

IEP Companion Guide

Purpose

This companion guide was created to be translated into several languages for parents and families who may benefit from a written translation of the main sections of the Individualized Education Program (IEP) document. For the content of the IEP that the case manager and other team members provide, you can rely on the interpreter provided to you at the IEP meeting or any other interpreter services available in your school building. Please talk with your child’s case manager if you still have questions or need further assistance.

Disclaimer

In consideration for the privilege to distribute the attached materials, the Highline School District shall be held harmless from any cause of action, claim or petition filed in any court or administrative tribunal arising out of the distribution of these materials, including all costs, attorney’s fees, and judgments or awards.

COMPANION GUIDE KEY
“Quotation marks”: anything in “quotation marks” comes directly from the IEP document
<i>Italicized</i> : anything <i>italicized</i> is summary or explanation provided by authors of this companion guide

HEADING	CONTENT
IEP Invitation	<i>Available to you fully translated. Request this from the IEP Case Manager.</i>
Prior Written Notice	<i>Available to you fully translated. Request this from the IEP Case Manager.</i>
IEP Cover Page	<ul style="list-style-type: none"> • <i>Student and parent information</i> • <i>Dates of most recent IEPs & Evaluations</i> • <i>List of participants invited to meeting – signature for attendance</i> <p>“The student must be informed at least one year prior to turning 18 that the IDEA procedural safeguards (rights) transfer to the student at age 18 and be provided with an explanation of those procedural safeguards.”</p>
Excused Team Members	<p>“PURPOSE: A school district member of the IEP team may be excused from attending the IEP meeting if the parent(s) and the district agree in writing that the member's attendance is not necessary because the area of curriculum/services is not being modified or discussed in the meeting. A member whose area of the curriculum/services will be modified or discussed may be excused from the IEP meeting if the district and parent(s) consent, and the member provides written input into the development of the IEP prior to the meeting.”</p> <ul style="list-style-type: none"> • <i>List of excused participants, the reason for their absence, date & time of agreement, and method of prearranged agreement</i>

	<p>“A required team member may be excused from attending an IEP meeting with the agreement/consent of the parent(s) and the district. Excusing the attendance of a teacher or related service provider at an IEP meeting is optional. Your agreement or consent to excuse the team member(s) above from attending the meeting must be in writing.”</p> <p>Check box & Parent Signature (3 options)</p> <p>1: “We agree to excuse the attendance of the team member(s) above at the IEP meeting specified at the top of this form because this member's area of the curriculum or related services is not being modified or discussed at this IEP meeting.”</p> <p>2: “We consent to excuse the attendance of the team member(s) above at the IEP meeting specified at the top of this form because, although the IEP meeting involves a modification to or discussion of this staff member's area the curriculum or related services, the staff member will submit in writing, to the parent and IEP team, input into the development of the IEP prior to the meeting.”</p> <p>3: “I do not agree to excuse the attendance of the team member(s) above from the IEP meeting specified at the top of this form.”</p>
Team Considerations	<p>“During the IEP meeting the following factors must be considered by the IEP team. Best practice suggests that the IEP team document that the factors were considered and any decision made relative to each. The factors are addressed in other sections of the IEP if not documented on this page. (for example: see Present Levels of Academic and Functional Performance)”</p> <ul style="list-style-type: none"> • <i>Student strengths and parent concerns</i> • <i>Results of student’s performance on assessments</i> • <i>Student communication needs</i> • <i>Student assistive technology devices & services needs</i> • <i>Student behavior concerns</i> • <i>Student language needs</i> • <i>Supports specifically for students who are blind or visually impaired</i> • <i>Note: not all categories will apply to your student</i>
Present Levels of Educational Performance and Measurable Annual Goals	<p>“PURPOSE: The Present Level of Educational Performance describes the effects of the student's disability upon the student's involvement and progress in the general curriculum and area(s) of need. This includes the student's performance in academic achievement (reading, math, communications, etc.) and functional performance (behavior, social skills, daily life activities, mobility, extra-curricular activities, etc.) in objective terms. Test scores, if appropriate, should be self-explanatory or an explanation should be included. For preschool students this section should include how the student's disability affects the student's participation in appropriate activities. There should be a direct relationship between the present level of educational performance and the other components of the IEP.”</p> <ul style="list-style-type: none"> • General Education Teacher Report <ul style="list-style-type: none"> ○ <i>Summary from general education (gen-ed) teacher about student’s present progress</i> • Adverse Impact Summary <ul style="list-style-type: none"> ○ <i>How the disability impacts the student</i> • <i>Any areas for which your student requires Annual Goals</i>

	<ul style="list-style-type: none"> ○ <i>Summary of how student is currently performing in this area</i> ○ <i>The new measurable Annual Goal proposed by the team</i>
<p>Program Accommodations and Modifications and Support for School Personnel</p>	<p>“PURPOSE: The purpose of this page is to document the modifications and/or accommodations that the student requires, based on the student's assessed needs, in order to advance appropriately toward attaining the identified annual goals, to be involved and make progress in the general education curriculum, and to be educated with non-disabled peers to the maximum extent appropriate. Accommodations may be in, but not limited to, the areas of presentation, timing/scheduling, setting, aids, and format. The impact of any modifications listed should be discussed. This includes the earning of credits for graduation.”</p> <p>“This student will be provided access to the general education, special education, other school services and activities including non-academic activities and extracurricular activities, and education related settings”</p> <ul style="list-style-type: none"> ● ACCOMMODATIONS: <i>ways for the curriculum to be accessed differently</i> <ul style="list-style-type: none"> ○ <i>Frequency: How often it is provided</i> ○ <i>Location: Where/setting it is provided</i> ○ <i>Duration: Start date to end date</i> ● MODIFICATIONS: <i>changes to the curriculum itself</i> <ul style="list-style-type: none"> ○ <i>Same categories as above for ACCOMMODATIONS</i> ❖ <i>Note: Not all students with an IEP will receive Modifications</i> <p>“Supports for School Personnel: training, professional development, etc.”</p>
<p>State or Districtwide Assessments of Student Achievement</p>	<p>“PURPOSE: The IEP team makes the determination of what type of state and district wide assessments (regular or alternative) the student will take and what individual accommodations are necessary. Accommodations provided on state and districtwide assessments should be those that are provided as part of the regular instructional program.”</p> <ul style="list-style-type: none"> ● <i>List of assessments, by subject</i> ● <i>List of accommodations available to student at each assessment</i>
<p>Special Education and Related Services</p>	<p>“PURPOSE: The information on this page is a summary of the student's program/services, including when services will begin, where they will be provided, who will be responsible for providing them, and when they will end.</p> <ul style="list-style-type: none"> ● SERVICES: Related, Special Education, Transportation <ul style="list-style-type: none"> ○ <i>Concurrent: Yes or no; happening at the same time as another service</i> ○ <i>Service: Type, example – OT, PT, subject support, general education, etc.</i> ○ <i>Service Provider: Who provides the service</i> ○ <i>Monitor: Who supervises the service provider</i> ○ <i>Frequency: How often it is provided</i> ○ <i>Location: Where/setting it is provided</i> ○ <i>Start & End date</i>

	<ul style="list-style-type: none"> ● SUPPLEMENTARY AIDS & SERVICES: <ul style="list-style-type: none"> ○ <i>Same categories as above for SERVICES</i> <p>“Total minutes per week student spends in school: _____ Total minutes per week student is served in a special education setting: _____ Percent of time in general education setting: _____”</p>
<p>Special Education and Related Services, continued</p>	<p>“PURPOSE: The purpose of this page is to document the extent to which the student will be involved and progress in the general curriculum, participate in extracurricular and nonacademic activities and be educated and participate with other special education students and non-disabled students. Other education-related factors that may impact the student should also be considered.”</p> <p>“Least Restrictive Environment (LRE): When discussing least restrictive environment and placement options, the following must be considered:</p> <ul style="list-style-type: none"> - To the maximum extent appropriate, the student is educated with children without disabilities. - The placement should provide a reasonably high probability of assisting the student in attaining the annual goals. - Special classes, separate schooling, or other removal of the student from the general educational environment occurs only if the nature or severity of the disability is such that education in general education classes with the use of supplementary aids and services cannot be achieved satisfactorily. - The student's placement should be as close as possible to the child's home and unless the IEP of the student with a disability requires some other arrangement, the student is educated in the school that the student would attend if the student did not have a disability. - In selecting the LRE, consideration is given to any potential harmful effect on the student or on the quality of services that is needed. - The student with a disability is not removed from education in age-appropriate general education classrooms solely because of needed modifications in the general curriculum.” <p>“Placement Options”</p> <ul style="list-style-type: none"> ● Considered ● Selected ● Why considered options were rejected <p>“In the event an isolation or restraint incident occurs, the principal or principal’s designee will make a reasonable effort to verbally inform the student’s parent or guardian within twenty-four hours of the incident. The district will send written notification postmarked no later than five business days after the restraint or isolation occurred.”</p> <p>“Other Considerations: Transportation General Physical Education (PE) Extended School Year (ESY) Emergency Response Protocol”</p>

<p>Notification for the Disclosure of Student Information to the Washington State Health Care Authority</p>	<p>“Highline Public Schools (the School District) currently provides necessary school-based health services to your child at no cost to you, the parent/guardian. The School District is participating in Washington State Health Care Authority (HCA) program through which Federal Medicaid funds are made available to school districts in the State to help cover the costs of providing necessary school-based health services to students. By participating in this program, the School District is allowed to seek Federal Medicaid funds to help cover the costs of the health services the School District provides to your child. In order to seek the Federal funds, the School District must disclose information from your child’s education records to the HCA regarding the health services the School District provided to your child.”</p> <p>“NOTIFICATION OF PARENT/GUARDIAN RIGHTS AND PROTECTIONS: To ensure that your child has access to a free appropriate public education, as required by Federal law, the School District must:</p> <ul style="list-style-type: none"> – obtain your written consent prior to disclosing your child’s health information to the HCA, – may not require you to sign up for or enroll in any public benefits or insurance programs, – may not require you to pay any out-of-pocket expenses such as a deductible or co-payment for the costs of the health services the – School District provides to your child, and – may not use your child’s Medicaid or other public benefits if that use would – decrease available lifetime coverage or any other insured benefit, – result in you or your family paying for services that would otherwise be covered by Medicaid or other public insurance program and – that are required for your child outside of the time that your child is in school, – increase your insurance premiums or lead to the discontinuation of any public benefits or insurance, or – risk the loss of your eligibility for home and community-based waivers, based on aggregate health-related costs.” <p>“Giving your consent will cost you, the parent, nothing, but will allow the School District to seek Federal financial support needed to better provide services to students. Whether or not you give your consent or if you withdraw your consent, the School District will continue to provide services to your child at no cost to you, the parent/guardian. If the district is requesting an updated consent from you or has asked you to provide initial consent to verify Medicaid eligibility and seek reimbursement from Medicaid for necessary school-based services, a consent form is attached to this notification.”</p>
<p>Medicaid Consent</p>	<p>“PURPOSE: This form asks for your consent to share the necessary information to verify Medicaid eligibility and bill for school-based Medicaid reimbursement with the Washington State Health Care Authority, Health and Recovery Services Administration. Billing HCA does not affect individual benefits under Medicaid or require a co-pay or deductible. If you have questions regarding this request, call the school district's Director of Special Education or designee for an explanation as to why the request is being made.”</p> <p>“State law requires the school district to submit claims for health-related services provided to special education students or students referred for special education. These services</p>

	<p>include physical therapy, occupational therapy, speech-language therapy, audiology, nursing, counseling, and psychological evaluation.”</p> <p>“With your permission, Highline Public Schools, will submit your student's name and birth date to the Washington State Health Care Authority (HCA) to verify Medicaid eligibility. Such a request will in no way negatively impact services included in your child's individualized education program (IEP).”</p> <p>“With your permission, we will share necessary identifying information from your child's education record to access federal Medicaid reimbursement from the Washington State Health Care Authority (HCA). If any additional Medicaid reimbursement services are added to the IEP, the school district will request additional consent. If my child no longer is served by this school district, this consent does not transfer to a new district.”</p> <p>“By giving consent, you are acknowledging that (1) you have been fully informed of all information relevant to the activity for which consent is sought; (2) you understand that the granting of consent is voluntary on your part and may be revoked at any time; and (3) if you revoke consent, the revocation is not retroactive; which means that it does not negate any activity that has already taken place.”</p>
<p>Secondary Transition (for students age 16+)</p>	<p>“PURPOSE: The purpose of transition planning is to develop a coordinated set of activities designed within a results-oriented process that is focused on improving the academic achievement and functional performance of the student in order to facilitate the student's movements from school to post-school activities, including postsecondary education, training, employment, and if appropriate, independent living skill.</p> <p>I. Post Secondary Goals/Outcomes Define and project the desired post-secondary goal as identified by the student, parent, and IEP team in the available content areas. Transition Services may be special education, if provided as specifically designed instruction or related services. These services would be included in the Service Matrix section of the IEP.</p> <p>II. Course of study A multi-year description of coursework to achieve the student's desired post secondary goals, from the student's current year to anticipated exit year.</p> <p>III. Other Transition Details</p> <p>IV. Agency Linkage: Agencies Providing Services”</p>

If you need additional support please reach out to
Your student’s IEP Case Manager,
or the **Highline Special Needs Parent/Teacher Association (HSNPTA)**
WEBSITE: <https://highlinespecialneedspta.memberplanet.com/>
EMAIL: highlinespecialneeds@gmail.com
FACEBOOK: <https://www.facebook.com/hsnpta>