

Teacher Manual
or everything you ever wanted to
know about special education



Contents

Teacher Manual	3
Law	3
Procedures	5
How to refer a student to the Child Study Team	5
Decision is to go for a referral so what happens next?	6
What happens after the evaluation plan is developed?	6
The evaluations are completed now what?	7
The IEP meeting.....	7
What happens after the IEP meeting?	9
What is an annual review, and what is my role prior to the annual review?	10
Annual Review meeting what is my role if I am invited?	10
Who do I see if I have any questions regarding the student?	11
Appendix A I & RS Procedure	12
Appendix B Pre-Referral Interventions	26
Appendix C Classification Categories	31
Appendix D Key Terms	37
Appendix E Use of Power Web	40
Appendix F Sample PLAAF	41

Teacher Manual

Purpose

This manual is designed to help you understand Special Education rules and regulations and your role in providing services to students with disabilities. Information on Intervention and Referral services is also provided.

Law

1975

In 1975 the United States Congress passed a landmark bill PL 94-142. This bill afforded all children in the United States of America the right to a free and appropriate public education. Prior to this law many students were not allowed to attend school because they had special needs. There were only a handful of states that had laws that required all students to be educated. New Jersey was one of those states. The effect of this law was that many students who prior to the law did not receive an education now were entitled to one. The law also created a continuum of services from self-contained to mainstreamed programs. The thinking at that time was that Special Education students needed Special Education and so most students were taken out of the General Education setting and placed in Special Education settings. Students who were experiencing difficulties in the General Education program were classified and placed in Special Education programs. This created the expectation that students who were referred and classified were going to be removed from the class and given special instruction in a separate setting.

1997

The Congress reauthorized and amended PL 94-142 in 1997 and changed the title to IDEA (Individual with Disabilities Education Act). The Congress reviewed research and expert testimony prior to making changes in the law. What was becoming clear was that the cost of Special Education was skyrocketing and the results for students were not what had been expected. Research and expert testimony showed that students who were placed in a separate program tended to achieve at a lower level than comparable students who were placed in a General Education program with supports. It was this reauthorization which required interventions in the General Education setting prior to referral for Special Education stated that the placement of choice for Special Education students is the General Education setting and added in class resource programs. This law also stated that the curriculum for Special Education students was to be the same as for General Education students.

2004

IDEA was again reauthorized in 2004. This time Congress made it very clear that before placing a student in a Special Education program it must be shown that the student is incapable of obtaining educational benefit in a General Education program, even with the provision of supports, modifications and accommodations. This reauthorization was based on recent research that showed services provided within the

General Education setting lead to greater gains for students than services provided in a pull-out program. The federal government made placement in General Education programs a priority and stepped up monitoring of the states' progress. New Jersey has one of the highest rates of students who are educated in separate special schools as well as in separate classes. The state working with local districts has tried very hard to increase the number of students who are educated in schools with General Education students and in General Education programs. New Jersey has set benchmarks for the expected percentage of time special education students spend in General Education and for the expected percentage of students educated in separate environments. As of this writing Bergenfield has not met either of this benchmarks.

The 2004 reauthorization strengthened the language regarding pre-referral intervention. It made it clear that prior to a referral, a program must be implemented which directly impacts the student with pre and post data being kept and that part of the referral process is to review the data and program that was designed to address the identified problem. If there is no data or the problem was not identified sufficiently then prior to an actual referral another intervention program needs to be implemented.

N.J.A.C.6A: 14-3.3 states (b) "interventions in the General Education setting shall be provided to students exhibiting academic difficulties and shall be utilized as appropriate, prior to referring a student for an evaluation of eligibility for Special Education and related services." (c) "the staff of the General Education program shall maintain written documentation, including data setting forth the type of interventions utilized, the frequency and duration of each intervention, and the effectiveness of each intervention."

1. "When it is determined through analysis of relevant documentation and data concerning each intervention utilized that interventions in the General Education program have not adequately addressed the educational difficulties, and it is believed the student may have a disability, the student shall be referred for evaluation to determine eligibility for Special Education programs and services."

The 2004 reauthorization also clarified the definition of specific learning disability and districts were given an option of using one of two models to determine eligibility.

1) Response to Intervention (RTI).

This is a General Education initiative. The assumption is that 80-90% of students will learn given the basic General Education instruction methodology. The other 20% needs more intensive service called Tier 2. Students in Tier 2 remain in the General Education class and receive extra targeted instruction geared to their weakness. At this level the students receive group instruction. It is believed that 50 – 90 % of students will achieve given Tier 2 interventions. For those who do not, they move on to Tier 3 which is individualized instruction designed to remediate the students identified weaknesses. Some say Tier 3 is Special Education others say Special Education is when Tier 3 is not successful. A response to intervention program takes data on student progress and

designs instruction for students who are struggling based on that data. Interventions are modified based on the data.

Bergenfield at present does not have a response to intervention program therefore; the Bergenfield Child Study Team uses the second option - a discrepancy model.

2) Discrepancy Model

In this model there has to be a significant discrepancy between the student's cognitive ability and their academic ability as measured by individually administered standardized tests. We use a confidence level of 95%.

The law also states that if the discrepancy is due to lack of education, environmental, cultural or economic disadvantage then the student cannot be classified.

N.J.A.C. 6A:14 3.5 (b)

“In making determination of eligibility for Special Education and related services, a student shall not be determined eligible if the determinant factor is due to a lack of instruction in reading, including the essential components of reading instruction, or math due to limited English proficiency.”

The result of the reauthorization of 2004 is that placement of choice for Special Education students is the General Education program, and they are only removed from this program when they cannot benefit from such education. This change has been occurring slowly since 1997 however it has accelerated since 2006.

By law you are responsible for knowing the contents of the IEP for every Special Education student that you teach and implementing it. Failure to implement the IEP can lead to a parent suing. You may be required to compensate the parents as well as receive disciplinary action from the Board of Education for insubordination—failure to willingly implement an IEP.

Procedures

How to refer a student to the Child Study Team

As mentioned earlier prior to a referral, interventions have to be implemented in the General Education program. The Bergenfield Public Schools has an Intervention and Referral Service (I & RS) program to help students who are having difficulties (Appendix A).

The first step is for you, the teacher, to try and solve the problem. If you have not been successful and you are an elementary teacher your next step is to discuss the problem with the parent or if you have already done this with your building principal. The process is slightly different at the middle and high school level (see Appendix A). You and the building principal will try to identify the problem and develop an intervention. You then implement the intervention, keep data and if successful, great. If you are not successful, you and your building principal may decide to go to step two, which is to

discuss the problem with your building guidance counselor or your building Child Study Team (CST) member. The purpose is again to define the problem, develop an intervention, keep data and see if it works. If this step is successful, great; if it is not, then you and the building principal may decide to have an I & RS meeting. The purpose of an I & RS meeting is to bring a group of people together to help solve a problem. The meeting is a formal meeting and follows the steps identified in the diagram in Appendix A. One of the solutions at this meeting may be to refer to the Child Study Team. However, even if the student is referred to the CST there will need to be other interventions developed and implemented while the evaluation is taking place. It is also possible to go to a referral without having a formal I & RS meeting. You will need to complete a request for child study team services (building principal has this form) and the pre referral intervention form (appendix B) that lists the intervention you have tried you're your baseline data compared to the data collected as a result of your intervention.

Decision is to go for a referral so what happens next?

It is at this point a request for Child Study Team services is made and the pre-referral intervention form (Appendix B) is filled out and given to your building principal. The building principal will give a copy of the request to your building CST consultant. The building CST consultant will check with the rest of his/her Child Study Team to determine a date that an Identification meeting can be held. This meeting is required by law and must be held within 20 days of request for services to the CST, excluding holidays and vacations. The participants at this meeting are your building's full Child Study Team (school psychologist, learning disability teacher consultant, social worker) parent, yourself and others who may be appropriate. The purpose of the meeting is to review the data collected on the student to determine if he/she shows evidence of a disability. If you followed all the steps above, you will have plenty of data. If you have not done any interventions or do not have data, then the meeting will change to a problem solving meeting and an intervention designed to help the student overcome his/her problem will be developed along with a schedule for data collection on the intervention.

After reviewing the data the Team may decide it is appropriate to take a referral or they may decide another intervention should be tried. If they feel another intervention should be tried, they will work with you to design it. If they decide the student should be evaluated, then working with you and the parents an evaluation plan will be developed to determine if the student is eligible for Special Education services and related services.

What happens after the evaluation plan is developed?

Once the evaluation plan is developed, it is sent to the parent by the CST office. The CST cannot start the evaluation without written parental consent. It sometimes takes weeks before the parent sends back the consent slip. If we have not received consent from the parent within 15 days of sending out the first letter, we send a follow-up letter. Once we receive consent we have 90 days to complete the evaluation, determine if the student is eligible, and if so develop and implement an IEP.

The evaluations are completed now what?

An eligibility meeting will be scheduled. At this meeting, the eligibility team will make a determination regarding whether the student is eligible for Special Education services and related services. This is a meeting attended by at least one member of the CST, the referring teacher, the parent, usually an administrator and the student. When appropriate others may attend depending upon the evaluation plan and the student.

You have a very important role at this meeting. The Child Study Team will report on their findings. These findings will include the results of their testing as well as the results of their functional assessment. A functional assessment relates the findings of the test to the students actual functioning in school. There is no one who knows how the student functions in a classroom environment better than you. It is important that test findings can be verified by the students actual functioning in school. Your role is to help confirm or disconfirm the findings. For example, a student is having difficulty in your class reading due to weak decoding skills; the testing finds that the student has weak skills; you can verify this based on the students day to day functioning. However, it is possible that testing could find the student has a weakness in the addition of two-digit numbers. You however, know based on the students daily functioning in school that this is not an area of weakness. At the meeting, you should talk about the student's functioning. Sometimes we do not find a weakness that you believe the student has. In that case while the child may not be eligible for Special Education, we have important information that the student is learning and in a 1-1 test situation can demonstrate knowledge, but in a large class setting has difficulty doing such. When this occurs the team will work with you to develop an intervention that is designed to have the student exhibit to you in class what he/she actually knows. This is a production issue not a learning issue. Your input at this meeting is key to the determination of eligibility. The student not only needs to have a discrepancy, between his/her ability and achievement (see Appendix D), but the discrepancy has to be in an area where the student is exhibiting difficulties in school.

There are 13 eligibility categories that the student can be eligible under (see Appendix C). If the decision is that the student is eligible for Special Education and related services, the parent is then given a choice to go on to the development of an Individual Education Program (IEP) or to have a separate meeting within 15 days. The parent also has a third choice to say "thank you for the information; however, I do not wish for my child to receive Special Education services." The parent has the right to refuse services and the district has no recourse. If the parent wishes to have their child receive Special Education services, then the next meeting is an IEP meeting.

The IEP meeting

The IEP meeting is a meeting to determine the program and specialized instruction the student will receive. IEPs are usually developed to be in effect for one year. Participants in the meeting include the CST case manager, parent, General Education teacher, Special Education teacher, student, and when appropriate others. In most buildings the building administrator will attend.

The first task of the IEP team is to develop the student's Present Level of Academic Achievement and Functional Performance (PLAAFP). Teachers play a key role in this part of the document. The PLAAFP sets the stage for the rest of the IEP. The PLAAFP creates a picture of the students functioning in school academically, socially and emotionally. Emphasis is placed on describing the students actual functioning based on data accumulated by the teacher and the CST. Strengths and weaknesses are analyzed as well as what works and does not work for the student. The teacher's input is critical for this part of the IEP to be accurate and objective. The rest of the IEP is based on what is in the PLAAFP. For example, if in the PLAAFP behaviors are identified that are interfering with the student's achievement, a behavior intervention plan will be developed in a later section of the IEP. If a student is exhibiting academic weaknesses, goals and objectives will be developed to help overcome these weaknesses. If a student is exhibiting work habit issues, goals and objectives will be developed to address these issues. Once the PLAAFP is completed, the next step is to develop a behavioral intervention plan if one is needed. If it is not needed, the IEP team will develop the goals and objectives for the student. Goals are written in a format that is measurable with objectives/benchmarks for the end of each marking period to check on progress toward goal achievement.

Once the goals and objectives are developed, program development begins. The program of choice is a General Education program. During this part of the IEP meeting, the IEP team will discuss the academic subjects, courses of study and instructional areas provided in the General Education program. The IEP team will go course by course to determine what the learning objectives for each subject are. This discussion will focus on the learning activities, instructional methods, materials and assessment strategies used in General Education classes as well how diverse learners' are accommodated.

Once the IEP team understands the requirements and functioning of the General Education classes in question, the team will focus on the individual student. The IEP team will decide what the student can learn that is the same as his/her chronological age peers. Can the student be expected to meet the same General Education curriculum for grade or subject? Does he/she have the same learning objectives as other students or related learning objectives? Do changes need to be made in content and or course requirements for the student? What are the priorities for instruction? The IEP team will decide how the student will be instructed and how the student will be assessed to determine what he/she has learned.

For each subject area the IEP team will look to see what modifications, supplemental aides and services can be provided within the General Education program that would lead to the student obtaining educational benefit from the class. The IEP team will consider the format of instruction (e.g. whole group, individual learning lecture, etc.) task/activity demands (pacing, complexity, criteria for success), material and equipments that is used, the physical layout and assessment and to see if modifications are needed in any of these areas. If a student is to be placed in a Special Education class for a particular subject, the IEP Team has to show that all other options

were considered and were not viable even with accommodation and modifications in instruction, content and assessment.

When done with this step of the IEP, the IEP team will be able to state the student's program and what modifications and supplemental supports the student will need. The IEP team will also be able justify, if needed, placement in a Special Education program.

Your role in this part of the meeting is to be the person who knows the General Education curriculum and how it is implemented for your subject or grade level so that the IEP that is written is one that can be implemented.

What happens after the IEP meeting?

The parent is given a copy of the IEP. They are given a choice whether to sign agreement with the IEP at the meeting or to take it home and return the signed agreement to the CST within 15 days. An initial IEP cannot be implemented without parent signature. Once the parent signs the IEP, a copy is placed in the students school folder, another copy is given to the case manager. The IEP is scanned into Fortis a web based program that allows you to view the IEP online. You can access a student's IEP by going to the following site and signing in <http://zamora/powerweb>. (Appendix E).

The student's case manager or guidance counselor will review the IEP with you to insure you understand it and can implement it. You will be responsible for implementing the IEP in your class. You need to make sure you are familiar with the PLAAFP, Goals and Objectives and modifications. Goals and objectives are related to core content curriculum standards. Some goals and objectives may not apply to you while others will. For example, if you teach math a goal related to reading comprehension may not apply to you when student is working on computation skills. However, if the student is given word problems it may apply to you. Many goals are written across subject areas and you as well as the student's other teachers will be responsible for the implementation. The same goes for behavioral goals, social skills goals, work habit goals and goals related to emotional functioning. If you are not sure of how to implement the goal and objective you need to let the case manager know. The case manager will insure you receive the training you need. You are also responsible for keeping data on goal achievement and working on the goals with the students. If there is a behavioral intervention plan you are responsible for implementing it.

The student's case manager is responsible for insuring the IEP is implemented as written. If they see you are not implementing the IEP as written, they will discuss this with you and help you with it implementation. If you refuse to implement or ignore the IEP, they will report this to your building administrator and the Director of Pupil Personnel Services. The IEP is a contract between the school and the home and gives the parents legal rights.

What happens if I feel the IEP needs to be changed?

As a teacher of a classified student if you see that the IEP is not meeting the student's needs you should notify the student's case manager. They will discuss your concerns with you and if need be call for a meeting to review the IEP.

What is an annual review, and what is my role prior to the annual review?

At least once a year every student's IEP is reviewed and revised. You may or may not be the teacher that receives an invitation to attend the IEP meeting; however, your input is very important to the development of the new IEP. Prior to the IEP meeting you will receive a request from one of the student's Special Education teachers for information for the IEP. In particular, they need to have a description of how the student functioned in your class academically, socially and emotionally. They need to know his/her accomplishments as well as areas where he/she struggled. They also need to know the following:

- What teaching techniques were successful?
- What techniques were not?
- What was the student's goal achievement?
- What modifications worked?
- What modifications did not work?
- What modifications would you suggest for next year?
- Where there behavioral issues?
 - How did you resolve them?
 - Do some still remain?
- Were there work habits issues?
 - How did you resolve them?
 - Do some still remain?
- What class would you recommend for the student for next year?

This information will be inserted into the PLAAFP by the Special Education teacher, which is why we ask you to present this information in paragraph form. You are the teacher of the student and we do not want to interpret what your experience with the student was but rather report it as you see it (see Appendix F for sample PLAAFP).

As mentioned in a previous section, the PLAAP is the blueprint for developing the IEP. The IEP is designed to insure that the student obtains educational benefit from instruction and your input is very important to achieving this goal. Based on the information you provide the goals and objectives in the IEP will be developed the needed modifications to insure success and the program will be developed.

Annual Review meeting what is my role if I am invited?

If you are invited to the IEP meeting, your role is to discuss the student as he/she functioned in your class. You are to provide the team with insights into the student's

functioning in school as well as to help in the development of goals and objectives and modifications needed to insure that the student benefit from placement in the recommended classes.

How will I know if I have a Special Education student in my class?

If you have Special Education students in your class, you will be notified by the student's case manager and/or his Special Education teacher. The student will also have a flag that says IDEA next to his/her name in Infinite Campus.

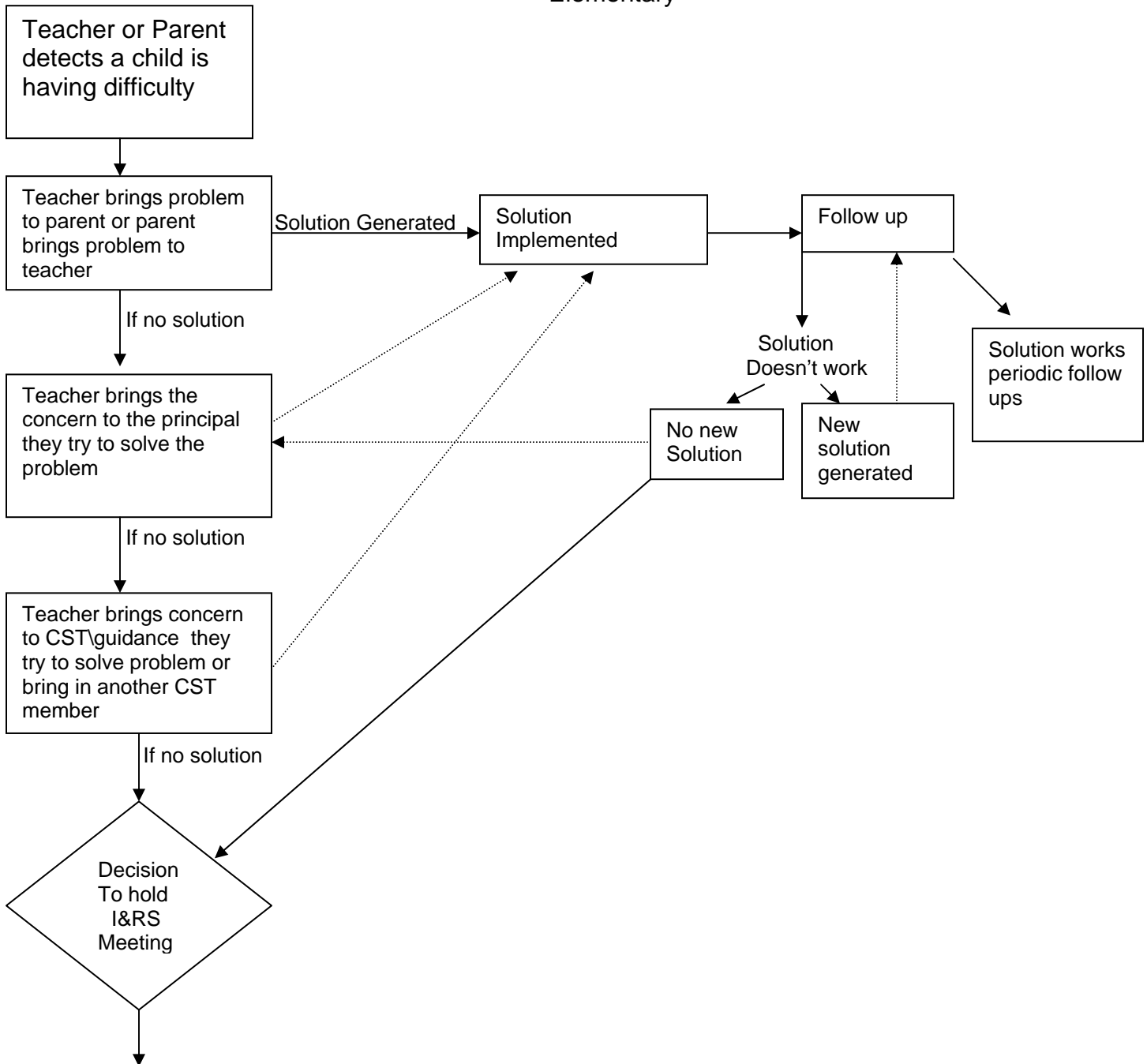
Who do I see if I have any questions regarding the student?

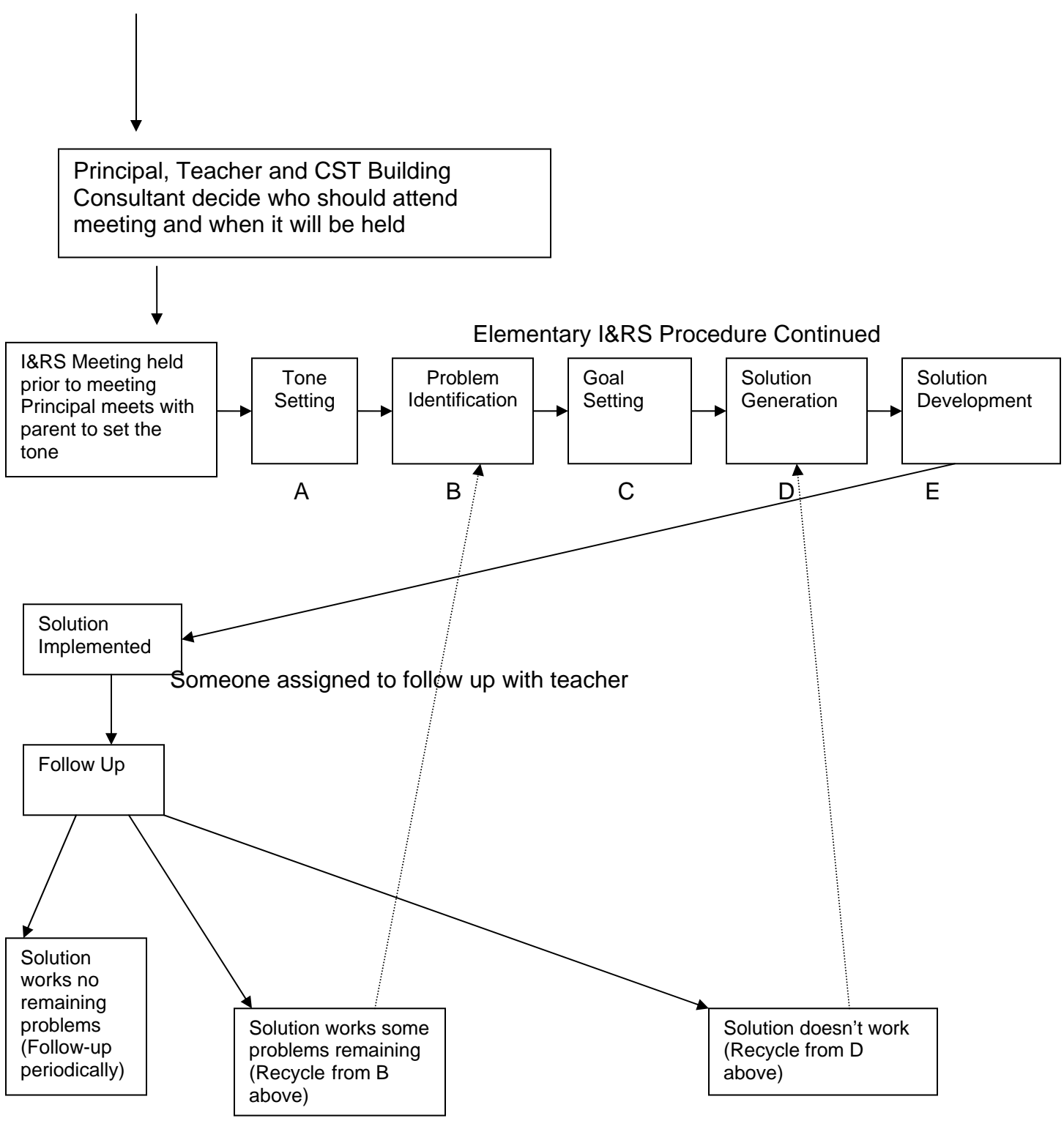
If you have any questions regarding the implementation of the student's IEP or his/her functioning in your class, please see the student's case manager and or Special Education teacher.

Appendix A

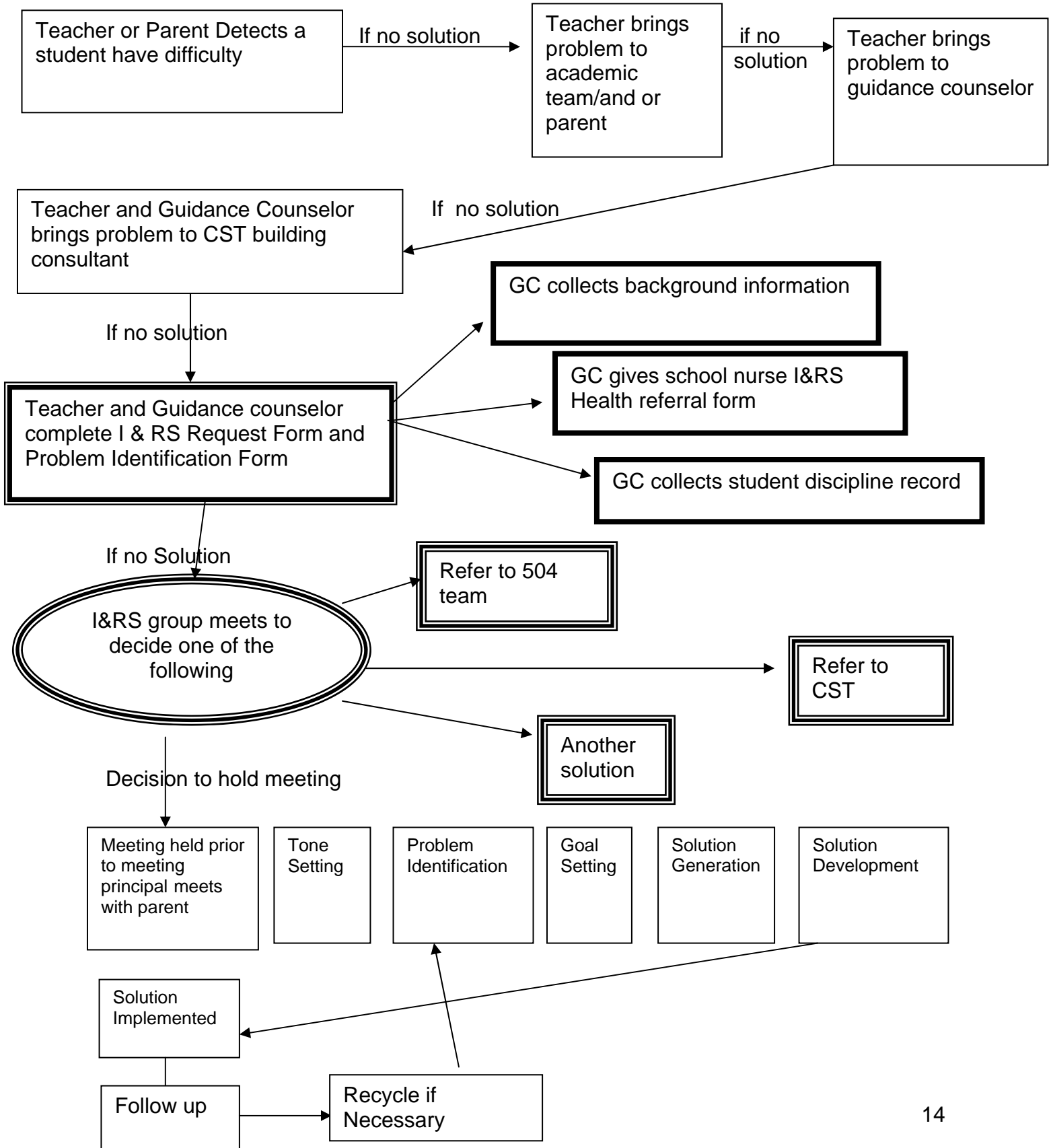
I & RS Procedure

I & RS PROCEDURE Elementary

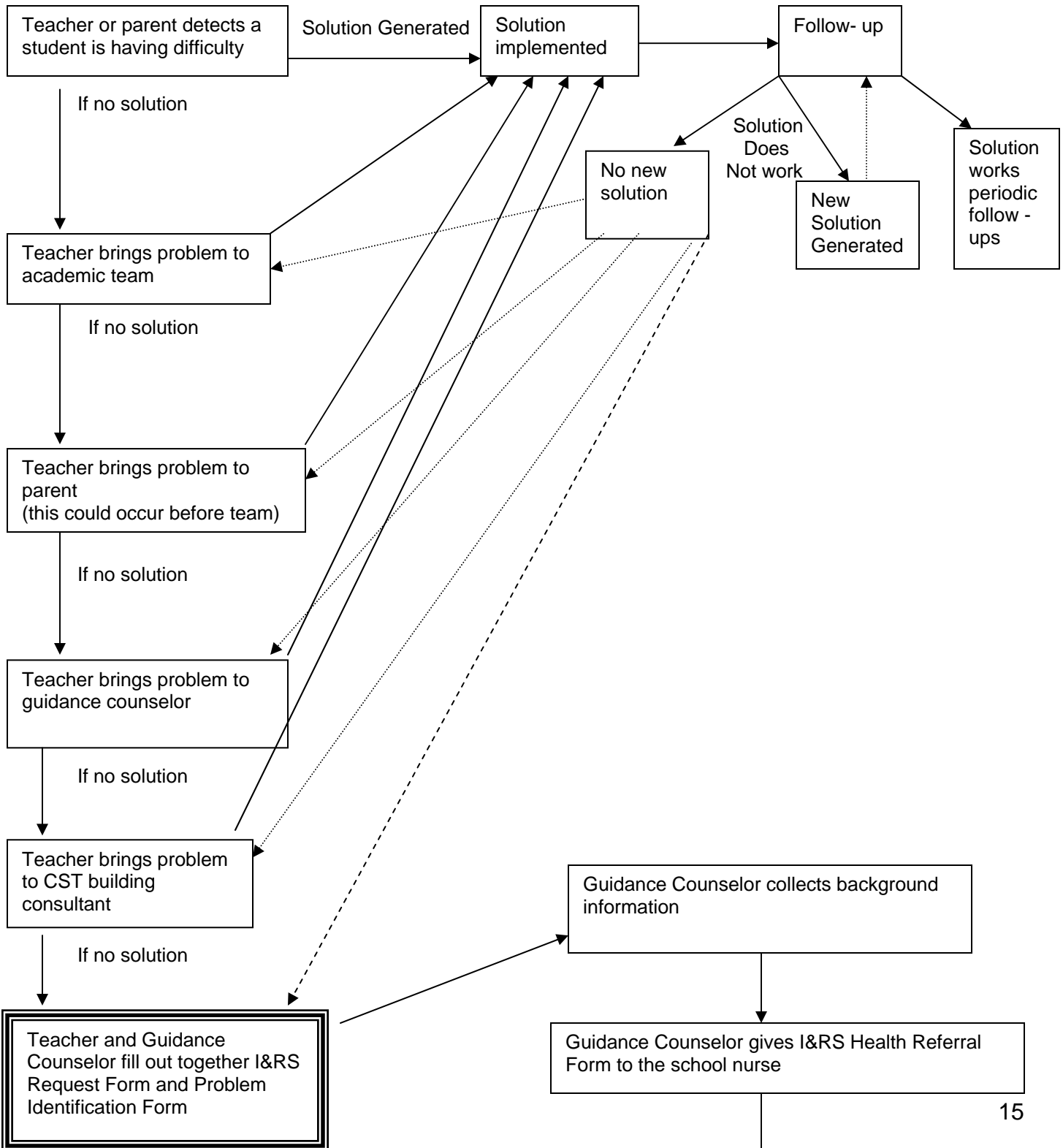


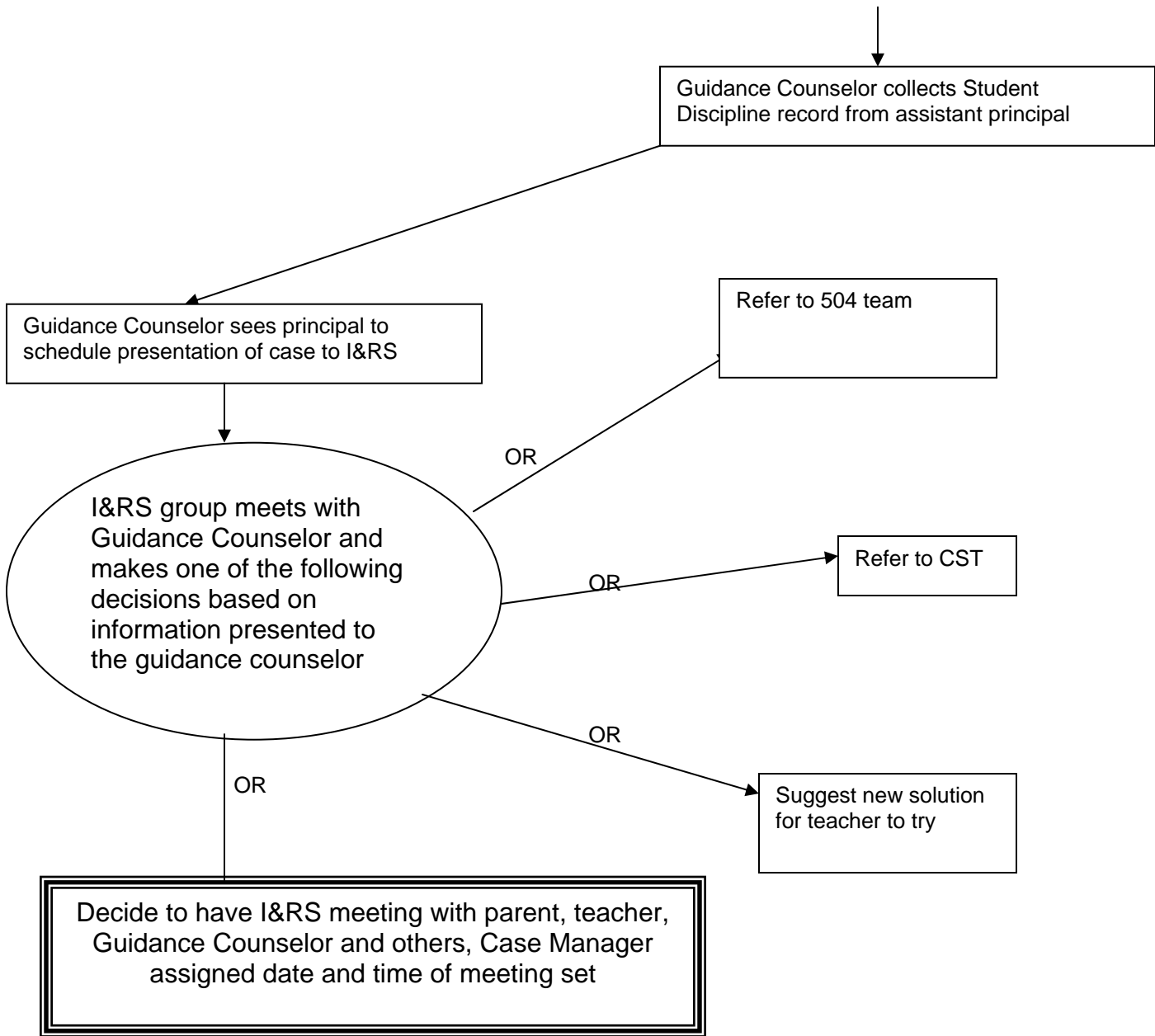


I&RS Procedure Middle and 9th grade Academy
 Simplified schematic for more detail refer to Elementary procedure for Problem solving model



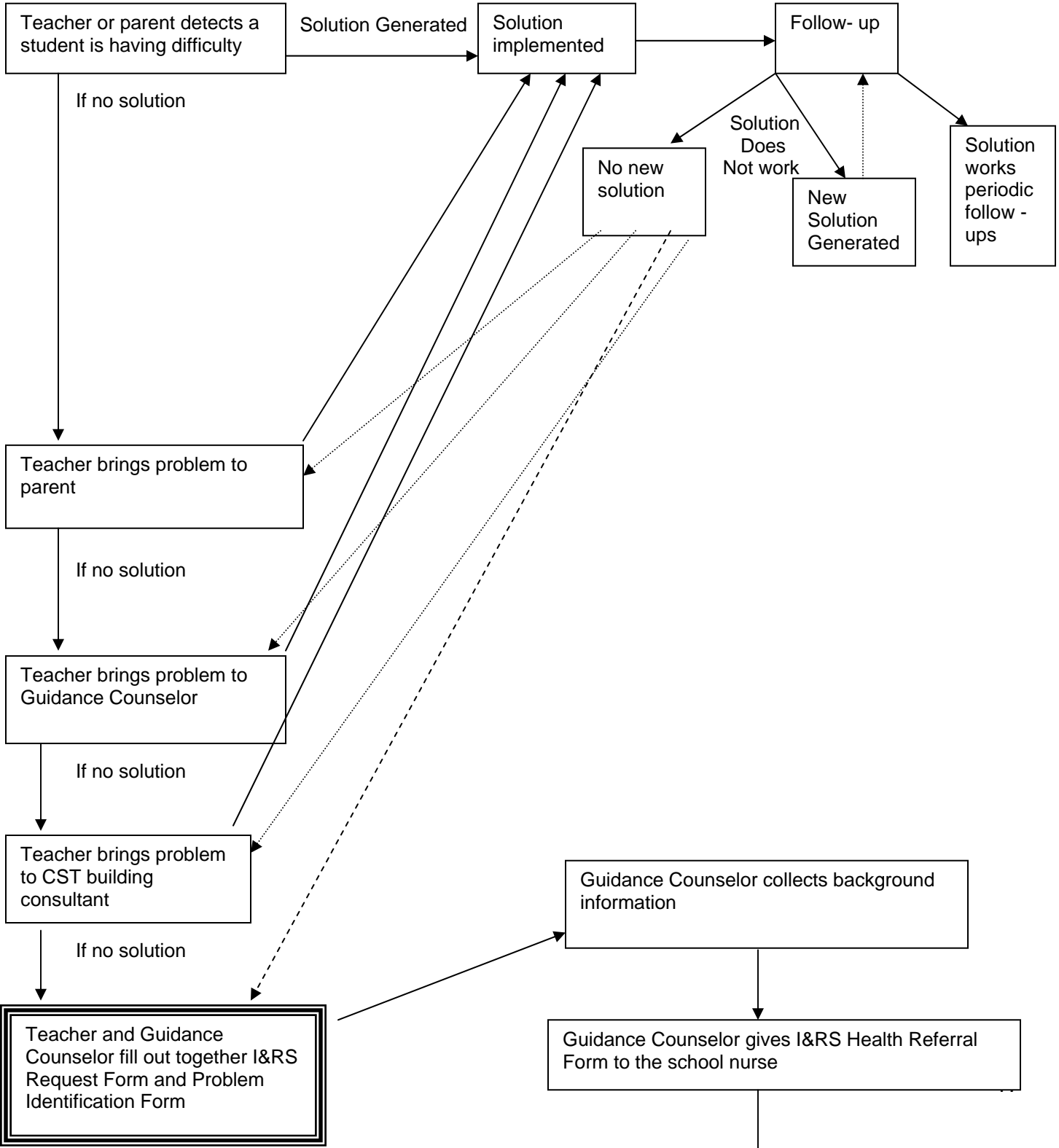
I&RS Procedure Middle School

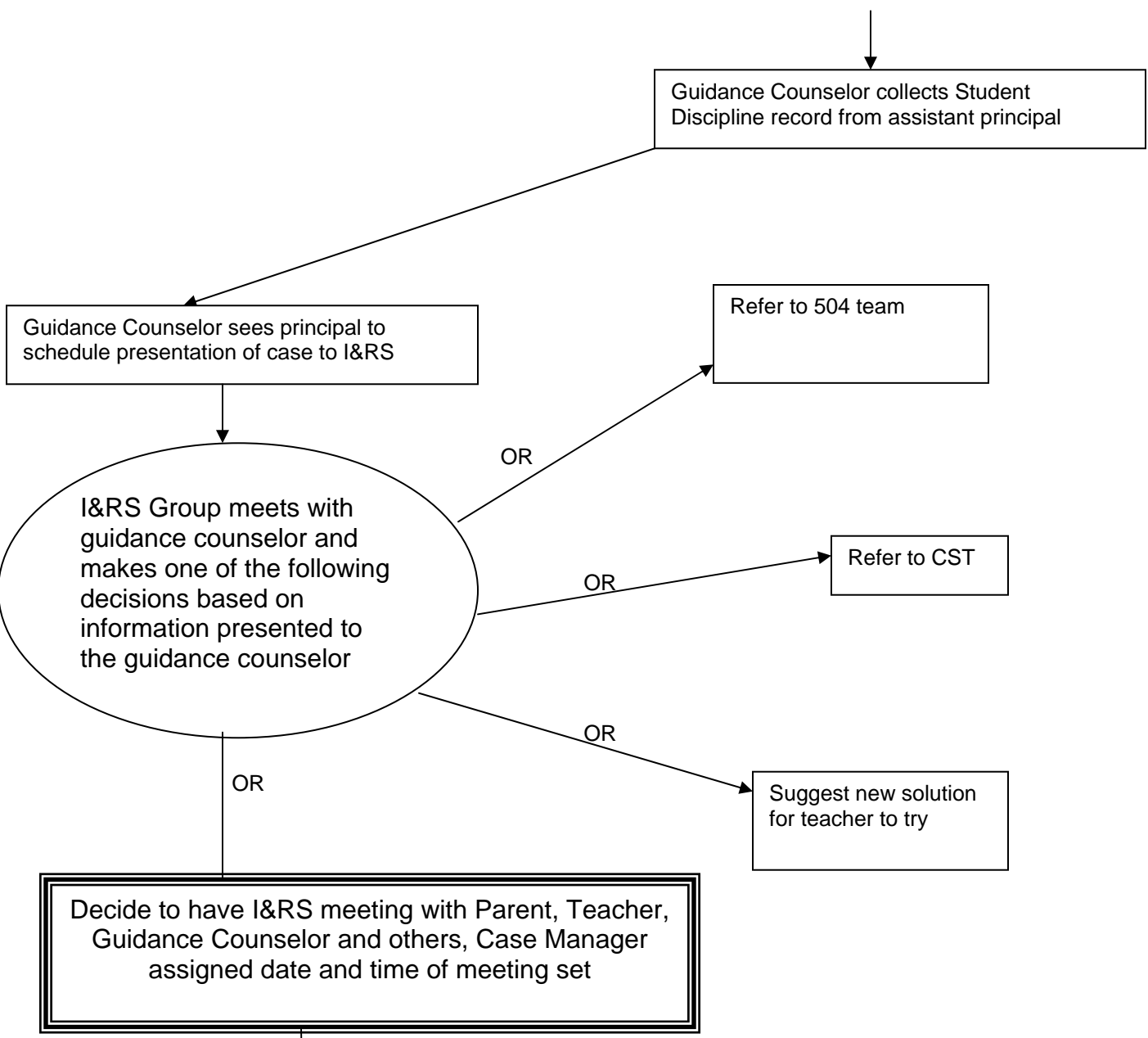


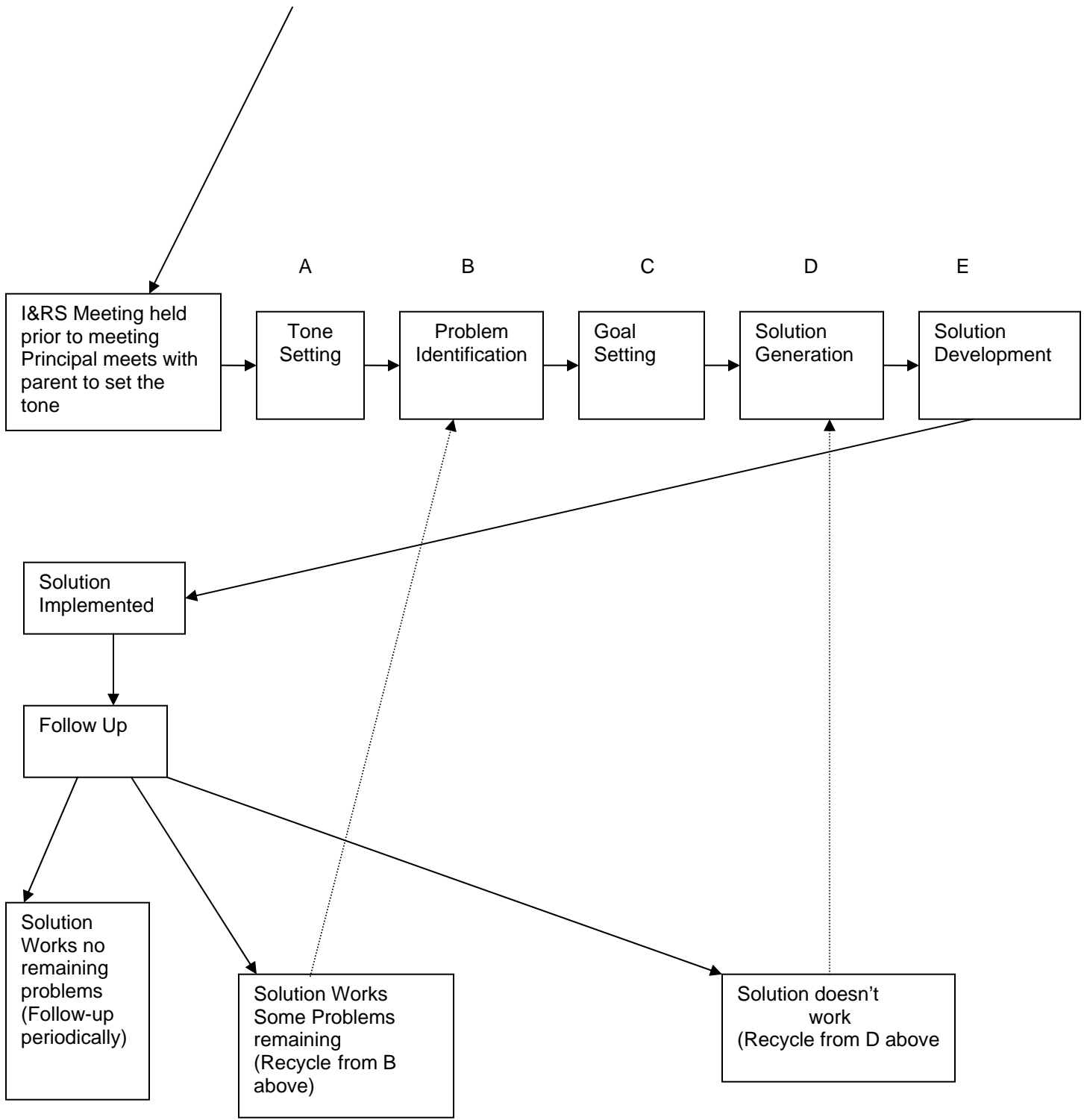


Follow high school procedure from this point on

I&RS Procedure High School







I & RS - Intervention and Referral Services

I &RS is a state adopted model for problem solving. The state presumes that a student's academic needs can be met by the general education program. I &RS is the process whereby individuals knowledgeable of the student, come together to brainstorm strategies and/or interventions that will address identified weaknesses in the general education classroom.

The problem solving process begins by specifically describing the problem (in objective behavioral terms), generating a plan and collecting measurable data over a pre-determined length of time. This process may be repeated several times in the attempt to address learning problems in the least restrictive environment of the general education classroom.

Note: Pre-referral is not a process that you go through to get to CST, however CST is always available to assist with and consult with during the problem-solving process.

Description of the Problem (Step 1)

Vague

Johnny is having difficulty in math.

Johnny doesn't know his number facts.

Johnny is failing math tests.

Susan can't read.

Specific

Johnny does not regroup accurately when solving 2-3 digit problems involving addition, subtraction and multiplication.

Johnny is reading on a 3.8 level in Grade 5. He cannot read the word problems in the grade 5 text.

Johnny has mastered the 2, 3, and 4 times tables. He has not retained the remaining facts.

Johnny demonstrates comprehension of math lessons in class 80% of the time but gets 50% on tests

Susan can recall factual data from reading selections (wh- questions), with 80% accuracy, however scores 50% on making inferences

Stan has weak writing skills.

Stan is not spelling on grade level
Based on ___% over ___time.
Based on _____ he is spelling at a
_____ level.

Stan omits ending punctuation.

Stan has good ideas. He does not
organize them when writing essays.

Stan does not self-correct for final
draft of assignments.

Stan has difficulty generating ideas
for writing 90% of the time.

Stan's written responses are not
relevant to questions posed.

Stan does not write in complete
sentences.

Jane is disruptive in class.

Jane calls out 6-10 times in a 42
minute class period.

Jane does not raise her hand and wait
to be recognized.

Jane is out of her seat 3-5 times in a
30 minute time period.

Jane talks while others are speaking.

Jane takes materials from others w/o
asking.

George doesn't pay attention.

George has his hands in his desk
when the teacher is presenting orally.

George is turned around talking to his
neighbor when he is supposed to be
working independently.

George does not offer relevant oral
responses after teacher
demonstration.

George's body is in constant motion. He taps his fingers, shakes his leg, draws on desk, rips pieces of paper, chews on pencils, stands or kneels on chair while working.

Lori doesn't do her homework.

Lori completes her homework on an average of 2 xs per week.

Lori completes her HW (parent report) but does not hand it in 2-3 times per week.

Lori completes her math HW but does not do her science assignments.

Measurable Goals (Step 2)

Not Measurable

Increase math skills

Improve writing skills

Measurable

Memorize the five through nine times tables with 100% accuracy over five trials

Will solve 3 of 5 mixed operations word problems on three trials

Will memorize, retain and recall three geometric formulas in a two week period

Will subtract 3-4 digit problems with regrouping with 70% accuracy over three trials

Given an editing checklist, will self-edit rough draft before submitting with 80% accuracy

Will use at least three linking words/phrase in a 2 paragraph essay
Will answer all open-ended science questions in complete sentences with X% proficiency

Will use a spell-check program on word processing assistance evidenced by 100% on spelling

Will start all written responses turning the question into a statement

Will use a graphic organizer for prewriting that will result in a topic sentence, three, supporting details and conclusion (personal opinion)

Data Collection (Step 3)

Qualitative Data

Qualitative data is non-numeric. It can be collected in a narrative form or in the form of rating scales that use descriptors (i.e., good, fair, poor). This type of data collection is discouraged because it is too subjective.

Quantitative Data

Quantitative data is data that is numeric. A number (variable) is assigned that can be recorded and measured.

Several types of quantitative data include:

- Frequency – How often does the behavior or response occur over a specific period of time? (Ex: Tommy calls out during independent seatwork eight times in a twenty minute period).
- Proportion – In what percentage of available opportunities did the behavior occur? (Ex: Most academic tests and quizzes fall under this type of data collection). Be careful to keep the criteria constant; 70% on a quiz of 3-digit addition problems; not mixed short answer, essay and fill-in-the-blank.
- Episode – Was there an occurrence of the behavior during this period? (Ex: Used to determine the presence of behaviors in different settings, periods, classrooms, with different teachers). This information is valuable in determining if a behavior presents in certain situations only and what the possible triggers may be.

- Duration – For how long did the behavior occur? (Ex: Used when you are looking to increase on task behaviors such as attention or when you are looking to decrease behaviors such as tantrums.)
- Latency – How long was the period of time between the discriminating stimulus and the response? (Ex: Used when the goal is to increase response time needed in demonstrating acquisition of a skill or in follow-through when prompted).
- Intensity – To what degree was the behavior present? This type of data can be very subjective and should be used with caution. (Ex: Rating the intensity of task aversion from *verbal refusal* all the way to *aggressing toward teacher*).
- ABC Data – (Antecedent, Behavior, and Consequence) This type of data collection is used to identify triggers/causes for behavior as well as the purpose it serves for the student. This style of data collection involves naming the behavior in very objective terms; i.e., *stomping*, identifying what happened just moments before the behavior, and what was the end result or consequence? (Ex: If Johnny is struggling to learn math skills, he may ask to get a drink right before “sharing” of responses starts).

The **antecedent** is sharing time during math, the **behavior** is request to leave and the **consequence** is that he misses share time. The student’s purpose is *task avoidance*.

- Grouping by Function – This type of data collection might follow along with ABC data. Tally marks for the categories of *Task Avoidance*, *Get Attention* and *Access a Desired Item/Person* could be helpful in determining why the student engages in such behavior.

Make Data Collection as Painless as Possible

Finding a style or method of data collection is key to its effectiveness and implementation. We certainly don’t want to spend more time collecting data than we do with our students! The style of data collection can be as individual as the person documenting it. Here are a few hints:

- For behaviors that are frequent and countable, a great way to collect data is with a counter.
 - Start the day with a handful of paperclips or chips in your right pocket and for every time the behavior occurs, move one to the left pocket. At the end of the determined time period, count the items in your left pocket.
 - Slap a removable label onto your thigh for an easy, portable tally or note sheet with no clipboard needed.

- Counters (like bus drivers and golfers use) are very handy for tallying behaviors that occur quickly or in a variety of settings. This technique can be incorporated into a “student” activity whereby the teacher counts the number of times she needs to redirect an off-task group. Ten or fewer clicks means a reward! These counters can be purchased at any office supply, sporting good place or home improvement store.
- One of the best ways to make data collection easier is not to do it at all! Ask someone else to. Get peer tutors involved, teaching assistants, colleagues and the students themselves. Have someone else take the baseline data and follow through yourself on predetermined dates. *Mark a manila folder with a plus sign on one side and a minus sign on the other. Have the students quiz each other, flash card style and record their classmate’s response data.*
- Make time for your data. Take a few minutes at the end of the day to quickly review it. Did the child have trouble with anything specific that you might want to rethink tomorrow (increase /decrease the demand, prompt more, provide visuals). Keep notes on the changes in these variables when you continue to collect. It will affect the value. Review of this data over a week’s time can yield important trends.

Data collection doesn’t have to be an intrusive nor time-consuming. Determining how and when you are going to do it is half the battle (planning). Collection doesn’t have to be on fancy charts and graphs nor does it have to be compiled every day. Consulting with someone before hand who has knowledge of these procedures will go along way to making the process easy, and extremely effective. When you have experienced or created an effective data collection model, share it with your colleagues!

2. Whom have you consulted regarding this problem?

3. Description of interventions, for each intervention answer questions A – D separately.

PLEASE NOTE IF YOU CHOOSE TO HAVE AN IDENTIFICATION MEETING AND HAVE NOT COMPLETED THIS SECTION THE CHILD STUDY TEAM HAS BEEN INSTRUCTED BY THEIR DIRECTOR TO WORK WITH THOSE WHO ARE ATTENDING THE MEETING TO DEVELOP AN INTEVENTION PLAN WHICH WILL HAVE ALL THESE COMPONENTS AS PER N.J.A.C. 6A:14-3.3(C)

- A. Baseline data. The student's level of performance prior to intervention. Here are a couple of examples
 - i. **Reading fluency:** the student reads three words per minute when given a reading sample at his/her grade level
 - ii. **Reading Comprehension:** when given a reading passage of five paragraphs the student can state the main idea correctly one out of ten times
 - iii. **Math computation:** the student can answer correctly 3 out of 10 one digit addition problems
 - iv. **Behavior:** during reading, the student calls out 10 times in a 20 minute period
 - v. **Work completion:** when given independent work that involves writing, the student completes 10% of the work

What is the baseline data?

B. **Goal:** What increase/decrease in skill/behavior is the intervention designed to reach i.e., 20 words per minute, 8 out of ten times correct main idea, 8 out of ten one digit addition problems, no more than calling out 3 times in twenty minutes, Completes 80% of independent written work

C. **Intervention description:** Please describe in detail the intervention you implemented

What was the intervention?

When was it implemented? Include dates and time

Who implemented it?

How was it implemented?

Dates data collected and data results:

D. **Results:** Final data collection and if the intervention did not reach goal, why do you think it did not work.

4. Description of interventions for each intervention answer questions A – G separately

A: Baseline data. The student's level of performance prior to intervention student's level of performance.

What is the baseline data?

B: Goal: What increase/decrease in skill is the intervention designed to reach I.E, 20 words per minute, 8 out of ten times correct main idea, 8 out of ten one digit addition problems, no more then calling out 3 times in twenty minutes, Completes 80% of independent written work

C: Intervention description: Please describe in detail the intervention you implemented

What was the intervention?

When was it implemented? Include dates and time

Who implemented it?

How was it implemented?

Dates data collected and data results:

D: Results: Final data collection and if the intervention did not reach goal why do you think it did not work.

Appendix C

Classification Categories

1. Auditory Impaired (AI)

- An inability to hear within normal limits due to
 - Physical Impairment or
 - Dysfunction of auditory mechanisms
 - Besides the two CST members evaluations the following are required
 - Audiological evaluation
 - Speech and language evaluation
- This category is further subdivided into two sub-categories
 - Deafness
 - The student's auditory impairment is so severe that the processing of linguistic information through hearing with or without amplification, is adversely affected
 - Hearing impairment
 - An Impairment in hearing which adversely affects the students educational performance

2. Autistic (Aut)

- These students have a pervasive developmental disability which significantly impacts
 - Verbal Communication
 - Non Verbal Communication
 - Social interaction
 - Restricted repertoire of activity and interests
- This disability in order to be eligible has to adversely impact educational performance
- Students who are eligible under this category are severely impaired with regard to their ability to communicate with the world (not due to a communication impaired) and interact with others
- Students who have this disorder often demonstrate:
 - Engage in repetitive acts
 - Stereotyped movements
 - Resistance to environmental changes
 - Resistance to change in routines
 - Unusual response to sensory experiences
 - Lack of response to others
 - Self injurious behavior
 - Self stimulation behaviors
- Onset is usually before age 3

- To classify
 - Two CST evaluations
 - Speech evaluation
 - An assessment by a physician trained in neurodevelopment assessment

3. Cognitively Impaired

- This corresponds to “mentally retarded”
- To be considered a student must have
 - Significantly below average general cognitive functioning.
 - This is measured by an IQ test
 - Deficits in adaptive functioning in the home, school and community
 - This is usually determined by results of an adaptive scale completed by the parent, interview of parents and teachers, and observation
 - These deficits must adversely affect the students educational performance
- This classification has three sub-categories
 - Mild Cognitive Impairment (MIC)
 - Student’s intelligence scores must be within two to three standard deviations below the mean.
 - 100 is the average
 - A standard deviation is 15 points
 - therefore the students score must fall between a 70 and a 55
 - There also must be a deficit in adaptive functioning
 - Moderate Cognitive Impairment (MOC)
 - Three or more standard deviations below the mean on an IQ test
 - There also must be a deficit in adaptive functioning
 - Severe Cognitive Impairment (SCI)
 - Functions severely below age expectations
 - Is incapable of responding to simple directions
 - Cannot express basic wants or needs
 - Is eligible for day training
 - IQ is at least 5 standard deviations below the mean

4. Communication Impaired (COM)

- Language disorder in the area of morphology, syntax, semantics and/or pragmatics/discourse
- This has to adversely affect the students educational performance and not be due primarily to an auditory impairment
- The diagnosis is based on
 - Functional assessment of Language in other than a testing situation
 - Performance below 1.5 standard deviations

Or the tenth percentile on at least two standardized language tests

One of which shall be a comprehensive test of both receptive and expressive language

- Assessment by a speech-language specialist is required to determine the educational impact of the communication problems

The speech language specialist for this classification is considered part of the CST and their evaluation counts as one of the two mandated child student team evaluations

- If it is found that the student meets the eligibility requirements for this classification but requires speech and language services only then the student shall be classified as eligible for speech and language services.

5. Emotionally Disturbed (ED)

- Characteristics of this classification are:
 - Inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
 - Inappropriate types of behaviors(acting out, crying for no reason etc.,) feelings under normal circumstances
 - A general mood of unhappiness or depression
 - A tendency to develop physical symptoms or fears associated with personal or school problems
- These characteristics must be exhibited over a long period of time and to a marked degree
- These problems must be adversely affecting the student's educational performance
- This classification use to require a psychiatric evaluation

6. Multiply Disabled (MD)

- The presence of two or more disabling conditions, the combination of which causes
 - Severe educational needs
 - That cannot be accommodated in a program designed to address one of the impairments

7. Deaf/blindness (DB)

- Concomitant hearing and visual impairments
- The combination of which causes such severe communication and
- Other developmental and
- Educational problems which cannot be accommodated by programs solely for students with deafness or blindness

8. Orthopedically Impaired (OI)

- Disability characterized by a severe orthopedic impairment Which adversely affects a student's educational performance

- Besides the minimum two CST evaluations a medical assessment is required that documents the orthopedic condition

9. Other Health Impaired (OHI)

- This is characterized by limited strength, vitality or alertness, including heightened alertness
- This could be due to:
 - Chronic health problems
 - Acute health problems
 - Attention deficit hyperactivity activity disorder (ADHD)
 - Heart condition
 - Tuberculosis
 - Rheumatic fever
 - Nephritis
 - Asthma
 - Sickle cell anemia
 - Hemophilia
 - Epilepsy
 - Lead poisoning
 - Leukemia
 - Diabetes
- Or any other medical conditions which adversely affects a student's educational performance
- A diagnosis of OHI requires at a minimum of two CST evaluations and a medical assessment
- The federal government considered making ADHD its own category but decided against it because they felt:
 - Most students with ADHD need only a 504 plan
 - Students with ADHD can be classified as either OHI or ED if the disability requires the student to receive specialized instruction

10. Preschool Child with Disability (PSD)

- Students between the age of three and five who experience developmental delay are eligible for this classification
- Age of 3 means the attainment of third birthday
- Age 5 means attainment of age five by the month and day established as the kindergarten entrance cutoff date by the district board of education.
- Students who turn five prior to the cutoff are by age five re evaluated to determine if they meet the criteria for one of the other 13 categories
- Students who turn five after the cutoff are re evaluated by the end of the school year to determine if they meet the criteria of one of the 13 other categories
- Students to be eligible for preschool must need Special Education
- If a student needs only related services i.e. speech they are not eligible
- The state is moving to using standardized assessment to determine eligibility. They have a number pilot districts in this study

- If a speech and language assessment is one of the assessments used to determine eligibility then the speech language specialist assessment is considered to be one of the two mandated CST evaluations

11. Social Maladjustment

- This classification is not used by any district in New Jersey
- There is no corresponding federal classification
- Therefore there is no reimbursement.
- Students who fall under this category are often classified under another one
- These students have severe behavioral problems

12. Specific Learning Disability (SLD)

- This classification is the one that most students are classified as.
- The state allows two different methods to be used to determine eligibility each district must determine which method it is going to use.
 - The method we use is called severe discrepancy model.
 - We use a statistical formula to determine if there is a severe discrepancy between a student's intellectual score and his academic scores as measured by norm referenced individually administered tests
 - The difference between the two test needs to be at the .05 level of significance
 - That means we are 95% sure the difference is a real difference and not due to statistical error.
 - Using this model one would expect 8% of the school population to be eligible for services
 - The other model that could be used is response to intervention
 - Response to intervention while in the special ed law is really a general ed initiative
 - It is based on the premise that if you use a scientifically based method of instruction one would expect at least 80% of the students to learn the material using a standard method of instruction
 - The 20% that is not learning would be placed in an alternative learning environment or taught in the same class using a more intensive scientifically proven method of instruction
 - Data would be kept and instruction is guided by results of the students progress at all levels
 - Students who are not achieving after Tier two interventions are then either placed in a Tier three intervention which is even more intensive or referred to the CST for evaluation
 - It appears that states are coming to the understanding that using this model will reduce referrals however there is still a need to determine criteria for entrance into Special Education
 - Determination of eligibility must include:
 - What is the specific learning disability

- Relevant behavior noted during observation that substantiates results of individualized standardized testing
 - A statement regarding can this severe discrepancy be Corrected without Special Education and related services
 - If the problem is due to
 - Environmental (lack of stimulation or experience)
 - Cultural or
 - Economic Disadvantage
 - The student would not be considered eligible under this category
 - A student would also not be considered eligible if their difficulty in learning is due to
 - Lack of instruction in reading
 - Lack of instruction in math
 - Limited English proficiency
- For students who score above average on the IQ score their academic test scores are compared to an average IQ (100) not the above average IQ (110 and above).
- To be eligible the discrepancy must be in one of the following areas:
 - Oral expression
 - Listening comprehension
 - Written expression
 - Basic reading skill (phonics)
 - Reading fluency (speed and smoothness)
 - Reading comprehension
 - Mathematics calculation
 - Mathematics problem solving

13. Traumatic Brain Injury (TBI)

- This is an acquired injury to the brain caused by
 - External force
 - Or insult to the brain
- Resulting in total or partial functional disability or psychosocial impairment or both
- Requires medical documentation and two CST evaluations

14. Visually Impairment (VI)

- An impairment in vision that even with correction adversely affects a student's educational performance
- Besides the two CST evaluations an evaluation by a specialist is required
Students with visual impairments must be reported to the Commission for the Blind and Visually Impaired

Appendix D

Key Terms

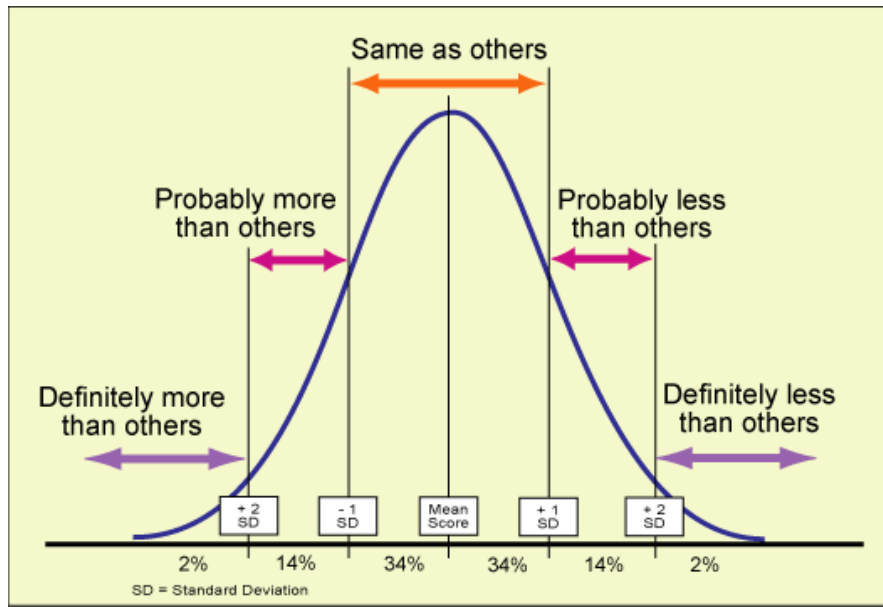
Criterion Referenced: This refers to tests that report on how your child performed in specific content areas. An example would be the specific kinds of math operations in a particular curriculum that your child has mastered.

CST: Child Study Team this team is made up of a school psychologist, social worker and learning disabilities teacher consultant (LDTC).

Grade Equivalent: Grade equivalents convert the raw score to a grade level. The grade equivalent is based on the student obtaining the same number of correct answers as the average student in a particular grade. For example, if a fourth-grade student gets a grade equivalent of 7.5 in mathematics, it is not accurate to say that the fourth-grader is doing well in seventh-grade mathematics. It is more accurate to say that a grade-equivalent score of 7.5 is an estimate of how an average seventh-grader would score on the fourth-grade mathematics test.

IEP: Individual Educational Plan

Normal Curve: Tests that are norm referenced are developed using a statistical concept the normal curve. The belief is that skills and abilities are distributed in a bell shape curved and that 68.26% of those who take the test will fall within the average range. The normal curve model is used to determine scores such as percentile ranks and standard scores. These are two scores you will see in the reports however before we discuss these scores we need to discuss a few other concepts



Norm Referenced: This refers to tests, such as the Wechsler Individual Achievement Test – Second Edition (WIAT-II), that report scores as a comparison of how your child did compared to a sample of students who are the same chronological age or grade. Examples of scores from norm referenced tests are percentile ranks, standard scores, and grade equivalent scores.

Percentile Ranks: This score is expressed in terms of the percentage of people who fall below a given raw score. For example if 40% of the people who take a test obtain less than 20 problems correct the raw score of 20 corresponds to a percentile of 40th percentile. The drawback of percentile ranks is that while the score tells you a relative position but not the amount of difference.

Significant discrepancy: Significant discrepancy is a model using standardized individually administered norm referenced tests to determine if a student is eligible for Special Education as a learning disabled student. The significant discrepancy model means that there has to be a large difference between a student's score on a test of cognitive ability, such as the Wechsler Intelligence Scale for Children – Fourth Edition (WISC-IV) and his or her score (s) on a test of academic skills, such as the Wechsler Individual Achievement Test – Second Edition (WIAT-II). A statistical formula is used to determine if the difference is large enough to meet the criteria of a learning disability.

Standard deviation: Is a measure of the variability of a score from the mean (average). It tells you what the average distance from the mean is for each of the scores in a distribution and is based on the normal curve model which assumes that scores are distributed evenly over the whole range of skills being tested. Test makers know that 68.26% of the population will fall between +1 and -1 standard deviations from the mean. They know that another 27.18 will fall between +2 and -2 standard deviations and the 2.14% of the population will fall between +3 and -3 standard deviations.

You are probably saying this is much more than I ever wanted to know however it is important to understanding test development. Test developers use the normal curve model to calculate **standard scores** which allow the CST to be able to compare the results of one test to a different test. The standard score tells the examiner exactly where on the normal curve the student falls. For example, the Wechsler Intelligence tests have a mean (average) score of 100 and a standard deviation of 15. Of the people who take the test 68.26 will score between 85 and 115 (between -1 and +1 standard deviations from the mean). An achievement test may have mean score of 100 and a standard deviation of 16 these two scores can be compared using a statistical formula.

A test that has an average score of 100 and a standard deviation of 15 usually has the following distribution

	Range of Scores	Percentage under the curve
Average	90 -109	50% of those who take the test
Low Average	80-89	16.1% of those who take the test
Deficient	70 and lower	9.9% of those who take the test
High Average	110-119	16.1%
Superior	120 and higher	9.9%

If the test has a standard deviation that is higher or lower using a statistical formula the %under the curve for each area stays the same however the range of scores changes. Therefore just looking at the scores is not a straight a comparison. For example if 1 test has a standard deviation of 15 and another 20 and on the test that the standard deviation is 15 the person score a 90 and on the other an 85 they based on the % of the curve the scores fall under they may actually be the same.

Standard Error of Measurement: If a person was to take a test twice the odds of them obtaining the same score is low. Every test has a standard error of measurement this is the expected difference between taking the test once and then again. This score is usually expressed in a range. It is an important score when comparing test given more than once because what may seem to be a change in score may not.

Standard Score: A standard score tells you in standard deviation units where a student's score is with respect to the mean of the distribution.

Restandardized Tests: Tests are restandardized about every ten years. This is because it has been found that over time the average scores on standardized tests rise. For example, a WISC standardized in 1997 would have had an average score of 100 by 2007 the average score may actually be 105. The restandardization brings the score back to 100. A student who takes the new test may appear like to score lower than when they were previously tested however they actually may be scoring the same.

Appendix E

Use of Power Web

SET UP and USE of POWERWEB
How to view IEP's on line

IMPORTANT INFORMATION

This program should have been put on you computer at work. However the tech department was very busy this summer and it may not be on your computer. If it is, please follow the directions below. If because of network security reasons you are unable to download the program please contact the Tech department. The program at present cannot be viewed on your home computer because of the security measures the district uses. We are working on resolving that problem. When a solution is found, I will let you know. If you can not access this web site at work please contact the tech department.

Smart Search Setup

1. Open up Internet Explorer
2. Type in the following address
 - a. <http://zamora/webxchange/login.aspx>
 - b. Click to have it go to this site
 - c. Add to your favorite list by going to menu bar
 - d. Click on Favorites
 - e. Then add to Favorites -- a box will appear with the web site name click yes

How to use Smart Search

- Open program
- Put in your user Name (same user name as for Bergenfield log on
- Put in your password (same password you use to log on to Begenfield
- Click log on
- Next screen will open
- Click on Bergenfield BOE
- Click on school you work in
- On right side click on IEP Search
- It will open to a new page asking for student first name and last
- Put in student first and last name
- Click search
- It will open to a new screen if you see an IEP tab click on that if not

- It will give you a list of IEP with that students name put a check in the box next to the most recent IEP
- At bottom of page click open document it should now open to the IEP program

Appendix F

Sample PLAAFP

Example !

Algebra 1 (General Education)

- **Grades:** MP 1 D 65.19 MP2 E- 49.52 MP3 E 57.36 to date

Luis does very well on the math drill. This is a quiz the class takes each Friday to measure their multiplication skills. There are a hundred questions that have to be completed in three minutes. However, Luis does not take notes and is inattentive. He does not complete assignments which imperative to his understanding. When the class is taking notes constantly walk by Luis and tap on his desk to bring his attention back to the notebook. This is a temporary cure. The teacher has had discussions with Luis about his academic success and what his role needs to be. The homework and class work is combined is combined into one section. Luis completed 35.29% of the assignments during marking period 2 and 52.5% in marking period 1. The teacher report constantly approaching Luis to check his progress and to encourage him to work. He chooses not listen and will talk to fellow classmates. The support teacher is notified of missing assignments and calls (Spanish Speaking) are made home to communicate Luis's performance. The teacher allows Luis to make up missing homework, but he does not always comply. Luis's note taking and study habits need improvement. He does not volunteer in class. He only participated when called upon randomly. When seated in the front row, Luis is less distracted and testing in the support room has helped Luis focused more He is less distracted by peers in the testing situation. Luis's behavior is age appropriate. He gets along well with peers. However, he can be disrespectful to the teacher by talking while during the lesson. He was assigned detention which he did not attend, and was written up with a behavioral report. At times, Luis makes inappropriate comments referring to comments that are not appropriate for a school setting. The teacher has addressed Luis about such behavior and it did stop. Luis utilizes the following modifications to the fullest extent: extended time, testing in support, use of a calculator, seating in the front, and extra credit assignments. Parent communication is through the support teacher (Spanish) along with progress and report cards.

The math teacher reported that Luis can handle the material of the mainstream classroom. However, his work ethic causes the problem. Not completing homework, class work, or the marking period projects takes a toll on his grade

Example 2

ICS Physical Science

Grades: MP1C+ and MP2 C-

This is a general education course with 30 students, a paraprofessional and an in-class support teacher present at least twice weekly. This course integrates hands-on, inquiry-based learning by having students work cooperatively in groups completing investigations with scaffolding and guidance provided by both teachers. The textbook, *Foundations of Physical Science*, is written at an 8th grade level.

Strengths

Cristian likes to work with the hands-on investigations. He has worked well with his partners. Cristian has completed over 90% of his class work and completes his homework to an 80% rate. This has helped his overall grade as he has a grading modification that counts these areas as 60% of his grade.

Weaknesses

Cristian has struggled with the modified tests, averaging just over 50% for both marking periods. His quiz scores have averaged 65%. Cristian has had difficulty in understanding many of the concepts in this course even though instruction is provided in many styles. Frequently, content was not only provided through lecture but also through class demonstrations and hands-on group investigations. Cristian demonstrated difficulty transferring the knowledge he had acquired from his own “real life experiences” or the completed investigations to the assessments taken in class. Due to his language deficits, his participation is minimal however he does engage his classmates in appropriate social conversation.

To help Cristian succeed in this class, several strategies have been implemented. At the beginning of the year, Cristian was provided with a 3-hole binder to keep his papers and notes in. Study skills strategies including test-taking strategies and note-taking techniques were taught in class. In addition, all homework, notes, and extra credit assignments are posted at homeworkknow.com. He has been assessed with modified tests. Furthermore, his teachers and the paraprofessional have reworded questions and provided concrete examples to enhance his understanding. When applicable, he has been provided formulas, word banks, and had his multiple choice answers reduced from 4 to 3. Other test modifications have included having key terms highlighted and reduced writing assignments. Supplemental notes have been made available at homeworkknow.com.

Modifications

- 60% of Cristian's grade in Physical Science classes will be based on homework, in class work and projects – the benefits of this modification were stated previously
- Physical Science tests will be modified by the ICS teacher and administered orally/individually – this modification has had modest success

Cristian has a good attendance record. He is usually prepared for class. Cristian is well thought of by his teachers and has age appropriate relationships with his peers. With successful completion of this course, Cristian will have met his science graduation requirement.

Christine

In-Class Support Science

Christine earned a B- for the first marking period in Science and currently she is earning a C for the second. Christine receives science instruction in an in-class support setting. In this class she has the benefit of two teachers to guide her and to assist her.

Academic Weaknesses: Christine needs extra explanation for expectations of a lab or activity, but then she works well within her group. However, her understanding in the completion of labs is weak the work she turns in is not completed with the best accuracy.

Christine is very quiet during class and does not often volunteer to participate in class discussions or to answer questions.

Work Habits: Christine works well in group activities. For the first marking period she earned a C for labs and activities. Currently in the second marking period she is at the D level as the work includes microscope activities with which she struggles more. Quizzes and tests average in the E to B- range. Her homework is usually completed on time with B range accuracy. Overall, her homework is well done and she is conscientious to have her assignments complete on time. A project earned her an A+ grade.

Personal strengths of Christine's include her exceptional positive attitude toward the class, her ability to work well with others, her organizational skills, and her work habits. In addition, she is able to follow directions well when they are broken into smaller increments and further explanation is given. She frequently has other students in her group to help her with activities and labs, but she is an active participant in this work. Her science notebook is wonderfully organized and complete.

Behavior: Christine is always well behaved and never is a behavior issue. She gets along well with her peers and works very well in group activities.

Modifications: Christine is given a study guide before tests and quizzes, and her tests are read orally in smaller group outside the class setting. A wordbox is provided when the assessment requires fill-in questions to be answered. For open-ended questions, word prompts are sometimes given. She is very careful reviewing her answers and making sure she has understood the question and all of the answer choices.

Parent Input: No parental concerns have been expressed this year to date.

