

FRESHWATER



Education District 6004

Leaf River/ White Pine/ Elm Tree Academy Referral Packet

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ANTLER PRIDE

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Leaf River/ White Pine/ Elm Tree Academy Program Information:

Leaf River Academy (LRA)

Leaf River Academy is a setting IV therapeutic program through Freshwater Education District with Stellher Human Services providing mental health services for students with Other Health Disabilities (OHD) and Emotional/Behavioral Disorders (E/BD). It is a full day, structured, therapeutic and academic program, which provides services for students in Kindergarten through 8th grade. Developing appropriate social and academic skills is a program priority. Students participate in social skills groups along with core academic areas. Leaf River Academy can serve up to 24 students grades K-8.

Therapeutic Program:

The mental health component of the program utilizes individual therapy and social skills groups. The mental health staff works cooperatively with other team members, social services, and appropriate agencies to meet the social and emotional needs of the students. A treatment plan is designed for each student based on the student's individual needs. The general philosophical approach to groups is one which recognizes that each student is capable of making positive choices that will enhance their lives. The life skills group is often closely related to the issues discussed in individual therapy/skills. Therapy/skills provide the child the opportunity to understand the underlying issues which drive their behaviors.

Local County Social Services agencies support and encourage the academic and therapeutic components provided by Leaf River Academy.

White Pine Academy (WPA)

White Pine Academy is a setting IV behavioral program serving Emotional/Behavioral Disorders (E/BD) and Other Health Disabilities (OHD) in a small, structured setting. Students receive individualized instruction when needed, and teachers are able to develop a close relationship with their students. Developing appropriate social and academic skills is gained through daily social skills group, individual counseling as needed, and a token economy system. White Pine Academy can serve a total of 16 students' grades 5-11.

Elm Tree Academy (ETA)

Elm Tree Academy is a program primarily designed for students with Autism Spectrum Disorder (with a low cognitive ability) and students with a Developmental Cognitive Disorder. This program is structured for students with significant challenging behaviors as a result of their cognitive disability and severe social thinking difficulties.

The program uses structured teaching methods and research based interventions to facilitate learning and decrease challenging behaviors. The student will learn how to use a visual schedule, work independently, learn basic self-regulation strategies, and learn basic social thinking strategies to participate as a member of a group. The goal is to implement these interventions consistently and with fidelity so that the student can demonstrate progress and success.

The goal for LRA/WPA/ETA is to use a structured process that will assess student progress/success and coordinate a plan for the student in transitioning back to home community/school district. The goal is for the student to demonstrate success quickly with the highly structured program and utilization of research based interventions.

Leaf River/ White Pine/ and Elm Tree Academy **Checklist to be completed before a Referral to level IV:**

Referring district IEP teams should complete these steps to determine if a referral to The Academies is appropriate for the student's needs.

- _____ The IEP team needs to collect data on behaviors and interventions used to support student needs and decrease behaviors.
- _____ Based on the information and data gathered, the IEP team will develop more intense interventions/services for the student. (Refer to page 8 and 9 of this referral packet for more problem solving interventions.)
- _____ The IEP case manager will collaborate with the FED Program Specialist to organize training/coaching opportunities on the behavioral interventions.
- _____ Upon completion of the training/coaching, the IEP team will implement the plan consistently for 6 weeks and collect data on IEP goals/objectives and strategies being used. The FED Program Specialist for the building should be made aware of the student.
- _____ During this time the FED Program Specialist and the IEP Team will do a follow-up observation; review data collected, and discuss feedback on student progress as well as overall programming.
- _____ Upon completion of week 6, an IEP team meeting will be held to determine student progress and determine if a referral to Leaf River/ White Pine/Elm Tree Academy is necessary. The IEP case manager is responsible for coordinating with the Program Specialist from FED to attend this meeting.
- _____ If the team determines that a setting IV program referral is recommended and that other services and interventions have been implemented with consistency and fidelity, the IEP case manager will initiate the referral process.

Leaf River/ White Pine/ Elm Tree Academy Referral Process Steps:

1. The Principal, Case Manager, and IEP team discusses the possibility of a referral with your building's Freshwater Special Education Program Specialist **before** referral packet is completed.
2. If the team determines a referral is appropriate, **family agreement is obtained**. Once agreement is in place, the team should move on to the following steps in the referral process.
3. Fill out the entire packet and attach the current IEP (including the Behavior Intervention Plan -BIP or the Positive Behavior Support Plan -PBSP), amendments to the current IEP, and evaluation report. This packet of information should be given to the Freshwater Program Specialist assigned to your district to share at the referral team meeting.

A current DA (within the past year) is required for LRA referrals and is highly recommended for WPA referrals.

4. The Freshwater Program Specialist will present the packet to the Freshwater referral team for determination of whether the student is a candidate for the Level IV program.
5. If accepted, an IEP team meeting may be held, including the Freshwater Program Specialist, at the resident/referring district to determine appropriate placement. The referring district case manager will document attendance and decisions made.

****A current release needs to be signed at this time by the parent for the current mental health provider to share the DA with LRA/WPA and Stellher Human Services.**

6. After the IEP meeting, the referring district case manager will collect and send immunization records, test scores, attendance, transcripts, etc. to LRA/WPA/ETA before the intake meeting.
7. The level IV Site Facilitator will contact the referring district case manager and Principal to set a date for an intake/IEP meeting in the level IV site. The level IV Site Facilitator will talk with local school district principal regarding transportation and any other information needed.
8. The level IV Site Facilitator will complete the team meeting notice and will send out to all invited members. The referring district case manager will also give access to the student on SpEd forms to the LRA/WPA/ETA case manager. The LRA/WPA/ETA case manager will complete the PWN, Agree to Amend, and update the current IEP's services page.
9. Intake/IEP meeting will be held in the level IV setting to enroll the student. The referring district IEP case manager will attend or a district rep if the teacher is not available.
10. The referring district case manager will switch case management on SpEd forms to the LRA/WPA/ETA case manager once the intake meeting is complete and the PWN has been signed.

Leaf River/ White Pine/ Elm Tree Academy Referral Checklist:

- _____ 1. Parent/ Team Agreement for level IV placement/ Team Meeting
- _____ 2. Current IEP including any amendments and current progress reports
(Must include a current BIP or PBSP)
- _____ 3. Copy of current evaluation report (ER), including FBA
LRA/WPA: Primary disability of EBD or OHD
ETA: Primary disability of ASD or DCD
- _____ 4. Behavior charts, data on behavior interventions, and programs currently in use
- _____ 5. General list of academic curriculum and student level
- _____ 6. Completed LRA/WPA/ETA referral information sheets 5-9
- _____ 7. **LRA/WPA only:** Authorization to release completed Diagnostic Assessment completed within the previous year to LRA/WPA and Steller Human Services from current mental health provider.

****Elm Tree Academy ONLY ****

- _____ 8. Copy of behavior and intervention data collected over 6 weeks
- _____ 9. Copy/Picture of Current Visual Schedule student uses
- _____ 10. Copy of Reinforcement Assessment/Classroom Motivator Assessment
- _____ 11. List of activities that were used for self-regulation breaks or calming

Give all listed items to Freshwater Special Education Program Specialist

Items Needed After Acceptance to Leaf River/ White Pine/ Elm Tree Academy:

(**Referring district case manager should gather this information and send to the LRA/WPA/ETA case manager)

- _____ 1. Copies of current health and immunization records
- _____ 2. Copy of school attendance, transcripts, grades, standardized test scores, MCA's, suspension logs and bus/behavioral referral data.
- _____ 3. Any other pertinent information regarding student's health/medical history, family information, other community services, probation, social services, mental health providers, or medical professionals.
- _____ 4. Authorization to Release Information to Leaf River/ White Pine/ Elm Tree Academy

Leaf River/ White Pine/ Elm Tree Academy Referral Information

Student Name: _____ *Date:* _____

DOB: _____ *Age:* _____ *Grade:* _____ *MARSS Number:* _____

SCHOOL

Referring School District: _____ *Resident School:* _____ *Primary Disability:* _____
Secondary Disability: _____

Case Manager: _____ *School Address:* _____

School Phone #: _____ *Fax #:* _____

Reason for Referral

Parent/guardian concerns:

School Concerns (Top 3 behavioral concerns):

- 1.
- 2.
- 3.

Family and Student Strengths:

Desired Outcomes:

PARENTS/GUARDIANS

Parent/Legal Guardians: _____

Address: _____ City/Zip _____

Phone #'s home: _____ work: _____ mobile: _____

Parent/Legal Guardians: _____

Address: _____ City/Zip _____

Phone #'s home: _____ work: _____ mobile: _____

Family Information

Student lives with: _____ *Legal Custody:* _____

Family Members: Identify if they do not live with the child (*)

Father: _____ Mother: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Current Medications

Medication: _____ Dosage: _____ For: _____

Medication: _____ Dosage: _____ For: _____

Medication: _____ Dosage: _____ For: _____

Medication: _____ Dosage: _____ For: _____

Medication: _____ Dosage: _____ For: _____

INTERAGENCY SERVICES

County

County Case Manager: _____ **County of Residence:** _____

Address: _____ City/Zip _____

Phone #'s work: _____ mobile: _____

Probation Officer: _____

Address: _____ City/Zip _____

Phone #'s work: _____ mobile: _____

Guardian ad Litem: _____

Address: _____ City/Zip _____

Phone #'s work: _____ mobile: _____

Other Professional Services

Mental Health Worker/Therapist/ Counselor: _____

Current Diagnostic Assessment:

Date: _____ Release signed for Stellher Human Services: Yes _____ (please attach) No _____

Agency: _____ Phone #s: _____

Address: _____ City/Zip _____

Medical Doctor: _____

Agency: _____ Phone #s: _____

Address: _____ City/Zip _____

Psychiatrist: _____

Agency: _____ Phone #s: _____

Address: _____ City/Zip _____

Other Interagency Services:

Name/ Title/ Phone number: _____

Miscellaneous Information

Physical or medical conditions: Yes No explain: _____

Have parents been available for meetings or support at school? Yes No

List community involvement/ participation in activities:

Community resources utilized:

Is/Was chemical use an issue with this student? Yes No

- To what extent: _____
- Recent evaluations (where?): _____
- Treatment? (When/where): _____

Truancy Concerns: Yes No explain: _____

Has truancy been filed: Yes No

How has attendance been addressed:

Placements/Services/ and Interventions

Please circle all that have been used and explain in the designated areas:

<u>Level I- Spec Ed Services:</u>	<u>Duration:</u>	<u>Results Summary:</u>
<ul style="list-style-type: none"> • Check in/check out • Modified assignments • Visual schedules • Breaks as needed • Behavior charts • Behavior contracts • Social skills • Reward system • Sensory room • Assistive technology • Planners • Study hall • Copies of notes • Para support • Specialized seating • Academic support 		
Others:		

<p><u>Level II- Spec Ed Services:</u></p> <ul style="list-style-type: none"> • Small groups • Pull out • Scheduled breaks • Timers • Point sheets • Mental Health Services • BIP/PBSP • Direct academic and behavioral services <p>Others:</p>	<p><u>Duration:</u></p>	<p><u>Results Summary:</u></p>
<p><u>Level III- Sped Ed Services:</u></p> <ul style="list-style-type: none"> • Separate work space • Child Specific Para Support • Behavioral Checklist • Token economy • Level system • Break area • Alternate curriculum • All class time spent in Resource room <p>Other:</p>	<p><u>Duration-% of day spent in Level III:</u></p>	<p><u>Results Summary:</u></p>
<p><u>Out of home Placement:</u></p> <ul style="list-style-type: none"> • Residential • Juvenile Detention • Mental Health Evaluations • Foster placement • Chemical Dependency <p>Other:</p>	<p><u>Duration:</u></p>	<p><u>Results Summary:</u></p>

** Please attach any additional paperwork or information that is necessary.