

Non Adversarial IEP Meeting Process

**Adopted by OSC January 18, 2002
Revised, OSC, May 6, 2020**

MARIN SPECIAL EDUCATION LOCAL PLAN AREA

NON ADVERSARIAL IEP MEETING POLICY

This policy is designed to promote mutual respect, civility and orderly conduct among County/District employees, parents and the public. This policy is not intended to deprive any person of his/her right to freedom of expression, but only to maintain, to the extent possible and reasonable, a safe and orderly environment. The Marin SELPA encourages positive communication, and discourages volatile, hostile or aggressive actions. The Marin SELPA seeks cooperation with this endeavor.

An IEP Team meeting is intended to develop and implement an individualized program for a student with a disability. The Marin SELPA supports and encourages positive, effective communication between parents, service providers and others. The Marin SELPA actively seeks input from all members of the IEP Team in developing a Free, Appropriate Public Education for a student with disabilities.

This policy is formulated to allow all parties to present appropriate, current information in the development of an IEP. It advocates and supports free, open communication. It also recognizes that emotions can sometimes interfere with the successful completion of the IEP.

If a member of the IEP team uses obscenities or speaks in a demanding, loud, insulting, and/or demeaning manner, the site administrator or administrator designee will calmly and politely ask the speaker to communicate civilly. If the behavior continues, the site administrator or administrator designee will terminate the meeting and reschedule within seven to ten days.

An individual who disrupts or verbally threatens to disrupt the IEP process may be directed to leave school or school district property by the site administrator or administrator designee.

Legal References

Education Code § 32210 *Willjit! Disruption of Public School or Meeting*

Education Code § 56341 (h) *Non-adversarial meetings*

Penal Code § 415.5 *Disturbance of Peace [School*

Penal Code § 626.8 *Disruptive Presence at Schools*

INCIDENT REPORT

Name _____ Site _____

Date _____ Date/Time of incident _____

Location of incident _____

Name of person you are reporting _____

Is this person a parent/guardian or relative to a student? ___ Yes ___ No

Did you feel insulted and/or harassed? ___ Yes ___ No

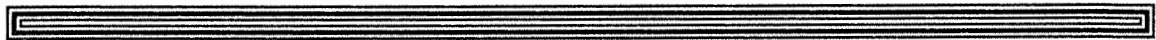
Did you feel your well being/safety was threatened? ___ Yes ___ No

Were there any witnesses to this incident? ___ Yes ___ No

Name(s) of witnesses _____

Please describe the incident _____

IF YOU NEED ADDITIONAL SPACE, PLEASE USE THE BACK OF THIS SHEET



SIGNATURE OF PERSON COMPLETING FORM

DATE

DISTRIBUTION: SUPERINTENDENT & SPECIAL EDUCATION DIRECTOR