team Meeting if I am absent

## 1.7 Probationary Period

Per the [BVPA Negotiated Agreement](#) D-4.1 PROBATION PERIOD: All new regular employees will be hired under a probationary period of one (1) calendar year from the first working day of employment as a regular employee. Should the employee voluntarily change pay grades or schools, the probationary period would start over on the effective date of the new assignment. The satisfactory completion of the probationary period will be the basis for continued employment. The employee will be provided with a job description and a copy of the evaluation form that will be used for the evaluation. If at any time during the evaluation period the employee's performance shall be deemed unsatisfactory, the immediate supervisor(s) or building administrator will discuss the area of concern with the employee, and the employee will be given a reasonable amount of time to correct his/her misconduct and inefficiency.

## 1.8 Substitute Paraeducator Plans

Paraeducators should prepare a substitute folder that includes their daily schedules, important information regarding each student's needs/disability, student behavior plans, and any other relevant information that is needed to cover the paraeducator's responsibilities. Substitute plans should be made in collaboration with the special education teacher.

# Section 2: Special Education Programming and Policies

## 2.1 Definitions

The following are the identified categories that a student may be eligible to receive special education services for in the state of Colorado. The school psychologist or social worker would be the appropriate contact for any questions regarding these categories. Additional special education definitions and terms can be found at this [related document](#).

### A. Autism Spectrum Disorder

Autism means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, that adversely affects a child's educational performance. Characteristics associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, unusual responses to sensory experiences and persistent difficulties in the social use of verbal and nonverbal communication.

### B. Deaf-blindness

Deaf-blindness means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that cannot be accommodated with special education supports solely for children with deafness or children with blindness.

### C. Serious Emotional Disability (SED)

Serious Emotional Disability (SED) identifies a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's

educational performance: An inability to learn that cannot be explained by intellectual, sensory, or health factors; an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; inappropriate types of behavior or feelings under normal circumstances; a general pervasive mood of unhappiness or depression; and/or a tendency to develop physical symptoms or fears associated with personal or school problems. SED does not apply to individuals who are socially maladjusted.

**D. Hearing Impairment, Including Deafness**

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

**E. Intellectual Disability (ID)**

Intellectual Disability (ID) means significantly below-average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a child's educational performance.

**F. Multiple Disabilities**

Multiple disabilities means concomitant impairments (e.g., Intellectual Disability - Blindness or Intellectual Disability-Speech Language Impairment.) Multiple disabilities does not include deaf-blindness.

**G. Orthopedic Impairment**

Orthopedic impairment means a severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by a congenital anomaly, impairments caused by disease (e.g., poliomyelitis, bone tuberculosis), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures).

**H. Other Health Impairment**

Other health impairment means having limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that - (i) Is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome; and (ii) Adversely affects a child's educational performance.

**I. Specific Learning Disabilities (SLD)**

Specific Learning Disability (SLD) means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations, including conditions such as dyslexia and dysgraphia. Specific learning disability does not include learning problems that are primarily the result of: Visual, hearing, or motor disabilities; intellectual disability; serious emotional disability; cultural factors; environmental or economic disadvantage; or limited English proficiency.

**J. Speech or Language Impairment**

Speech or language impairment means a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects a child's educational performance.

**K. Traumatic Brain Injury**

Traumatic brain injury means an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. Traumatic brain injury applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. Traumatic brain injury does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma.

**L. Visual Impairment, Including Blindness**

Visual impairment including blindness means an impairment in vision that, even with correction, adversely affects a child's educational performance. The term includes both partial sight and blindness.

**M. Developmental Delay**

A child with a developmental delay shall be three through eight years of age and who is experiencing developmental delays in one or more of the following areas: Physical, cognitive, communication, social or emotional, or adaptive, which prevents the child from receiving reasonable educational benefit from general education.

**2.2 BVSD Continuum of Support**

Boulder Valley School District is committed to creating inclusive school settings for all students. It is expected in most instances that a student with disabilities can be educated in the school he/she would attend if not disabled, and in a general education classroom at least part of the day, with appropriate modifications and accommodations. When it is determined that a student's needs cannot be met in his/her home school and a more restrictive environment is necessary, BVSD has a continuum of services to meet those significant needs.

**A. "Resource" programming**

Most students in BVSD who require special education support have their needs met through resource programming. Within this model, specialized instruction can be provided in the general education classroom or in small groups, depending on the level of need. Resource teachers are trained in special education and maintain appropriate licensure to work with students with a variety of needs. Schools within Boulder Valley School District are staffed between approximately 1:21-1:25 teacher/student ratio (C-18 BVEA Negotiated Agreement). This level of support is available at all neighborhood schools. In addition, there are speech-language, occupational therapy, physical therapy, and psychology or social work services available at all neighborhood schools.

**B. Intensive Learning Centers (ILC)**

BVSD consolidates resources at some schools to meet the needs of students who require more service and support than what is available in the neighborhood school. These classes are called Intensive Learning Centers (ILCs). Although these centers are in regular schools that may be a child's neighborhood school, they are often at a different location than a student's neighborhood school. Students are referred for ILCs if the student's IEP team (including parents) has evidence that his/her needs can no longer be met in his/her neighborhood school through resource programming. The purpose of an ILC is to provide intensive services for students so

they can build the skills they need to return to their neighborhood schools and/or lesser levels of services. Student success in each program is based on the student's ability to participate in the general classroom with progressively less support. There are several different ILCs that provide focused expertise and instruction for students (see below). ILCs are staffed with approximately 1:10 teacher/student ratio (C-18 BVEA Negotiated Agreement); paraeducator support is also allocated to each program.

**B-1. Intensive Learning Center for Students w/ Affective Needs (ICAN)**

Students whose behavioral or emotional needs interfere with their ability to make reasonable progress in their neighborhood school may be referred to an ICAN program. Students who are referred to ICAN programs require specific positive behavior support planning. Teachers in ICAN programs have particular expertise in supporting students with emotional and/or behavioral needs. Additional psychologist or social work time is allocated to support these students.

[Quality Program Indicators For Students With Severe to Profound Social Emotional Needs \(Intensive Center for Affective Needs\)](#)

[ICAN Program Guide](#)

**B-2. Intensive Learning Center for Students w/ Multiple Needs (Multi ILC)**

Students referred to Multi ILCs may have a combination of cognitive, medical or physical, communication, and adaptive behavior needs. Students usually require significant modifications to the general curriculum. Teachers in Multi ILCs have expertise in working with students with significant support needs. Additional speech-language and occupational therapy time is allocated to support these students.

[Quality Program Indicators For Students With Multi-Intensive Needs \(Intensive Learning Centers\)](#)

[Multi ILC Handbook](#)

**B-3. Intensive Learning Center for Students with Autism (Autism ILC)**

Students referred to Autism ILCs have a medical diagnosis or educational identification of Autism and require intensive curricular and/or behavioral modifications that cannot be met by resource support alone. Students may require a variety of instructional approaches and accommodations, including (but not limited to) discrete trial, incidental teaching, use of social stories, and sensory diets. Students may require significant modifications to the general curriculum. Teachers in Autism ILCs have expertise in working with students on the autism spectrum. Additional speech-language and occupational therapy time is allocated to support these students. Each program is supported by a Board Certified Behavior Analyst (BCBA).

[Quality Program Indicators For Students With Autism \(Intensive Learning Centers\)](#)

[Autism ILC Handbook](#)

#### **B-4. Intensive Learning Center for Students who are Deaf or Hard of Hearing (D/HOH)**

Students referred to the D/HOH program have an identified hearing disability. They require intensive instruction in academics and communication in order to access the curriculum. Students may communicate orally or with sign language. Teachers in the D/HOH program are licensed Teachers of the Deaf. Educational interpreters are allocated at these sites for those students who need sign language interpreters to access the curriculum.

[Quality Program Indicators For Students Who are Deaf or Hard of Hearing](#)

#### **C. Day Treatment**

Boulder Valley School District (BVSD) maintains day treatment programs that operate as part of a tri-agency agreement between BVSD, Mental Health Centers of Boulder and Broomfield Counties (MHCBBC), and the Boulder County Department of Housing and Human Services (BCDHHS). Students who are referred for the day treatment program have documented mental health concerns that interfere with their ability to be successful in lesser restrictive settings, including district ICAN programs. When students are referred educationally to day treatment programs, they are also referred simultaneously to MHCBBC and BCDHHS. Students in these programs receive therapeutic services (both with an on-site therapist and with a psychiatrist) through MHCBBC as part of their educational program. Teachers in the day treatment classrooms have expertise in supporting students with emotional and behavioral needs.

### **2.3 Caseload**

The following is the teacher caseload guidance as listed in the BVEA Negotiated Agreement. These are basic guidelines and are not considered to be caps or restrictions. It is the responsibility of the special education teacher and supervisor to create schedules that will meet the needs of all students on his/her caseload based on student needs.

- Resource 1:21 Elementary/1:25 Middle/High School
- ILC – Multi/Autism 1:10 All levels
- ICAN 1:10 Elementary/Middle School/1:15 High School
- Day Treatment 1:8

### **2.4 Teacher/Paraeducator Ratios to Number of Students**

A special education intensive program (Multi ILC, ICAN, Autism ILC, Day Treatment) is allocated a consistent number of paraeducators based on the yearly allocation formula. A program paraeducator is considered .875 FTE (35 hours per full week) and .9375 at high school (37.5 hours per full week) and is allocated as an individual assignment rather than a set of hours that can be altered/divided.

Currently there are no resource paraeducators allocated in BVSD. Student specific paraeducator allocations are added over and above the yearly allocation formulas based on individual student needs. These additional allocations are temporary and are allocated on a yearly basis contingent upon student enrollment. These additional allocations are intensive paraeducator positions and may support students at any level of service (resource, ILC, etc.)

### **2.5 Understanding the Individual Educational Plan (IEP)**

The Individualized Education Program, also called the IEP, is a document that is developed for each public school child who needs special education services. The IEP is created through a team effort, including both parents and school staff, and is reviewed at least annually. An IEP defines the learning needs and services for a student who is eligible for these services. The content and process of an IEP is determined through both federal and state laws.

Paraeducators should have access to the IEP for the students with whom they work per the [BVPA Negotiated Agreement](#) (D-11.1 COLLABORATION TIME). They may access the entire IEP or an IEP at a Glance/Snapshot IEP. It is best practice for a paraeducator to have knowledge of student's goals, accommodations and Behavior Support Plan. Paraeducators should collaborate with special education teachers to understand how the student's IEP is to be implemented and specifically translated into the daily interactions within a school setting. Here is one possible [matrix](#) to support a discussion around each student's goals and where they are to be worked on throughout the school day. By law, IEP information must be kept confidential and only disclosed to staff who require this information in their work with the student. Paraeducators with questions regarding who can access IEP information should inquire with the student's special education teacher prior to disclosing such information.

The following sections provide a description of some key components to a student's IEP:

#### **A. Accommodations**

IEP accommodations allow a student to access the curriculum, but do not change the standards or expectations in any way. Accommodations allow different instructional designs to support students and to enable them to receive special education services in the general education classroom. Provision of documented accommodations is not discretionary. Accommodations are to be routinely provided and implemented with fidelity in all identified settings as needed.

Accommodations include, but are not limited to:

- Assistive technology devices
- Adaptations that change how a student accesses information and demonstrates learning, such as books-on-tape, large print books, braille/signed materials, calculators or word processors with adapted keyboard entry or word prediction software
- Individualized supports, such as rephrasing of questions and instructions, allowance for additional time on assignments or testing accommodations
- Curricular aids, such as highlighted reading materials, main idea summaries, organizational aids, pre-written notes or study guides

It is critical that the IEP team consider student preferences when determining accommodations. Student input can increase the likelihood that an accommodation will be used effectively. Students can also provide feedback on which accommodations are helpful and which are not. For instance, a student with a visual impairment may require being moved to the front of the classroom in order to see the whiteboard and teacher more easily. If a seat next to the window causes a glare on seatwork and the whiteboard, however, the student may ask to be moved to the other side of the room.

#### **B. Modifications**

Classroom modifications, as defined in the IEP, adapt the content and instructional complexity level of materials. Performance criteria are based upon alternate academic achievement standards. A student receiving modified instruction, based upon the IEP team's determination that the student meets participation guidelines as a student with a significant cognitive disability whose progress is best measured against alternate standards, also participates in classroom/district/state assessment by taking an alternate assessment based on alternate achievement standards. The IEP team determines that a child is eligible for modifications and documents the areas that modified curriculum is needed. The special education teacher is responsible for planning the specific modified curriculum to be implemented by various staff working with the student.



The following is an example of an Accommodations and Modifications section in a BVSD IEP.

## **ACCOMMODATIONS & MODIFICATIONS**

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### **Accommodations**

**What type(s) of accommodations(s) *if any* is (are) necessary for the student to access the general curriculum and/or appropriate activities to make effective progress?**

IDEA 300.320(a)(4)(i)-(iii)

IDEA 300.320(a)(6)(i)

Visual support to help ■ process auditory information

Repeating instructions and information

Frequent breaks

Examples of instructions and activities

Review of vocabulary

Review of illustrations in a book prior to reading

Strategies to breakdown multi-syllable words

Prompts to check for meaning

### **Modifications**

*No curricular modifications were identified by the team.*

## **C. Behavior Support Plans (BSP)**

A [Behavior Support Plan](#) (BSP), sometimes called Behavior Intervention Plan (BIP), is a written document describing the environmental changes that will need to take place to bring about changes in a wanted or an unwanted behavior. It serves as a guide to prevent maladaptive behavior and to reinforce appropriate replacement behaviors. A Behavior Support Plan is written after completion of a Functional Behavior Assessment (FBA). Although Behavior Support Plans might vary, an effective BSP should contain some critical elements such as:

- A clear and operational definition of the problem behavior
- A clear link to the function of the behavior and antecedent and setting events as identified by the functional behavior assessment
- Strategies for addressing antecedent variables that may prevent the problem behaviors from occurring or promote more appropriate behaviors
- Strategies for teaching alternative or replacement behaviors
- Strategies to reinforce alternative or replacement behaviors and reduce reinforcement of problem behaviors
- Strategies for matching the BSP/BIP to unique contexts of the classroom, family, and community to enhance the success of the plan (contextual fit),
- Response protocols and strategies
- A method for the collection of data for evaluation of the effectiveness and implementation fidelity of the BSP/BIP

Additional information to the BSP/BIP may be a safety plan for use only in crisis situations. Once written, all staff working with a child should know the BSP and implement it across settings.



BSPs exist for all students with IEPs in the area of Autism and/or Significant Emotional Disability, and may be completed for students with other disabilities demonstrating significant behavior.

#### D. Goals

Annual goals represent the IEP team's estimate of what the student can reasonably be expected to accomplish with specially designed instruction or support during the subsequent 365 days. A student's goals provide the compass that guides the IEP team's decision-making. Annual goals reflect the IEP team's judgment, based on current levels of performance, potential for learning, and rate of development regarding what the student should accomplish. The team answers the question: "With specially designed instruction, what do we expect the student to know, understand, and be able to do at the end of the next 12 months?"

For students with disabilities who take alternate assessments aligned to alternate achievement standards, the IEP must include a description of benchmarks or short-term **objectives**. Students whose IEPs require objectives should still have goals and objectives that relate to the standards. Some students may require extended evidence outcomes (EEOs). EEOs allow IEP Teams to individualize benchmarks and/or assessments to focus on the key components of the standards, related access skills, or any combination necessary for a particular student to progress toward the standard. These alternate expectations are directly aligned to the grade level expectations for all students.

Paraeducators working with students on IEPs should be aware of the goals for each student and what their role is in implementing the work on each goal as well as relevant data collection.

The following is an example of an annual goal from a BVSD IEP:

#### **ANNUAL GOALS** IDEA 300.320(a)(2)(i)

**Progress Report (Describe how parents will be informed of █████ progress towards goals and how frequently this will occur.)** IDEA 300.321(a)(3)(iii)

█████ family will be notified of █████ progress with regularly scheduled trimester report cards.

##### **Goal 1**

**Area of Need:** Reading

**Projected Achievement Date:** 11/1/2015

**ESY:** No

**Unit of Measurement:** See goal

**Baseline Data Point:** See goal

**Evaluation Method:** Focused Assessments

##### **Measurable Goal:**

By November 2015, █████ will read a third grade level text (Level N or above on EDL or benchmark reading assessment) with appropriate fluency and 97% or better accuracy (as measured by the EDL or other grade-level benchmark.) █████ is currently reading at an Fountas and Pinell level J with 97% accuracy in Spanish. █████ fluency at this level is currently a 2 out of 3 (reads primarily in 3-4 word phrases, some smooth, expressive interpretation and pausing, mostly appropriate stress).

##### **Standards:**

- 2 Reading for All Purposes // 1 Strategies are needed to make meaning of various types of literary genres // Evidence Outcomes // e Read grade level text accurately and fluently, attending to phrasing, intonation, and punctuation

#### **Delivery**

The service delivery table portion of an IEP describes the duration and frequency of

#### **E. Service**

special education and related services to be provided to the child by a special educator or related service provider. Services include supplemental instruction to address specific skill deficits, and may include program modifications or supports for school personnel to enable the child to advance appropriately toward attaining annual goals, to be involved and make progress in the general education curricula, and to participate in extracurricular and other nonacademic activities with other children with disabilities and nondisabled children. The service delivery statement includes a statement of the types of specialized instruction or interventions and how they will address identified areas of need, as well as the setting in which services will occur. A paraeducator may be a part of the implementation of “specialized instruction” per the service delivery in an IEP. The following is an example of a Service Delivery table and statement from a BVSD IEP:

## SERVICE DELIVERY STATEMENT

### Statement of types and anticipated location of services to be provided to and on behalf of the student:

Special Education services will be delivered under the direction of the case manager in collaboration with the general education teachers in the general education setting. This IEP will serve as the basis for the [REDACTED] academic and transition planning. The IEP goals will be supported and implemented through an integrated service delivery model which includes consultation, modeling, re-teaching, co-teaching and differentiated instruction. Specialists will include: classroom teacher and special education teachers. The time with the special education teacher will provide time for reteaching and targeted instruction and practice in reading fluency and progress monitoring, in addition to developing executive functioning skills. [REDACTED] will also work with case manager to organize and make necessary accommodations in assignments and assessments.

Specialized Instruction Area and/or Related Services 300.320(a)(4) Include ESY if applicable	Location	Special Education or Related Services	Service Provider Role 300.18 & ECEA 3.04	Start Date 300.320 (a)(7)	End Date 300.320 (a)(7)	Frequency of Special Education/Related Services		
						Minutes	Frequency	Direct/ Indirect
Specialized Instruction	Outside General Education Classroom	Special Education	Special Education Teacher	12/4/13	12/2/14	15	weekly	Indirect
Specialized Instruction	Outside General Education Classroom	Special Education	Special Education Teacher	12/4/13	12/2/14	300	weekly	Direct

## F. Least Restrictive Environment (LRE)

Least restrictive environment (LRE) is the part of the IEP that describes the percentage of time a student participates in the general education environment. Each year when the IEP is developed, the IEP team discusses the LRE for the student. The LRE discussion for every student with a disability, including preschool students, must consider placement in the general education classroom with necessary supplementary aids and services as the first placement option. The IEP team should identify the student’s strengths, and build upon those strengths when determining how the student will benefit educationally from receiving special education services in the general education classroom. Nonacademic considerations such as the social/emotional benefits of interaction with peers without disabilities, social development and self-care goals are equally important when discussing general education classroom placement.

The following is an example of the LRE section of a BVSD IEP:

### **RECOMMENDED PLACEMENT IN THE LEAST RESTRICTIVE ENVIRONMENT (SPECIAL EDUCATION SETTING)** IDEA 300.320(a)(5)

*To the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children without disabilities; and special classes, separate schooling or other removal of children with disabilities from the regular education environment occurs only if the nature or severity of the disability is such that education in regular classes, with the use of supplementary aids and services, cannot be achieved satisfactorily.*

Placement Options Considered	Selected	Describe the possible advantages and disadvantages of this placement option for the student and the modifications/supplementary aids and services considered to reduce possible disadvantages to the student.
General education class at least 80% of the time	Yes	██████ requires specialized instruction and maximized inclusion with ██████ peers to make effective progress.

**Prior to Meeting:** General education class at least 80% of the time

**Placement Date:** 11/03/2014

**Placement Type:** Ages 6-21

**LRE Setting:** General education class at least 80% of the time

- Time in general education environment: 91.8%
- Time outside general education environment: 8.2%

## **2.6 Referrals and Change of Placement**

District specialists are part of a multidisciplinary team. If a specialist comes to your building to collaborate with your team, they may provide: Observation, data collection tools, coaching, modeling, and/or feedback to team members about current and/or additional interventions. Below is a flowchart utilized by building teams when considering a request for district support. [Change of Placement and Referral Process](#)

When specialists come out to collaborate with teams around significant behavior concerns or, if the team is thinking the student may need an increased level of support, specialists will review all of the student's current IEP and behavior plan documents prior to visiting. The specialist will be looking at whether the current goals and plans address the student's need, are being implemented with fidelity, and need changes/adjustments. The following link is a diagram of the process:

[Change of Placement and Referral Process](#)

## **2.7 Student Transfers Into BVSD**

When a student transfers from another state or district with an IEP the following processes are followed:

- Records: The student's school of enrollment should make the request for all records from the sending system. If the school is having difficulty securing the records, the case manager may follow up and/or ask for assistance from the Records Team.
- In-state Transfer: The School District must immediately (within 3 school days per CDE) implement special education and related services for the student in accordance with the student's existing IEP or interim services agreed upon by the School District and parents. The School District may adopt the student's existing IEP or convene an IEP meeting to develop, adopt and implement an IEP through the standard process.
- Out-of-state Transfer: The School District must provide comparable (not identical) services until the School District conducts an evaluation, if necessary, and develops, adopts and

implements a new IEP, if appropriate. If the School District decides to conduct an evaluation, and thus is essentially questioning eligibility, it must treat the evaluation as an initial and finish it within 60 calendar days.

If, after taking reasonable steps to obtain the child's records from the public agency in which the child was previously enrolled, the School District is unable to obtain the IEP from the previous public agency or from the parents, then the School District is not required to provide comparable services to the student because the School District would be unable to determine what constitutes comparable services for the child. In such case, the School District may place the child in the regular school program and conduct any necessary evaluation.

NOTE: The law does not establish specific timelines for the School District to adopt the child's IEP from the previous public agency or to develop, adopt, and implement a new IEP. Therefore, as is always true under IDEA in the absence of a specific deadline, the School District must take these steps within a reasonable period of time to avoid any undue interruption in the provision of required services.

## **Section 3: Safety Protocols and Procedures**

### **3.1 Restraint Policies and Procedures**

- [BVSD Restraint Policy JKA](#)
- [BVSD Restraint Regulation JKA-R](#)

[Restraint Incident report](#) forms (JKA-E1) must be completed when a hold lasts for any length of time. It is considered a restraint if the hold lasts for more than 1 minute. Restraint forms are completed collectively by the teacher in collaboration with the building administrator, paraprofessionals and any involved team member. Copies of the incident report are provided to the parent/s, student's confidential file, Director of Special Education, and Transportation file [if applicable].

Internal reviews: Following a significant behavioral event, the team can participate in a period of postvention or debrief, whereby they review the event in order to complete a restraint incident report. Postvention includes reviewing current data and interventions in order to evaluate interventions and make any changes necessary to prevent additional behavior. At times, a suicide risk review or threat assessment might also be completed by the school counselor, psychologist, or social worker. These changes should be reflected in the student's Behavior Support Plan which is reviewed annually and as needed.

### **3.2 Protective Gear**

Many accidents and injuries can be prevented by staff members utilizing protective clothing or items. While employees cannot attach items to students or individuals (mechanical restraints), they are not prohibited from wearing protective gear. Options to consider include tying back your hair, removing jewelry, wearing a hat, and/or thick fabric (denim) that resist bites/pinches/scratches. If modifying personal attire does not reduce injury, a program or the district will provide protective gloves, sleeves, hats, eyewear, etc., to prevent injury from specific behaviors. Please contact [kelly.miller@bvsd.org](mailto:kelly.miller@bvsd.org) for further information.

### **3.3 Transfer and Lift Guidelines**

When transferring a student (i.e. wheelchair to toilet, lifting to a changing table) the needs and scenarios for each student will be unique. Special education teachers and/or paraeducators should

request and receive individual training from a BVSD physical therapist regarding transfers and equipment used for transfers. There are also general lifting guidelines that have been shared by Human Resource. The link can be found here:

[General Lifting Safety Guidelines](#)

### 3.4 Reporting Staff and Student Injuries

[Injury/Illness Incident Report](#) (For staff ONLY - Click on Submit Accident Report)

This link is to the BVSD Workers' Compensation form and should be filled out within four days of the occurrence for any injury whether or not medical attention is needed. Examples of injuries that may not need immediate medical attention, but need to be documented include: Bite marks, a kick or hit with an object, muscle strains from push, pulls or lifts, or injuries resulting from restraints. Incident reports will be reviewed quarterly and injury patterns will be addressed through training at the school and district level.

Unsafe working conditions should be reported to building/department administrators.

### 3.5 Student Accident Reports

All staff, coaches, and volunteers need to complete and **fax** original copies of [Student Accident Report \(SAR\)](#) to Health Services 720-561-5185 (within 36 hours) when an injury occurs that meets these criteria.

- When a recommendation to seek medical or dental attention has been made, i.e. laceration possibly needing sutures, foreign body that is lodged in the eye, permanent tooth damage or loss of a permanent tooth, etc.
- When the nature of the injury is such that it might result in a visit to a Health Care Provider or dentist, i.e. possible sprain
- Head or Face Injury
  - The Head and Face Injury Letters and Protocol need to be completed whenever a head or face injury occurs.
  - Complete a SAR if signs and symptoms consistent with concussion or other head injury occur such as: Confusion or disorientation, dizziness, headache, nausea and/or vomiting.
- Poisoning, internal or external
- Suspected fractures
- Any bites, human or animal
- Any puncture wounds
- Injuries sustained from fighting
- Injuries sustained from equipment failure
- Body fluids exposure from another student
- When School Administration makes a decision to transport a student because the school is not able to get a hold of the parent/guardian
- ERT Response /or 911 called. Complete ERT Report along with SAR

**Follow up:** Original Copy to Health Services

### 3.6 Student Behavior Reports

If a staff member is injured by a student, a School Behavior Discipline Report may also be filled out. The principal and special education team will make decisions about whether discipline is appropriate and/or if a behavior plan for the student needs to be created or revised.

Student behavior that causes injuries may also be recorded on the student's IEP data sheet. The special education teacher must always be notified when a staff member or a student is injured by the actions of a child. Student behavior that does not warrant a Worker's Compensation form or CPI restraint form should also be recorded in a student's data sheet. This data will be used by the special education team to design appropriate behavioral programming for students.

### **3.7 Data Sheets**

Each student who has a behavior support plan will require data collection in order to determine whether or not problem behaviors are being reduced and replacement behaviors are being increased. Data sheets may vary from student to student and the method of collection should be clearly outlined in both the SBP and the IEP. Frequency of data collection may also vary from daily to monthly and data collection methods may vary from use of paper to use of assigned device (iPad/Chromebook.) The special education teacher, in collaboration with the psychologist, social worker or program behavior analyst will be responsible for implementation of the data tool and will train paraeducators in data collection and use of the sheet. Special education teachers will review the data in order to assist data collectors in consistent and accurate collection. Data sheets might be used to record the frequency, duration, or intensity of behavior over time and determine whether interventions are effective so should be collected real time and accurately.

### **3.8 Developing and Using Individualized Healthcare Plans (HCP)**

The Individualized Healthcare Plan (IHP) communicates nursing care needs to regular and special education educators, administrators, teachers, health assistants and parents. The IHP is written by the professional school nurse (RN) for students with a health condition that requires the performance of a specific treatment, such as non-routine medication treatment, health treatment, emergency action, or invasive health procedure. The IHP helps to ensure that all necessary information, needs, and plans are considered to maximize the student's participation and performance in school. The students do not need to be classified as special education or having a 504 plan in order to benefit from an individualized healthcare plan. Not all students in special education or those with a 504 plan necessarily need an IHP.

## **Section 4: Resources**

### **4.1 Employee Assistance Program**

The **Employee Assistance Program** (EAP) is available to BVSD employees and immediate family members through ComPsych. This service, staffed by experienced clinicians, is available by calling the toll free line 24 hours a day, seven days a week. A Guidance Consultant can refer employees and/or dependents to a local counselor for up to five visits at no charge or to resources in your community for any personal concern. You may also access **GuidanceResources Online** at [www.guidanceresources.com](http://www.guidanceresources.com). "First time users" will be prompted for the Boulder Valley School District ID: **BVSDEAP** to register and create your own username and password.

**GuidanceResources, 24 hours a day, seven days a week**  
**Toll free number 1-866-519-8359**



## 4.2 Child Abuse Reporting

All BVSD employees are mandatory reporters of suspected child abuse. The district's Child Abuse Reporting Awareness Training helps all BVSD employees understand their responsibility in protecting potentially abused or neglected children. Please visit the [Child Abuse Reporting](#) page of the BVSD website to access the training video, reporting forms and the phone number of the Child Abuse Hotline.

[Child Abuse Reporting YouTube](#)