

Greene County School System Special Education Implementation Manual 2019-2020

GCSS Mission

To educate, inspire, challenge, and support students to become college and career ready.

GCSS Department of Special Education Mission The mission of the GCSS's Department of Special Education is to create an environment where each child is valued and has opportunities to contribute meaningfully to their school and communities.

GCSS Department of Special Education Vision The vision of the GCSS's Special Education Department is to serve students with educational disabilities in a way that maximizes student independence and prepares students for sustainable employment, further education, and training.

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PREFACE

x. Introduction

This chapter serves as the introduction to the Greene County School System's (GCSS) Special Education Implementation Manual.

xi. Purpose of this Manual and Application of Laws and Recommendations

This manual is designed for use by teachers, administrators, parents, service providers, professionals, and others involved in the identification, evaluation, and education of students with disabilities in the GCSS. The manual is intended to guide the user in complying with federal and state legal requirements as they apply to the GCSS's interaction with students with disabilities and their parents.

This manual frequently refers to GCSS personnel who are responsible for carrying out certain activities, as well as the appropriate contacts if issues arise. If GCSS personnel have any questions regarding the use or interpretation of this manual or any legal or other issues affecting students with disabilities, they should contact the Department of Special Education and Student Supports at 706-453-7434.

Individuals with Disabilities Education Improvement Act (IDEA)

The Individuals with Disabilities Education Improvement Act of 2004, often referred to as "IDEA," provides federal funds to state and local agencies for the education of eligible students with disabilities. In order to be eligible to receive services under IDEA, a student must be determined to be a child with a disability and need special education and related services (each as defined under IDEA). The GCSS receives IDEA funds for the education of students with disabilities only if it complies with the specific requirements of IDEA. They include, among other things, the requirement to identify and evaluate students who may have disabilities, to determine the eligibility of such students, to develop Individualized Education Plans, to place students in appropriate settings, to follow certain procedural safeguards (including in connection with disciplinary actions), and to protect the confidentiality of student records. These requirements are discussed in more detail throughout this manual.

Congress made changes to IDEA in 2004, and the U.S. Department of Education revised the regulations on August 14, 2006 and December 1, 2008. This manual incorporates those changes.

State of Georgia Requirements

The State of Georgia has adopted its own laws and regulations covering the education of students with disabilities. These largely emulate the requirements of the federal laws and regulations discussed above, but in some instances, expand on the federal requirements. The Georgia requirements are incorporated throughout this manual.

Settlement Agreements and Similar Requirements

From time to time, the GCSS may enter into mediation, resolution, and/or settlement agreements or compliance plans in connection with administrative or court actions against the GCSS involving the education of students with disabilities. The terms of such agreements must be carried out by the GCSS in addition to the federal and state requirements discussed above.

xii. Free and Appropriate Public Education (FAPE)

IDEA requires that a student who meets eligibility criteria is entitled to receive a free appropriate public education, often referred to as "FAPE." Because the meaning of FAPE is important to all the topics covered in this manual, this section discusses its meaning in detail.

Definition of FAPE

The regulations implementing IDEA define free appropriate public education to mean special education and related services that:

- are provided at public expense, under public supervision and direction, and without charge;
- meet the standards of the Georgia Department of Education, including the requirements of the IDEA;
- include preschool, elementary school, or secondary school education for students age 3 through 21 in the State of Georgia; and
- are provided in conformity with an Individualized Education Program (IEP) that meets the requirements described in
- Chapter 2, Section 2.3 Individualized Education Plans of this manual

The meanings of special education and related services are discussed in Chapter 2, Individualized Education Plans. Other components of FAPE are discussed in detail below.

• Free: For purposes of FAPE, the term free means that required services are provided without cost to the student's parents. There may be other governmental agencies, insurers, or other third parties (e.g., Medicaid) that have an obligation to provide or pay for services required under IDEA, Section 504 of the Rehabilitation Act of 1973

(Section 504), or the American with Disabilities Act (ADA). That the IDEA regulations specify that the GCSS may access a parent's private insurance proceeds only if the parent provides informed consent as described in Chapter 3, Section 3.1 - Procedural Safeguards.

• Informed parental consent must be obtained each time the parent's private insurance is accessed, and the parent must be informed that his or her refusal to consent does not relieve the GCSS of its responsibility to ensure that all required IDEA services are provided at no cost to the parents.

The IDEA regulations also provide that the GCSS may not:

- require parents of a student with a disability to sign up for or enroll in public insurance programs in order for their child to receive FAPE under IDEA;
- require parents to incur an out-of-pocket expenses such as payment of a deductible or co-pay amount incurred in filing a claim for services provided under IDEA;
- use a student's benefits under a public insurance program if that use would decrease available lifetime coverage or any other insured benefit;
- result in the family paying for services that would otherwise be covered by the public insurance program and that are required for the student outside of the time the student is in school;
- increase premiums or lead to the discontinuation of insurance; or
- risk loss of eligibility for home and community based waivers, based on aggregate health-related expenditures.

For assistance in locating potential sources of services or funding for services to meet the FAPE requirements, personnel should contact the Department of Special Education and Student Supports at 706-453-7434. The requirement that services be provided without cost to the student's parents applies only to the costs of special education and related services. The GCSS may charge the parents of students with disabilities any incidental fees that are normally charged to students without disabilities or their parents as part of the general education program. For example, fees may be charged for classroom supplies, art supplies, etc., if parents of students without disabilities are charged for the same supplies and the supplies are not part of the student's special education and related services.

- Appropriate: The meaning of the term appropriate will depend on the unique needs of the individual student. Under IDEA, an appropriate education to a student with a disability is provided when:
 - The GCSS personnel comply with applicable federal and state law, and the procedural requirements described in this manual; and the individualized education program developed for the student is reasonably calculated to enable the student to receive educational benefit. The federal regulations implementing

IDEA defines an appropriate education as the provision of general or special education and related aids and services that:

- are designed to meet individual educational needs of persons with disabilities as adequately as the needs of persons without disabilities are met; and
- are based on adherence to procedures that satisfy the requirements for evaluation (described in Chapter 1.0, Section 1.5 - Evaluations and Reevaluations), placement and educational setting (described in Chapter 2, Section 2.1 - Least Restrictive Environment), and procedural safeguards (described in Chapter 3, Section 3.1- Procedural Safeguards and Parental Rights).

The GCSS is not required to provide the best possible education for a student with a disability. However, the GCSS must provide a program that is designed to provide some educational benefit to the student. These educational benefits must be more than minimal, meaning that the program must be designed to result in some tangible gain in the student's abilities.

• Public: The term public education means one that meets the standards established by the Georgia Department of Education, including standards that relate to compliance with IDEA. This requirement does not mean that a student cannot be placed in a private school or facility if the IEP determines that such a placement is needed to provide FAPE.

Students who are Entitled to FAPE

The GCSS is required to ensure that FAPE is available to all students with disabilities, aged 3 through 21, residing within the GCSS, including students with disabilities who have been suspended or expelled from school. FAPE includes the requirement that the GCSS engage in appropriate child find activities for certain children who are not enrolled in the GCSS, such as students in private schools and homeless students. These requirements are discussed in Chapter 3.0 Identification. The FAPE requirements specifically apply to students who have been suspended or expelled. For a discussion of the requirements for disciplinary action against a student with a disability, please refer to Chapter 2, Section 2.2 - Discipline.

When the FAPE Requirement Terminates

The GCSS's obligation to provide FAPE to a student ends when:

- the student is found not eligible through a reevaluation;
- the student graduates with a general education diploma;
- the student ages out at 22 years old;
- the parent provides the GCSS with a written revocation of consent and the GCSS issues a prior notice of revocation of services; or

• a hearing officer orders the termination.

FAPE for Students in Private Schools

If the GCSS has made FAPE available to a student in a timely manner, and the student's parent(s) nevertheless unilaterally place(s) the student in a private school or facility, the GCSS is not obligated to pay the costs of the private school placement. These provisions, as well as certain other limitations on the FAPE requirement for students in private schools, are described in Chapter 2, Section 2.1 - Least Restrictive Environment.

FAPE for Students in Adult Prisons

Under IDEA regulations and Georgia requirements, a student aged 18 through 21 may not be eligible to receive FAPE if:

- he or she is incarcerated in an adult correctional facility;
- not identified as a student with a disability before the incarceration; and did not have an IEP.
- These provisions are discussed in Chapter 1, Section 1.4 Child Find.

Chapter One 1.0 - Introduction

Child Find is a federally established comprehensive system designed to assure that each child, regardless of disability, is educated toward his or her maximum potential. The purpose of child find is to locate, identify, and evaluate infants, children, and young adults through age 21 who may have a developmental delay or other disabilities.

The GCSS is charged to have in effect policies and procedures for the identification, location, and evaluation of all students with disabilities residing within its borders who have disabilities which impact learning, regardless of the severity of the disability, and who are in need of special education and related services. This policy includes students attending private schools and students who are homeschooled and who are residents of the GCSS.

While many children who have significant disabilities are identified by local treatment and health care agencies prior to school age, many children have disabilities which either are not as easy to identify or which manifest later in life. Research has demonstrated that early identification and intervention enable children to move beyond their present limitations and reach levels of success that would not occur without early services and supports. It is critical that effective, ongoing child find activities be implemented at an early age so that all children who have disabilities which impact educational performance are found early, allowing meaningful interventions to begin. Local Education Agencies (LEAs) are encouraged to make public awareness and child find priority components of their standard operating procedures.

1.1 Confidentiality of Personally Identifiable Information State Rule: <u>160-4-7-.08</u>

Compliance Monitoring Protocols

All personally identifiable student records will be handled and maintained in such a manner as to ensure confidentiality. The GCSS's Special Education Administrative Assistant is required to maintain all special education records in a secure facility. Additionally, all student records are maintained electronically through the password protected Go-IEP platform. The Go-IEP platform has scaffolded levels of access depending on an employee's role within a school or at the district level. Records requests can be facilitated by contacting the Department of Special Education and Student Supports at 706-453-7434. At parent request, the GCSS follows specific procedures for records destruction when the information is no longer needed to provide educational services to the student. GCSS maintains a permanent record of a student's name, address, telephone numbers, grades, attendance records, classes, and grade level completed.

Professional Learning

Staff receive annual training regarding the GCSS's established procedures for the destruction of confidential information. Parents receive written notice whenever personally identifiable information is collected, maintained or used in accordance with FERPA and applicable regulations. Special education staff will provide ongoing professional development as needed during School Special Education Lead meetings (no less than seven meetings per school year).

Technical Assistance

The Director of Special Education, Coordinator of Special Education, and Special Education Administrative Assistant are available for technical assistance.

A. Confidential Information

The provisions of the Family Educational Rights and Privacy Act (FERPA) apply to any

institution that receives federal education funds. The information about a child being a child with a disability eligible under the IDEA, his or her special education and related services, and other related information is confidential and is not released to others within the system unless they have a legitimate need to know nor is it released to other agencies or groups except under limited circumstances. Written and dated parental consent must be obtained before personally identifiable information can be disclosed to unauthorized individuals, organizations, or agencies.

FERPA allows parents to inspect and review all educational records of their child maintained by any educational agency that receives federal funds. This includes all public schools and most private schools. The school must comply with a request to inspect records within a reasonable amount of time, but no longer than 45 days after the request has been made. All IEPs, BIPs, and psychologicals should be stored in a secure (locked) location at all times.

B. Access Rights and Required Procedures

- 1. Parents have the right to inspect and review any education records relating to their children that are collected, maintained, or used by the GCSS . The GCSS must comply with a request without unnecessary delay and before any meeting regarding an IEP, any due process hearing, or resolution session, and in no case more than 45 days after the request has been made.
- 2. Once a student reaches the age of 18 or attends a postsecondary institution, all rights formerly given to parents under FERPA transfer to the student.
- 3. No records are released to outside agencies without a parent signing a Release of Records form. An exception to this rule would be releasing to another school by request.
- 4. Any file removed from the Department of Special Education must have a signed checkout card.
- 5. The file room is locked after hours.
- 6. All special education records maintained at the schools are in locked file cabinets.
- 7. At the school level, all case manager files are maintained in a locked cabinet or drawer and have a Record of Access form.

C. Amendment of Records at parent request

1. Under FERPA, a parent or other assigned person not only has the right to inspect or review records, he or she also has the right to request that the records be amended if the parent believes they contain information that is inaccurate, misleading, or in violation of the student's right of privacy. If the school does not agree to amend the records, the school must notify the parent of his or her right to a hearing. If the parent decides to request a hearing, the school must hold the hearing within a reasonable time. The hearing may be conducted by anyone who does not have a direct interest in the outcome of the hearing. The parent must be given a full and fair opportunity to present evidence. Results following the hearing are presented to parents via written documentation by the GCSS Hearing Officer.

- 2. The GCSS must make its decision in writing, based solely on the evidence presented at the hearing. The decision must include a summary of the evidence and the reason(s) for the decision and a copy shall be sent to the parent(s) or legal guardian(s).
- 3. The right to challenge an educational record, however, does not grant a parent the right to contest the grade a teacher assigns to a student. FERPA gives parents the right to challenge a record in which a grade had been improperly recorded, but parents cannot contest whether the teacher should have assigned a higher grade.
- 4. For amendments to records of students no longer enrolled (name changes, gender changes, etc.), schools are not required to change the record or provide a hearing if the record was accurate at the time it was made.

D. Parental Consent

Parental consent must be obtained before personally identifiable information is disclosed to other parties unless the disclosure is authorized without parental consent. Prior consent is not required to release information to:

- 1. Parents or eligible children.
- 2. Other school officials, including teachers, within the agency or institution whom the agency or institution has determined to have legitimate educational interests. This includes teachers within the GCSS, legally constituted cooperating agencies, or other agencies providing shared services.
- 3. Officials of another school, school system, or institution of postsecondary education in which the child seeks enrollment or is eligible to enroll, upon condition that the student's parents be notified of the transfer, receive a copy of the record, if desired, and have an opportunity for a hearing to challenge the content of the record.
- 4. Authorized federal, state or local representatives in connection with an audit or evaluation of Federal or State supported education programs, or for the enforcement of or compliance with Federal legal requirements which relate to those programs. The information must be protected in a manner that does not permit personal identification of individuals by anyone except the officials referred to above and must be destroyed when no longer needed.

- 5. In connection with a child's application for or receipt of financial aid for which the child has applied or which the student has received, if the information is necessary.
- 6. State and local officials or authorities to whom this information is specifically allowed to be reported or disclosed pursuant to a State statute concerning the juvenile justice system.
- 7. Organizations conducting studies for, or on behalf of, educational agencies or institutions to develop, validate, or administer predictive tests; administering student aid programs; or improve instruction . Information may only be disclosed if the study is conducted in a manner that does not permit personal identification of parents and students by individuals other than representatives of the organization and the information is destroyed when no longer needed.
- 8. Accrediting organizations to carry out their accrediting functions.
- 9. In compliance with a judicial order or a lawfully issued subpoena. The GCSS must make a reasonable attempt to notify the child's parents of the judicial order or subpoena before releasing the records, unless the disclosure is in compliance with a Federal grand jury subpoena or other subpoena issued for law enforcement purposes and the court or other issuing agency has ordered that the existence or the contents of the subpoena or the information furnished in response to the subpoena not be disclosed.
- 10. Disclosure in connection with a health or safety emergency, if the knowledge of the information is necessary to protect the health or safety of the child or other individuals.
- 11. The disclosure information has been designated as "directory information" and the GCSS has given public notice to parents and eligible students of the types of personally identifiable information that the GCSS has designated as directory information, a parent's or eligible student's right to refuse to let the GCSS to designate any or all of those types of information about the student as directory information, and the period of time within which a parent or eligible student has to notify the GCSS in writing that he or she does not want any or all of those types of information about the student as directory.

E. Safeguards

The GCSS must protect the confidentiality of personally identifiable information collection, storage, disclosure, and destruction states. The GCSS's superintendent or designee must ensure the confidentiality of any personally identifiable information.

- 1. The GCSS's Special Education Administrative Assistant:
 - a. Checks all folders for Record of Access

- b. Files checkout cards
- C. Secures file room
- 2. The Director of Special Education and/or Coordinator of Special Education will conduct random checks of student file storage.
- 3. The school administrator and/or the special education case manager will monitor the secure storage all confidential information.
- 4. All persons collecting or using personally identifiable information must receive training or instruction regarding department policies and procedures concerning personally identifiable information
- 5. All special education records contain a Record of Access form that is signed by the person who is viewing the documents.
- 6. No records are released to outside agencies without a Release of Records containing a parent signature. Exception to this rule would be releasing to another school by request.
- 7. Any file removed from the Department of Special Education must have a signed checkout card.
- 8. File room is locked after hours.
- 9. All special education records maintained at the schools are in locked file cabinets.
- 10. At the school level, all case manager files are maintained in a locked cabinet or drawer and have a Record of Access.

F. Destruction of Confidential Information

- 1. Destruction means physical destruction or removal of personal identifiers from information so that the information is no longer personally identifiable.
- 2. Student information must be destroyed at the request of the parents when the information is no longer needed to provide educational services to the child. However, a permanent record of a child's name, address and telephone number, grades, attendance record, classes attended, grade level completed and year completed may be maintained without time limitation.
- 3. Prior to destruction of records, parents must be informed that personally identifiable information collected, maintained, or used in the provision of FAPE is no longer needed to provide educational services to the child .
- 4. PROCEDURE FOR DESTRUCTION OF SPECIAL EDUCATION RECORDS: Records are Destroyed When No Longer Needed for Educational Purposes. The GCSS Retains Records for Two Years Past The Student's 22nd Birthday.
 - Run ad in the local paper for 4 weeks (larger than legal ad).
 - Run announcement on the GCSS website.
 - Retain copies of all announcements as documentation of notification.
 - If student picks up records have release of information signed and

release records.

- Retain a copy of the signed release of information.
- Maintain A-Z list including date of birth of destroyed records.
- **G. Implementation of Compliant Practices** At parent request, the GCSS follows the aforementioned procedures for records destruction when the information is no longer needed to provide educational services to the student. The GCSS maintains a permanent record of a student's name, address, telephone numbers, grades, attendance records, classes, and grade level completed.

1.2 Response to Intervention Team

State Rule: <u>160-4-2-.32</u>

Compliance Monitoring Protocols for RTI

Each school administrator is required to assign a building level RTI Lead to ensure timelines and RTI/SST protocols are compliant. As needed, the RTI Lead may collaborate with special education staff to determine potential interventions. Additionally, the RTI Lead is tasked with communicating individual student progress through the RTI process to the Coordinator of Special Education.

Professional Learning

The GCSS's special education staff will provide ongoing professional development as needed during monthly team leader meetings (no less than seven meetings per school year). Teachers new to the GCSS receive additional professional learning during their extended

Technical Assistance

Technical assistance is available through the GCSS's Department of Special Education and Student Supports and each building's RTI Lead.

Components

Response to Intervention Team - An interdisciplinary group that uses a systematic process to address learning and/or behavior problems of students, PreK-12, in a school.

Requirement for Local School RTI

Each school shall have a minimum of one SST (Student Support Team) and shall establish support team procedures. Before a referral is made for supplemental or support services, an

evaluation and/or assessment will be conducted to determine a student's current level(s) of functioning.

Prior Student Evaluation

Prior evaluation(s) and/or assessment(s) of a student for a state or federal program shall be considered as having met this requirement.

RTI Team Members

In the GCSS, the Response to Intervention/Student Support Team members include (at a minimum) the referring teacher and at least two of the following participants, as appropriate to

the needs of the student: 1 . Principal; 2. General Education Teacher; 3. Counselor; 4. Lead Teacher; 5. School Psychologist; 6. Subject Area Specialist; 7. ESOL Teacher; 8. Special Education Teacher; 9. School Social Worker; 10. Board of Education Personnel; 11 . Section 504

coordinator; 12. Other appropriate personnel.

Parents/guardian participation

In the GCSS, all parents/guardians shall be invited to participate in all meetings of their child's RTI team and in the development of interventions for their child. In the event the parent does not attend, the team will offer alternative dates/times up to 3 documented times. At the third attempt, the school's social worker will extend a personal invitation at the parent's home. Per IDEA guidelines, the meeting may proceed if the parent fails to respond after 3 documented attempts. However, consideration should be given to each family's needs and current situation.

Parents should be offered the option to participate in person, via telephone, or to receive a home visit to review the meeting's contents.

Steps of RTI process

Each school in the GCSS shall include the following steps in the RTI/SST process:

- 1. Identification of learning and/or behavior problems.
- 2. Assessment, if necessary.
- 3. Educational plan.
- 4. Implementation.
- 5. Follow-up and support.

6. Continuous monitoring and evaluation (district-adopted data platform will be used to document and track academic and behavior intervention data for each tier of the process).

Documentation of RTI/SST Activities

Documentation of RTI/SST activities shall include the following:

- 1. Student's name;
- 2. Names of team members;
- 3. Meeting dates;
- 4. Identification of student learning and/or behavior problems;
- 5. Any records of assessment;
- 6. Educational plan and implementation results; and
- 7. Follow-up and, as appropriate, continuous evaluation.

Exceptions to the use of the RTI Process

(a) School personnel and parents/guardians may determine that there is a reasonable cause to bypass the SST process for an individual student. Documentation in the student's record shall clearly justify such action, including whether the parent or guardian agreed with such a decision. In cases where immediate referral is sought, the SST shall still determine what interim strategies, interventions, and modifications shall be attempted for the student.
(b) It is not necessary for students who transfer into the local school system/state operated program with a current Individualized Education Program or Section 504 plan to go through the SST process.

1.3 Child Find Procedures: State Rule: <u>160-4-7-.03</u>

Compliance Monitoring Protocols

The Office of Special Education and Student Supports oversees the planning, implementation, and applicable services resulting from evaluations which are publicly advertised. The Coordinator of Special Education collaborates with other district personnel including the Director of Special Education and Student Supports and the Pre-k Coordinator.

Professional Learning

Preschool Special Education Teachers attend DOE trainings including information related to GELDS, Babies Can't Wait, etc. The teacher(s) then shares this information with other personnel as appropriate.

Technical Assistance

Technical assistance is provided by the Director of Special Education and Student Supports, the Coordinator of Special Education, and the School Psychologist assigned to Preschool Special Needs.

In Accordance with federal regulations and State Board Rule 160-4-7.03, the GCSS assumes the responsibility for the location, identification, and evaluation of all children birth through age 21 that require special education and related services. Annual child find activity is published or announced in the newspaper or other media. The GCSS will provide details and dates for Child Find Screenings to community agencies such as doctor's offices, health department, daycares, etc. Child Find procedures are also published on the GCSS website.

All children who are suspected of having a disability and who are in need of special education are part of the child find process, regardless of age. Child Find provides for screening and evaluation of all children suspected with disability ages 3-12. This includes children who are:

Children birth through age three:

- The GCSS fulfills its child find responsibility through referral to the Babies Can't Wait (BCW)early intervention program operated by the Department of Community Health for children birth through age three.
- Babies Can't Wait coordinates and facilitates the referral process to the GCSS through a transition conference. A parent or guardian must consent to allow BCW to contact the GCSS. Children being referred from BCW are children with disabilities who :
 - are approaching the age of three;
 - are transitioning from BCW;
 - have an Individualized Family Service Program (IFSP);
 - are identified as being potentially eligible for preschool special education services.

Preschool children, ages 3-5:

- A representative from the GCSS attends all Babies Can't Wait transition meetings for all students who reside in Greene County. At that meeting, the team determines if an initial evaluation is needed with parent permission. The GCSS representative schedules the evaluation and staffing meetings with the parent in order to ensure services can be available, if the student qualifies for eligibility in special education, by the date the student turns 3 years old.
- The GCSS uses the <u>Preschool Referral Request Packet</u> to begin the referral process for children ages 3-5.

Children enrolled in the LEA schools, including public charter schools:

• In each building, the GCSS administrator will set up an RTI team to review the academic progress and results of interventions of individual students. The RTI team at the school

is responsible for reviewing the data from the Universal Screener and selecting the point at which students will be identified for interventions. Teachers can also refer students to the RTI team for review. If the RTI team suspects a student may have a disability, the RTI team can refer the student with parental permission.

Children who are suspected of being children with disabilities:

• The RTI team at the school is responsible for reviewing the data from the Universal Screener and selecting the point at which students will be identified for interventions. Teachers can also refer students to the RTI team for review. If the RTI team suspects a student may have a disability, the RTI team can refer the student with parental permission.

Highly mobile children, including migrant children:

• The GCSS has policies and procedures to ensure that all suspected children with disabilities, including those who are homeless, are wards of the State or are attending private schools, regardless of the severity of their disability, and who are in need of special education and related services, are identified, located and evaluated.

Children who are detained or incarcerated in jails or correctional facilities

• The GCSS will implement Child Find duties for youth who are incarcerated in jails or other correctional facilities operated by local municipalities. Georgia DJJ and Georgia DOC will implement Child Find duties for the youth enrolled in their respective facilities.

Children enrolled in homeschool/study programs

• Child find information is disseminated through community agencies such as doctor's offices, health department, daycares, etc. and is also published on the GCSS website. if a child who is home-schooled is determined eligible for special education and related services, the GCSS must also be considered in a proportionate share of federal funds for private school children. In Georgia, home-schooled children are treated as private school children in regard to special education.

Parentally-placed private school children, including religious, elementary and secondary schools:

• Private schools in Greene County are provided with information regarding the evaluation process offered by the GCSS for students in the county. The psychologist assigned to the corresponding grade will establish an RTI meeting to review the academic progress and results of interventions of individual students. The RTI team at the private school is responsible for monitoring academic progress and selecting the point at which students will be identified for interventions. If the RTI team suspects a student may have a disability, the RTI team can refer the student for evaluation with

parental permission. The GCSS's Department of Special Education and Student Supports is contacted by the private school administrator to schedule a meeting should the RTI team request a referral for initial evaluation.

Screening to determine appropriate educational strategies is not to be considered evaluation:

- Child Find Screening Process:
 - A multi-disciplinary observation team will be utilized to complete the screening. The Preschool Evaluation Team members include: Special Education teacher, School Psychologist, Speech/Language Pathologist, School Nurse, and Social Worker. The child will be given a brief screening evaluation in the following areas: Vision/Hearing, Cognition, Communication, Motor, Self-Help, and Social.
- Post-Screening Meeting:

After the screening, the Preschool Evaluation Team will review screening information and make team recommendations. These may include, but are not limited to: no further intervention needed, skill intervention for designated time, or full evaluation. At the conclusion of the skill intervention trial, parents will meet with members of the Preschool Evaluation team to review information collected and to discuss further direction. If the recommendation warrants a full evaluation, skill intervention may be introduced for the allotted time until eligibility is determined. For full evaluations, parents will be assigned an appointment for evaluation at the post-screening meeting.

Student referrals must be accompanied by documentation of scientific, research or evidence based academic or behavioral interventions that demonstrate insufficient rate of progress. Exceptions allowed only when evaluation and/or placement is required due to a significant disability.

- Any child ages 3-5 residing in the school district can be referred for a Child Find screening. Children not currently attending a GCSS PK class can attend Child Find Screenings.
- Overview of Child Find Screening:
 - Preschool Child Find is a federally mandated free resource offered to Greene County residents ages 2 years 5 months - 5 years old. Preschool Special Education Child Find screenings offer families a service that can assist with identifying potential special education needs, provide educational opportunities with skills instruction, and early intervention education. Physicians, therapists, local preschool or daycare providers, or other entities can initiate a Child Find referral with parental permission. Parents may make a referral at any time. Appointments are private scheduled and located at the Greene County Pre-k..

1.4 Evaluations and Reevaluations: State Rule: <u>160-4-7-.04</u>

Definition

Eligibility determination for special education services occurs only when a student's response to both core instruction and supplemental interventions does not result in movement toward achieving benchmarks resulting in grade level performance. Likewise, a student may be considered for special education if the individual response to intensive interventions produces meaningful growth, but that growth requires significant and ongoing resources to maintain.

Compliance Monitoring Protocols

When a referral for special education evaluation is made, a multidisciplinary team will conduct a comprehensive evaluation. This team may consist of the district's psychologist, speech-language pathologist, occupational therapist and/or physical therapist, parents, and others as appropriate to the evaluation. The team is responsible for assessing the student in all areas related to any suspected disability and in any other areas deemed relevant. The parents will be asked to provide input during the evaluation process. Their information is valuable in developing the total picture of the child. General education teachers and teachers of special education are also a part of the eligibility determination team and are considered qualified professionals as well. School psychologists will work directly with Special Education Administrative Assistant to ensure compliance with GADOE and USDOE rules for evaluations and reevaluations. School psychologists send out weekly status updates to team members regarding timelines. The Director of Special Education and/or Coordinator of Special Education review timelines in Go-IEP and provide school administrators with these updates.

Professional Learning

School psychologists will participate in ongoing professional learning during monthly department meetings. School psychologists will then re-deliver applicable professional learning to special education colleagues and school-based colleagues. SPED Team Leaders receive professional learning during regularly scheduled team leader meetings (no less than seven per school year).

Technical Assistance

School psychologists will collaborate with the Director of Special Education and/or Coordinator of Special Education to ensure appropriate use of Georgia Online Individual Education Plan/Student Longitudinal Data System (GADOE/SLDS).

Initial evaluation referral process

The term "Initial Evaluation" refers to a formal evaluation that considers initial eligibility for special education services. Initial evaluation applies to:

- general education students with no history of special education;
- general education students who previously received and were exited from special education including general education students whose parents revoked consent for the continued receipt of special education services; or
- all transfer students from other states who have a current out-of-state eligibility that does not support Georgia State eligibility requirements.

Review of evaluation data and determination of need for additional data: In the case of students transitioning from Babies Can't Wait Services at age three (IDEA, Part C), or for students from out-of-state that have evaluation records available, as part of an initial evaluation, the combined members of the student's IEP committee and the Eligibility Team shall review existing evaluation data. Based on that review and input from the student's parent, the team must identify what additional data, if any, are needed. The group may conduct its review without a meeting.

Request for an Initial Evaluation Referral

If the parent requests an initial evaluation, either verbally or in writing, the GCSS staff must respond formally. The GCSS may determine:

- an evaluation is NOT warranted or determine that interventions will be tried first, then prior written notice must be completed and sent to parents or
- an evaluation is warranted, then proceed with procedures for initial referral procedures and continue with RTI support as needed. A written request from a parent should be forwarded immediately to the Director of Special Education as the date of this request may constitute informed consent which initiates the 60-day timeline.

Parent Consent

The Greene County School System must obtain a signed parent consent for evaluation. After consent is signed, the GCSS has 60 calendar days to complete the initial evaluation. The evaluation will be considered completed when the evaluation report(s) have been written. While the GCSS will work to share these results as close to the 60 days as possible, the GCSS is not required to make the eligibility determination during the 60 day initial evaluation timeline. The 60-calendar-day time period begins when a GCSS employee receives the signed consent but excludes school holidays and other times when children are not in attendance for five or more consecutive school days, including the weekend days before and after the holiday period. Any summer vacation period when the majority of the GCSS teachers are not under contract does not count toward the 60-day time period. If consent is received 30 days or more before the

end of the school year (defined as the teachers' last day under contract), the evaluation process must be completed within the 60-day time period. An exception to the 60-day time period occurs if the parent fails or refuses to produce the child for the evaluation, if extenuating circumstances exist (e.g., illness, unusual evaluation needs, or revocation of parental consent), or if the child moves to another LEA after the 60-day time period has begun.

Multidisciplinary Evaluation Team

When a referral for special education evaluation is made due to a concern that the child may have a disability and be in need of special education and related services, the comprehensive evaluation will be conducted by a multidisciplinary team. This team may consist of a psychologist, speech-language pathologist, occupational therapist, physical therapist, the child's teacher(s), and others as appropriate to the evaluation. The child's parents are considered members of this team. The child should be evaluated in any area which committee members have determined to be an area of weakness. The team is responsible for formally or informally assessing the child in all areas related to a suspected disability. Formal assessments may include standardized tests, criterion-referenced tests, and norm-referenced tests, and informal assessments may include teacher-made assessments, naturalistic observations, and interviews. The child's parents will be asked to provide input during the evaluation process. Their information is valuable in developing the total picture of the child.

Comprehensive Evaluation

An initial evaluation needs to look at the needs of the whole child, regardless of the reason for the referral.

In a comprehensive evaluation, the team will:

- informally and formally assess all areas related to any suspected disability, including, if appropriate, vision and hearing, health, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities;
- use a variety of evaluation tools and strategies to gather relevant academic, functional, and developmental information about the child, including information provided by the parents;
- not use any single procedure as the only criterion for determining whether a child is a child with a disability or for determining an appropriate educational program for the child;
- use assessment techniques that may assess developmental, physical, intellectual, academic, communication, and social/emotional skills;
- use evaluation tools and strategies to provide relevant information that will directly assist the eligibility team in determining the educational needs of the child;
- use assessments and other evaluation materials to assess specific areas of educational need and not only those that are designed to provide a single general intelligence quotient (IQ) score; and

• select assessment methods that, when administered to a child with impaired sensory, manual, or communication skills (to include English Learner (EL) barriers), the results accurately reflect the child's aptitude or achievement level and are not culturally biased.

Steps in the Evaluation Process

After a referral for special education evaluation and consent are obtained, the 60-calendar-day timeline begins. During this time the following steps should occur as part of the evaluation process.

- Review all other data about a child, which include the permanent record, current classroom assessment and progress, results of any provided interventions, previous results of statewide assessments, attendance data, and disciplinary history.
- Conduct classroom observations in a setting in which the concern has been noted to determine current performance and to look for specific causes or reasons why the child is not learning or behaving at the expected levels.
- Interview current and previous teachers of the child. The focus of the interviews is to determine whether the concerns cited as the reason for the evaluation are new issues or recurring issues. In addition, the interviews will provide information on any interventions or strategies that may have been tried previously.
- Interview parents as part of the evaluation process. If the parents have any independent evaluations or medical information they have not provided to the district, they are asked to provide the information to the district. Information the parents have about learning at home, such as how long it takes the child to complete his or her homework and how much help the child requires, assists in the evaluation. Often the behavior of the child at home is also discussed to determine whether the parents see the same behaviors that the school sees, what kind of interventions work at home, and how frequently certain behaviors occur. In addition, many times the district needs to screen for adaptive behavior, and it may ask questions about household chores or tasks, about money management, and about other things that do not always *feel educational* to the parent. This information contributes to the whole picture of the child.
- Review all previous information and data on the child (e.g., previous evaluations, medical reports, psychological evaluations, and independent evaluations). This helps the team determine which evaluations to administer for the current evaluation.
- Administer surveys or questionnaires. These are usually published forms of surveys or questionnaires that gather information about the typical day-to-day behavior of the child. The surveys or questionnaires are often completed by multiple people who know the child in order to provide a comprehensive view that encompasses school, home, and the community.
- Review information as data is received. The multidisciplinary evaluation team begins to review the information and determine what individual assessments are needed, and by whom, to provide more in-depth information. The needed assessments are then

conducted and may include a variety of instruments that look at learning, listening, speaking, behavior, sensory, motor, and/or academics.

- Evaluate other areas of concern as they arise during the initial data gathering phase. As these assessments are administered, other areas of concern may arise that need to be evaluated and additional assessments will be conducted as necessary. For example, fine motor skills may not have been a concern when the evaluation was requested; but, information from the assessments and observations may indicate a concern that warrants an evaluation of the fine motor skills as a component of the comprehensive evaluation.
- Score and analyze results. All instruments are scored, and the results are analyzed and interpreted by the professionals who administered the instruments.
- Meet to discuss the evaluation results with the parent and educators, with accompanying evaluation report(s) at this time. This discussion could occur at the completion of the 60-day initial evaluation period or at the eligibility meeting, which as a matter of best practice, should occur within 10 calendar days of the completion of the initial evaluation.
- Conduct an eligibility meeting. The eligibility meeting determines whether a disability exists and what the impact is on the education of the child. If there is an adverse impact, the team may determine that the child is a child who needs special education and related services. Evaluation report(s) and an eligibility report are created regardless of whether the child is determined eligible or ineligible.

Reevaluation Consideration

The term "reevaluation" refers to the formal evaluation of a student who is already identified as eligible for special education services under IDEA. Reevaluation applies to:

- students who are routinely evaluated every three years for continuing special education eligibility in Georgia unless the team, including the parent agree, based on a review of existing data, that an evaluation is not necessary to re-determine eligibility (special education eligibility must be reestablished every three years for any student receiving special education services);
- students who are evaluated for continuing eligibility for special education in Georgia under a different or additional eligibility classification. This includes: students who currently hold Significant Developmental Delay or Speech/Language Impairment eligibilities;
- other students whose primary eligibility classifications might change (e.g., SLD to EBD, MID to MOID). A reevaluation is required if there is sufficient information to suspect that a significant change in a student's physical, psychological, academic, or social functioning is occurring that may have an impact on the student's eligibility for special education and/or related services, including situations where the student may

no longer need special education services to receive an appropriate education.

Reevaluations

This refers to the first step in the reevaluation process. This step involves reviewing all pertinent existing data that is relevant to the determination of a student's eligibility and making an informed decision as to whether the existing data substantiates the student's current eligibility area(s) or if there exists a need for additional data in order to make an eligibility decision. The GCSS special education personnel uses the <u>Reevaluation Data</u> <u>Review Packet</u> as a guide for assisting personnel in the reevaluation process.

Review of evaluation data and determination of need for additional data

As part of any reevaluation, the combined members of the student's IEP team shall review existing evaluation data and on the basis of that review and input from the student's parent, identify what additional data, if any, are needed. The combined members:

- conduct a review of data from existing evaluations, including, without limitation; other evaluations and information provided by the parents of the student,
- current local or state assessments, classroom-based assessments and observations,
- observations by teachers and related service providers and input from the student's parent(s).
- identify if any additional data are required to determine whether the student continues to have a disability and the educational needs of the student; the present levels of academic achievement and related developmental needs (functional levels) of the student; whether the student continues to need special education and related services; and whether any additions or modifications to the special education and related services are needed to enable the student to meet the measurable annual goals set out in the IEP of the student; and to participate, as appropriate, in the general education curriculum.

Steps for Eligibility

The Case Manager will review and identify students on his or her caseload that need consideration for eligibility reevaluations. Any student whose eligibility will expire prior to September 30 of the following school year, should be completed the prior year.

The Case Manager should make every effort to schedule the reevaluation at the same time as the annual IEP review. This conference should include an LEA, at least one general education teacher, a special education teacher, and the school psychologist.

Starting a Reevaluation in Go-IEP

The Case Manager will use the link on the Timelines page to **START Reevaluations**. This will open a reevaluation meeting notice. If an IEP will also be developed at the same

meeting, select IEP as an additional purpose. The Notice will be provided to the parent at least ten days prior to the meeting date.

- Prior to the meeting the Case Manager will gather existing data on the student and enter a summary of the data in the Reevaluation Data Review Form in Go-IEP.
- During this time, the case manager will provide the parent with the Reevaluation Data Review Packet. When the signed Vision/Hearing Screening Consent is returned, the Case Manager will provide the Consent to Screen Vision/Hearing to the School Nurse or designated school Vision/Hearing Screener.

Reevaluation Data Review

The Case Manager is expected to come to the meeting with a draft of the Reevaluation Data Review. Case Managers are expected to add additional information discussed at the meeting to the Data Review Form. When completing this form, the team should discuss all factors relevant to the decision regarding continued eligibility. This information is based on a review of existing data on this child such as performance on goals, observation, interview, or other prior assessments. Greene County requires that ALL sections of the Data Review Form are completed. **Remember to pay careful attention to those factors that are pertinent to the existing disability area(s).** The text that is entered in these fields should support the decision that will be made regarding continuing each disability area. These statements should clearly outline areas of growth, regression and/or stagnation. Statements like "See Psychological Report" or "See IEP Goals" are insufficient.

- A student should not be formally evaluated prior to the reevaluation since Consent to Evaluate would be required prior to completing any formal assessments.
- At the Reevaluation Meeting, using the Reevaluation Meeting form in Go-IEP, the Case Manager will review existing data with the team members. The Case Manager will update the information and/or add information submitted from team members including the parents. The Case Manager will facilitate discussion regarding the data, and guide the team in determination that the student continues to qualify for special education and related services based on the existing data or that additional evaluation data is needed in order to make a determination of eligibility. The Psychologist will enter the determination decision into the form in Go-IEP including the rationale for the decision.

Reevaluation Part 2

When completing Part 2 of the Revaluation Form, the team needs to select ONE of the two options. BOTH may **not** be selected.

Comprehensive Evaluation Needed

Additional information is needed prior to making the decision regarding continued eligibility status. If this option is selected, a comprehensive evaluation is required. The

previous eligibility remains in effect until a newer eligibility is completed. The previous due date is still in effect.

- The School Psychologists or Speech-Language Pathologist will provide a Consent to Evaluate Form for the parent to sign. The signed Consent to Evaluate Form will be sent to the SPED Administrative Assistant within 48 hours.
- The documents (Reevaluation Meeting Report and Consent to Evaluate form) will be scanned into Go-IEP, and the originals will be placed in the student's district special education file.
- The Case Manager will provide the nurse with a copy of the Consent to Evaluate for H/V Screening.

Student Continues to Meet Eligibility

No additional information is needed. This meeting date will be the new eligibility date. The child remains eligible for ALL of the disability categories identified in the previous eligibility report. These disability categories will feed to this section of the form. When it is determined that, based on the review of existing data, the student continues to meet the eligibility requirements for the current identified area of disability, the conference date becomes the new eligibility date.

The Case Manager will attach any supporting documents in Go-IEP (such as physician statements, OT/PT reports, audiological reports, etc.). Supporting documents **do not** include progress monitoring probes or work samples that are documented within the report.

Nothing should be handwritten on the existing eligibility report.

Parent Request for Evaluation

When the parent requests a reevaluation, the team must indicate this on the Reevaluation Meeting Form (document the request in the parent information section and the meeting notes sections of the forms), and refer the student for a comprehensive evaluation.

- The parent has the right to request a reevaluation under IDEA even if the team does not recommend the reevaluation.
- The School Psychologist or Speech Language Pathologist will provide a Consent to Evaluate form for the parent to sign. They will indicate "School Personnel Receiving this form" upon receipt from the parent.

Comprehensive Evaluation

An initial evaluation should look at the needs of the whole child, regardless of the reason for the referral. In a comprehensive evaluation, the Greene County School System will:

- informally and formally assess all areas related to any suspected disability, including, if appropriate, vision and hearing, health, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities;
- use a variety of evaluation tools and strategies to gather relevant academic, functional, and developmental information about the child, including information provided by the parents;
- not use any single procedure as the only criterion for determining whether a child is a child with a disability or for determining an appropriate educational program for the child;
- use assessment techniques that may assess developmental, physical, intellectual, academic, communication, and social/emotional skills;
- use evaluation tools and strategies to provide relevant information that will directly assist the eligibility team in determining the educational needs of the child;
- use assessments and other evaluation materials to assess specific areas of educational need and not only those that are designed to provide a single general intelligence quotient (IQ) score; and
- select assessment methods that, when administered to a child with impaired sensory, manual, or communication skills (to include English Learner (EL) barriers), the results accurately reflect the child's aptitude or achievement level and are not culturally biased.

Reevaluations are consistent with initial evaluations in terms of "what" you should be able to do with them when they are complete. Specifically, the purpose of the reevaluation process is to review current evaluation information and to consider what additional information might be needed to determine, among other things, whether the child continues to have a disability and the educational needs of the child. Reevaluations are considered just as important as the initial evaluation for special education. Throughout the child's educational career, their educational needs may change constantly, and the reevaluation assesses the child's evolving needs.

A reevaluation of a child with a disability, which can include only a review of existing evaluation data, must be conducted at least once every three years unless the parent and the Greene County School System agree that a reevaluation is unnecessary. The reevaluation may be conducted at any time if the district feels the needs of the child should be reevaluated or if the child's teacher or parent requests a reevaluation. However, a reevaluation may not occur more than once a year.

EVALUATIONS OF TRANSFER STUDENTS

Transfers Within State

A current Georgia eligibility from any Georgia school district can be accepted outright by the

Greene County School System and that eligibility may remain in effect for *up to 3 years* of the date of the last formal eligibility determination. For in-state transfer students, formal evaluation is pursued only when deemed warranted by an IEP Team. Any evaluation under these circumstances is treated as a reevaluation, and the re-evaluation procedures outlined above apply.

Transfers From Another State

An eligibility from another state can be accepted outright if that eligibility meets the same requirements under Georgia law. If the IEP team determines that the eligibility meets State of Georgia requirements that eligibility may remain in effect for up to 3 years of the date of the last formal eligibility determination. The procedures for this circumstance are the same for a reevaluation where the team makes a determination of continued eligibility outlined in the reevaluation section of this chapter. If the eligibility from the transferring state does not meet State of Georgia requirements, the IEP must conduct a reevaluation conference to refer the student for a comprehensive evaluation. The procedures are those outlined in the reevaluation section in this chapter; however, the applicable timeline is 60 days from receipt of Consent to Evaluate because the culminating eligibility determination will be an initial in the State of Georgia.

Transfers within Go-IEP

The SPED Administrative Assistant will complete the transfer process in Go-IEP once they have made every attempt to obtain the student's current IEP, Eligibility Report, and Psychological Evaluation. Go-IEP will prompt the user to answer questions pertaining to the transfer documents. They will choose the response that most closely aligns to the documentation acquired. If the system does not have the appropriate information to establish eligibility, Go-IEP will open a Transfer Reevaluation. The IEP committee would meet to hold the Transfer Reevaluation and request further evaluation. In this case, the evaluation would be considered initial eligibility and a 60 day timeline would be applicable.

REQUIREMENTS FOR EVALUATION

When a referral for special education evaluation is made, the comprehensive evaluation will be conducted by a multidisciplinary team. This team may consist of the GCSS's school psychologist, speech-language pathologist, occupational therapists and/or physical therapist, and others as appropriate for the evaluation. The child's parents are considered members of this team. The team is responsible for assessing the student in all areas related to any suspected disability and any other areas deemed relevant.

Assessment Areas

Performance in Current Educational Setting

This is the behavioral and academic functioning of a student in the environment in which the majority of the student's education occurs. Generally, a student's past and present educational performance is reviewed to obtain information about: achievement test scores; grades; appropriateness of instruction and progress relative to instruction; any prior, scientific, research-based interventions which may involve modification of the classroom environment curriculum or delivery of instruction; any positive behavioral interventions; disciplinary record; and attendance. The person conducting this portion of the evaluation should also review any information collected through the Pyramid of Intervention (POI) Process.

Intervention

Any strategy, developed on the basis of individual need, designed to have a remediate effect upon any academic or behavioral difficulties of a student. The term does not include disciplinary procedures applied to a group of students unless, giving consideration to the individual needs of a student, such procedures are demonstrably more appropriate than other strategies. Examples of intervention practices may include, but are not limited to:

- adapting curriculum materials to the needs of the student;
- variations in the techniques employed in teaching the student;
- tutoring or supplemental instruction;
- using behavior management programs;
- counseling or direct social skills instruction for the student; and
- modifications to the educational environment

Cognitive Abilities

These are the abilities involving the processes of thinking, reasoning and problem solving. An individually administered, standardized test of cognitive ability must be used as part of the evaluation process, when appropriate, in assessing the cognitive abilities of a student with a disability. If a score other than the total score of the student on such a test is used to assess the student's cognitive abilities, the procedure must be justified, on the basis of professionally recognized criteria, in the records of the student maintained by GCSS. Any interpretation of an assessment of cognitive abilities must be made by a certified school psychologist or licensed psychologist.

Social and Emotional Functioning

Social and emotional functioning are the present thoughts, feelings, and interactive behavior of a person. If the social and emotional functioning of a student is assessed, the assessment may include:

• observation of the student;

- interview of the student or of any person having personal knowledge of the student;
- use of a behavior rating scale, an adaptive behavioral scale; and
- self-report inventory

A student may not be identified as a student with serious emotional disturbance without prior interventions and unless a variety of these techniques is used to assess the social and emotional functioning of the student. Any interpretation of an assessment of social and emotional functioning must be made by a school psychologist or another licensed psychologist or licensed mental health professional.

Adaptive Skills

Adaptive skills include communication, self-care, home living, social skills, community use, self-direction, health and safety, functional academics, and leisure and work. If the adaptive skills of a student with a disability are assessed, the person conducting the evaluation must use a validated adaptive behavior scale. The assessment must include an assessment of any six or more of the following:

- communication;
- self-care;
- home living;
- social skills;
- community use;
- self-direction;
- health and safety;
- functional academics; and
- leisure and work.

Any interpretation of an assessment of adaptive skills must be made by a person qualified to assess adaptive skills through the use of an adaptive behavior scale.

Health

The general physical condition of a person. Generally the assessments for this area include:

- review of health and developmental history;
- hearing and vision screening; and
- physical examination (as appropriate and coordinated with parent).

When the health of a student with a disability is assessed, the following assessments may also be included:

- audiological assessment;
- physical therapy assessment; and
- occupational therapy assessment of the student.

Any interpretation of an assessment of health must be made by a person qualified to assess the condition in issue. An evaluation of a student's health and developmental history is used to determine if the student has one or more health concerns that substantially affect his or her educational performance. It is essential that the student's medical history and current health be evaluated early in the evaluation process so that any health problems can be identified and, if possible, be remediated prior to conducting other evaluation procedures.

Communication

Skills relating to articulation, phonology, receptive language, expressive language, syntax, semantics, morphology, fluency and the use of the voice. The assessments for communication may include:

- observation of the student;
- interview of the student or of any person having personal knowledge of the student;
- use of information from a parent or teacher of the student; and
- use of a standardized test of speech, language or other communication skills.

Any interpretation of an assessment of speech, language, or other communication skills must be made by a speech-language pathologist, either through direct evaluation or consultation with team members.

Academic Achievement

Skills related to oral expression, listening comprehension, basic reading, reading comprehension, reading fluency, written expression, math calculation and math reasoning. Academic achievement may be assessed by the following:

- a standardized test of academic achievement;
- curriculum-based assessment; and
- report by the teacher of the student

For eligibility for special education services the assessment must include a standardized test of academic achievement. Any interpretation of an assessment of academic achievement must be made by a person qualified to administer individually standardized tests of academic achievement to the student.

Evaluation Procedures

In selecting tests and other evaluation materials used to assess a student, GCSS personnel must ensure that in conducting the evaluation, the GCSS multidisciplinary team must, at a minimum:

• Use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the student, including

information provided by the parent, that may assist in determining:

- \circ whether the student is a student with an IDEA eligibility; and
- the content of the student's IEP, including information related to enabling the student to be involved in and progress in the general education curriculum (or for preschool children, to participate in appropriate activities).
- Not use any single measure or assessment as the sole criterion for determining whether a student is a student with an IDEA disability and for determining an appropriate educational program for the student.
- Use technically sound instruments that may assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors
- Ensure that assessments and other evaluation materials used to assess the student are:
 - selected and administered so as not to be discriminatory on a racial or cultural basis; and
 - provided and administered in the student's native language or other mode of communication and in the form most likely to yield accurate information on what the student knows and can do academically, developmentally, and functionally, unless it is clearly not feasible to provide or administer
 - used for the purposes for which the assessments or measures are valid and reliable;
 - administered by trained and knowledgeable personnel; and
 - administered in accordance with any instructions provided by the producer of the assessments.
- Use assessments and other evaluation materials include those tailored to assess specific areas of educational need and not merely those that are designed to provide a single general intelligence quotient.
- Select and administer assessments so as best to ensure that if an assessment is administered to a student with impaired sensory, manual, or speaking skills, the assessment results accurately reflect the student's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the student's impaired sensory, manual, or speaking skills (unless those skills are the factors that the test purports to measure).
- Select assessment tools and strategies that provide relevant information that directly assists team members in determining the educational needs of the student.
- Assess the student in all areas related to the suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities.

- Coordinate with students' prior schools if they have transferred from one district to another district in the same school year as necessary and as expeditiously as possible to ensure prompt completion of full evaluations.
- Must be sufficiently comprehensive to identify all of the student's special education and related services needs, whether or not commonly linked to the disability category in which the student has been classified.

Timelines for Evaluations

Every effort must be made to complete the evaluation within a reasonable time after the GCSS has reason to suspect that a student may have a disability and need special education and related services.

- Initial evaluations must be completed within 60 calendar days of receiving parental consent to evaluate (this 60 calendar day time line is from the date of consent to evaluate to the date that the Evaluation Report is finished).
- Holiday periods and other circumstances when children are not in attendance for five consecutive school days shall not be counted toward the 60 calendar day timeline, including the weekend days before and after such holiday periods, if contiguous to the holidays.
- Any summer vacation period in which the majority of the GCSS's teachers are not under contract shall not be included in the 60-day timeline.
- Consent received 30 days or more prior to the end of the school year must be completed within the 60 calendar day evaluation timeframe.
- Members of the multidisciplinary team should document if extenuating circumstances occur such as the parent of the child repeatedly fails or refuses to produce the child for the evaluation, illness, unusual evaluation needs, or revocation of parent's consent for evaluation.
- Reevaluations must be completed for each child with a disability at least once every three years unless the parent and the GCSS agree that a reevaluation is unnecessary. If a reevaluation is requested the reevaluation must be completed within 90 calendar days of receiving consent to evaluate.
- A reevaluation may not occur more than once a year, unless the parent and the GCSS agree otherwise.
- The GCSS is not required to conduct reevaluations for students to meet the entrance or eligibility requirements of an outside institution or agency (e.g., vocational rehabilitation programs, colleges/universities, other postsecondary settings).

BILINGUAL EVALUATIONS

If there is reason to believe that the student may have limited English proficiency (LEP) and

is being considered for referral for evaluation or has been referred for evaluation (as well as when an evaluation has been ordered by a hearing officer), the ESOL Lead (or designee) should ensure that the following have occurred:

- The GCSS personnel must have assessed and documented the student's proficiency in English and the student's native language. This language assessment must include:
 - an interview with the student's parent;
 - a determination of the language spoken in the student's home;
 - the language the student uses most comfortably and frequently;
 - the language the student uses to conceptualize and communicate; and
 - the students' levels of language proficiency in English and
 - the native language if feasible to do so.

Information must be gathered about the student's cultural background, including:

• the language spoken at home; ethnicity; socioeconomic status; the extent to which school expectations may conflict with cultural expectations; family mobility; and other information which may be relevant to how the student functions at school.

Information must be gathered about the student's mode of communication through observation of the extent to which the student uses expressive and written language and other modes of communication as a substitute for expressive language (e.g., gestures, signing, or unstructured sounds).

If there are indications that a student may use a language other than English, the multidisciplinary team must determine whether a bilingual evaluation is necessary, on a case-by-case basis. For the purpose of making such a determination, the multidisciplinary team must include qualified personnel with knowledge of second language acquisition theory or document consultation with such a professional. When a bilingual evaluation is required, the multidisciplinary team must consult with a Speech-Language Pathologist or a bilingual School Psychologist, as needed, in determining which evaluation components must be conducted by qualified bilingual personnel, and which components may be conducted by site-based staff.

HOSPITAL HOMEBOUND EVALUATION

Evaluations for special education eligibility completed for students who are hospitalized or are receiving homebound services must follow standard procedures for evaluation. Evaluation practices may differ in terms of the setting and modifications required to complete evaluations with these students. SPED Team Leaders are responsible for ensuring the evaluation process is completed.

EVALUATION REPORTS

At the conclusion of the evaluation process, a psychological report is developed by the school psychologist that summarizes the procedures employed, the results, and any educational implications. Related service providers (Speech) also develop a speech and language report that The multidisciplinary team evaluation report may include assessment data from general and special education teachers and related services providers including a school psychologist, speech-language pathologist, school nurse, occupational therapist, physical therapist, and other appropriate personnel.

The multidisciplinary team evaluation report must include a detailed, educationally relevant description of the student's needs. The report must be written in succinct, readily understandable language, using as little educational jargon as possible. Each report should include, as appropriate:

- student demographic information;
- reasons for referral;
- review of prior/previous interventions and student progress and the student's educational history and classroom performance data;
- evaluation methods used;
- any variation from standard conditions in the administration of assessments, including variations in the qualifications of the person administering a test or the method of test administration;
- results of all relevant assessments and interpretations of results, including the student's strengths and weaknesses;
- a description of the student's relevant behavior during the evaluation, and the relationship of that behavior to the student's evaluation results and educational performance;
- if a bilingual evaluation was conducted or considered, the language(s) used to test the student and the methods used;
- environmental, cultural, or economic factors; and
- professional recommendation regarding the student's eligibility for special education and related services.

The evaluation report must be signed by the person(s) conducting the evaluation, provide the dates the assessments were administered, and the date of the completed report. The parent must receive a copy of the evaluation report and eligibility report upon their completion at the formal eligibility meeting. The evaluation report must be uploaded into Go-IEP under documents and be maintained in the student's confidential folder.

INDEPENDENT EVALUATION REPORTS

An independent educational evaluation (IEE) means an evaluation conducted by a qualified

examiner who is not employed by the GCSS.

Right to Evaluation

If a parent disagrees with an evaluation obtained by the GCSS, the parent has the right to request an IEE. GCSS personnel must respond to the request in a timely manner. GCSS personnel must, without unnecessary delay, either:

- ensure that an IEE is provided at the GCSS's expense; or
- initiate an impartial due process hearing, to demonstrate that the GCSS's evaluation is appropriate.

At GCSS expense means that the GCSS either pays for the full cost of the evaluation or ensures that the evaluation is otherwise provided at no cost to the parent. The parent may be asked about, but not required, to provide reasons for objecting to the GCSS's evaluation prior to obtaining an IEE, but any request for such reasons may not be used to delay an IEE.

For an independent educational evaluation to be conducted at the GCSS's expense, the criteria under which the evaluation is obtained, including the location of the evaluation and the qualifications of the examiner, must be the same as the criteria the GCSS uses when it initiates an evaluation, to the extent those criteria are consistent with the parent's right to an IEE. Beyond these conditions, the GCSS is not allowed to impose additional conditions or time lines.

If a hearing officer requests an IEE as part of a hearing, the cost of the evaluation must be at public expense. If a due process hearing results in a final decision that the GCSS's evaluation is appropriate, the student's parent still has the right to an IEE, but not at the GCSS's expense.

The GCSS personnel must consider an IEE, whether or not conducted at the GCSS's expense, in any decision regarding the provision of a free appropriate public education to the student, so long as the IEE meets the GCSS criteria. The results of an IEE may be presented as evidence in a due process hearing.

Procedures for Parent Request for an IEE

- 1. If a parent requests an IEE, either verbally or in writing, the school must notify the assigned Special Education Coordinator and/or Special Education Director within two school days of the parent's request.
- 2. Within 15 school days of the receipt of the request, the Special Education Director will review the request and notify the parent of the decision in writing.
- 3. The decision will come from the Special Education Director. The school will not respond to the parent.

4. The school will not send the parent the Prior Written Notice of GCSS Refusal. This notice will be sent from the district office.

The GCSS personnel must provide to parents, on request for an IEE, information about where an IEE may be obtained, including the GCSS criteria applicable to IEEs. This information will be provided from the district office to the parent upon notification to the Special Education Coordinator and/or Special Education Director from the school that a parent has made a request for an IEE. This information will be made available in a manner that is readily understandable to the general public, including parents whose native language is not English. For further information about the district's criteria for an IEE, contact the Special Education Director.

1.5 Eligibility Determination and Categories of Eligibility State Rule: <u>160-4-7-.05</u>

Compliance Monitoring Protocols

School psychologists will work directly with the SPED Administrative Assistant to ensure compliance with GADOE and USDOE rules for initial evaluations and reevaluations.

Professional Learning

School psychologists will participate in ongoing professional learning during monthly department meetings. School psychologists will then re-deliver applicable professional learning to special education colleagues and school-based colleagues.

Technical Assistance

School psychologists will collaborate with SPED Administrative Assistant to ensure appropriate use of Georgia Online Individual Education Plan/Student Longitudinal Data System (GADOE/SLDS).

A. Categories of Eligibility

1. Autism Spectrum Disorder

Autism spectrum disorder is a developmental disability, generally evident before age three that adversely affects a child's educational performance and significantly affects developmental rates and sequences, verbal and non-verbal communication and social interaction and participation. Other characteristics often associated with autism spectrum disorder are unusual responses to sensory experiences, engagement in repetitive activities and stereotypical movements and resistance to environmental change or change in daily routines. Autism does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance. Children with autism spectrum disorder vary widely in their abilities and behavior.

The term of autism spectrum disorder includes all subtypes of Pervasive Developmental Disorder (such as Autistic Disorder; Rett's Disorder; Childhood Disintegrative Disorder; Asperger Syndrome; and Pervasive Developmental Disorder, Not Otherwise Specified) provided the child's educational performance is adversely affected and the child meets the eligibility criteria. Autism spectrum disorder may exist concurrently with other areas of disability.

2. Deafblind

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

3. Deaf/Hard of Hearing

A child who is deaf or hard of hearing is one who exhibits a hearing loss that, whether permanent or fluctuating, interferes with the acquisition or maintenance of auditory skills necessary for the normal development of speech, language, and academic achievement and, therefore, adversely affects a child's educational performance.

a. A child who is deaf can be characterized by the absence of enough measurable hearing (usually a pure tone average of 66-90+ decibels American National Standards Institute without amplification) such that the primary sensory input for communication may be other than the auditory channel.

b. A child who is hard of hearing can be characterized by the absence of enough measurable hearing (usually a pure tone average range of 30-65 decibels American National Standards Institute without amplification) that the ability to communicate is adversely affected; however, the child who is hard of hearing typically relies upon the auditory channel as the primary sensory input for communication.

4. Emotional and Behavioral Disorder

An emotional and behavioral disorder is an emotional disability characterized by the following:

a. An inability to build or maintain satisfactory interpersonal relationships with

Greene County School District, SPED Implementation Manual rict Created July 2019 peers and/or teachers. For preschool-age children, this would include other care providers.

b. An inability to learn which cannot be adequately explained by intellectual, sensory or health factors.

c. A consistent or chronic inappropriate type of behavior or feelings under normal conditions.

- d. A displayed pervasive mood of unhappiness or depression.
- e. A displayed tendency to develop physical symptoms, pains or unreasonable fears associated with personal or school problems.

A child with EBD is a child who exhibits one or more of the above emotionally based characteristics of sufficient duration, frequency and intensity that interferes significantly with educational performance to the degree that provision of special educational service is necessary. EBD is an emotional disorder characterized by excesses, deficits or disturbances of behavior. The child's difficulty is emotionally based and cannot be adequately explained by intellectual, cultural, sensory general health factors, or other additional exclusionary factors.

5. Intellectual Disabilities (mild, moderate, severe, profound)

Intellectual disabilities refer to significantly subaverage general intellectual functioning which exists concurrently with deficits in adaptive behavior that adversely affects educational performance and originates before age 18. [34 C.F.R § 300.8(c)(6)] Intellectual disability does not include conditions primarily due to a sensory or physical impairment, traumatic brain injury, autism spectrum disorders, severe multiple impairments, cultural influences or a history of inconsistent and/or inadequate educational programming.

a. Significantly subaverage general intellectual functioning is defined as approximately 70 IQ or below as measured by a qualified psychological examiner on individually administered, nationally normed standardized measures of intelligence.

(1) All IQ scores defining eligibility for children with intellectual disabilities shall be interpreted as a range of scores encompassed by not more than one standard error of measurement below and above the obtained score. The standard error of measurement for a test may be found in the technical data section of the test manual. (2) Any final determination of the level of intellectual functioning shall be based on multiple sources of information and shall include more than one formal measure of intelligence administered by a qualified psychological examiner. There may be children with IO scores below 70 who do not need special education. Interpretation of results should take into account factors that may affect test performance such as socioeconomic status, native language, and cultural background and associated

disabilities in communication, sensory or motor areas.

(i) Significantly subaverage intellectual functioning must be verified through a written summary of at least one structured observation that demonstrates the child's inability to progress in a typical, age appropriate manner and with consideration for culturally relevant information, medical and education history.
(b) Deficits in adaptive behavior are defined as significant limitations in a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility, and especially school performance that is expected of the individual's age-level and cultural group, as determined by clinical judgment.

(1) The child demonstrates significantly subaverage adaptive behavior in school and home, and, if appropriate, community environments. These limitations in adaptive behavior shall be established through the use of standardized adaptive behavior measures normed on the general population, including people with disabilities and people without disabilities. On these standardized measures, significant limitations in adaptive behavior are operationally defined as performance that is at least two standard deviations below the mean of either (a) one of the following three types of adaptive behavior: conceptual, social, or practical, or (b) an overall (composite) score on a standardized measure of conceptual, social, and practical skills. Documentation must include information from at least two sources. The first source shall be someone from the local school who knows the child and the second source shall be someone who knows the child outside of the school environment such as a parent, guardian, or person acting as a parent.

(i) Interpretation of results should consider the child's cultural background, socioeconomic status and any associated disabilities that may limit or impact the results of the adaptive behavior measures.

(c) Deficits in intellectual functioning and adaptive behavior must have existed prior to age 18.

(d) A child must not be determined to be a child with an Intellectual Disability if the determinant factor for that determination is:

1. Lack of appropriate instruction in reading, including the essential components of reading instruction;

- 2. Lack of appropriate instruction in math;
- 3. Lack of appropriate instruction in written expression;
- 4. Limited English proficiency;
- 5. Visual, hearing or motor disability;
- 6. Emotional disturbances;
- 7. Cultural factors;
- 8. Environmental or economic disadvantage; or
- 9. Atypical educational history (multiple school attendance, lack of attendance,

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etc.).

6. Orthopedic Impairment

Orthopedic impairment refers to a child whose severe orthopedic impairments adversely affects their educational performance to the degree that the child requires special education.

This term may include:

(1) Impairment caused by congenital anomalies, e.g., deformity or absence of some limb.

(2) Impairment caused by disease (poliomyelitis, osteogenesis imperfecta, muscular dystrophy, bone tuberculosis, etc.)

(3) Impairment from other causes, e.g., cerebral palsy, amputations, and fractures or burns that cause contractures. [34 C.F.R.§ 300.8(c)(8)]

Secondary disabilities may be present, including, but not limited to, visual impairment, hearing impairment, communication impairment and/or intellectual disability.

7. Other Health Impairment

Other health impairment means having limited strength, vitality or alertness including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that:

(1) is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, or heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette Syndrome, and

(2) adversely affects a child's educational performance [34 C.F.R.§ 300.8(c)(9)] In some cases, heightened awareness to environmental stimulus results in difficulties with starting, staying on and completing tasks; making transitions between tasks; interacting with others; following directions; producing work consistently; and, organizing multi-step tasks.

8. Significant Developmental Delay

The term significant developmental delay refers to a delay in a child's development in adaptive behavior, cognition, communication, motor development or emotional development to the extent that, if not provided with special intervention, the delay may adversely affect a child's educational performance in age-appropriate activities. The term does not apply to children who are experiencing a slight or temporary lag in one or more areas of development, or a delay which is primarily due to environmental, cultural, or economic disadvantage or lack of experience in age appropriate activities. The SDD eligibility may be used for children from ages three through nine (the end of

the school year in which the child turns nine). [See 34 C.F.R. § 300.8(b)]

9. Specific Learning Disability

(1) Specific learning disability is defined as a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not apply to children who have learning problems that are primarily the result of visual, hearing or motor disabilities, intellectual disabilities, emotional or behavioral disorders, environmental, cultural or economic disadvantage. [34 C.F.R. §300.8(c)(10)]

(2) The child with a specific learning disability has one or more serious academic deficiencies and does not achieve adequate according to age to meet State-approved grade level standards. These achievement deficiencies must be directly related to a pervasive processing deficit and to the child's response to scientific, research-based interventions. The nature of the deficit(s) is such that classroom performance is not correctable without specialized techniques that are fundamentally different from those provided by general education teachers, basic remedial/tutorial approaches, or other compensatory programs. This is clearly documented by the child's response to instruction as demonstrated by a review of the progress monitoring available in general education and Student Support Team (SST) intervention plans as supported by work samples and classroom observations. The child's need for academic support alone is not sufficient for eligibility and does not override the other established requirements for determining eligibility.

10. Speech-Language Impairment

Speech or language impairment refers to a communication disorder, such as stuttering, impaired articulation, language or voice impairment that adversely affects a child's educational performance. A speech or language impairment may be congenital or acquired. It refers to impairments in the areas of articulation, fluency, voice or language. Individuals may demonstrate one or any combination of speech or language impairments. A speech or language impairment may be a primary disability or it may be secondary to other disabilities. [34 C.F.R. §300.8(c)(11)]

(1) Speech Sound Production Impairment (e.g. articulation impairment) - atypical production of speech sounds characterized by substitutions, omissions, additions or distortions that interfere with intelligibility in conversational speech and obstructs learning ,successful verbal communication in the educational setting. The term may

include the atypical production of speech sounds resulting from phonology, motor or other issues. The term speech sound impairment does not include:

- A) Inconsistent or situational errors;
- B) Communication problems primarily from regional, dialectic, and/or cultural differences;
- C) Speech sound errors at or above age level according to established researchbased developmental norms, speech that is intelligible and without documented evidence of adverse effect on educational performance;
- D) Physical structures (e.g., missing teeth, unrepaired cleft lip and/or palate) are the primary cause of the speech sound impairment; or
- E) Children who exhibit tongue thrust behavior without an associated speech sound impairment.

(2) Language Impairment - impaired comprehension and/or use of spoken language which may also impair written and/or other symbol systems and is negatively impacting the child's ability to participate in the classroom environment. The impairment may involve, in any combination, the form of language (phonology, morphology, and

syntax),the content of language (semantics) and/or the use of language incommunication(pragmatics) that is adversely affecting the child's educationalperformance. The termlanguage impairment does not include:

- A) Children who are in the normal stages of second language acquisition/learning and whose communication problems result from English being a secondary language unless it is also determined that they have a speech language impairment in their native/primary language
- B) Children who have regional, dialectic, and/or cultural differences
- C) Children who have auditory processing disorder not accompanied by language impairment.
- D) Children who have anxiety disorders (e.g. selective mutism) unless it is also determined that they have a speech language impairment. There must be a documented speech-language impairment that adversely affects the educational performance for these children to qualify for special education services.

(3) Fluency Impairment - interruption in the flow of speech characterized by an atypical rate, or rhythm, and/or repetitions in sounds, syllables, words and phrases that significantly reduces the speaker's ability to participate within the learning environment. Excessive tension, struggling behaviors and secondary characteristics may accompany fluency impairments. Secondary characteristics are defined as ritualistic behaviors or movements that accompany dysfluencies. Ritualistic behaviors may

include avoidance of specific sounds in words. Fluency impairment includes disorders such as stuttering and cluttering. It does not include dysfluencies evident in only one setting or reported by one observer.

(4) Voice/Resonance Impairment – interruption in one or more processes of pitch,

quality, intensity, or resonance resonation that significantly reduces the speaker's ability to communicate effectively.. Voice/Resonance impairment includes aphonia or the abnormal production of vocal quality, pitch, loudness, resonance, and/or duration, which is inappropriate for an individual's age and/or gender. The term voice/resonance impairment does not refer to:

A) Anxiety disorders (e.g. selective mutism)

B) Differences that are the direct result of regional, dialectic, and/or cultural differences

C) Differences related to medical issues not directly related to the vocal mechanism (e.g. laryngitis, allergies, asthma, laryngopharyngeal reflux (eg. acid reflux of the throat, colds, abnormal tonsils or adenoids, short-term vocal abuse or misuse, neurological pathology)

D) Vocal impairments that are found to be the direct result of or symptom of a medical condition unless the impairment impacts the child's performance in the educational environment and is amenable to improvement with therapeutic intervention.

11. Traumatic Brain Injury

Traumatic Brain Injury (TBI) refers to an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects the child's educational performance. The term applies to open or closed head injuries resulting in impairments which are immediate or delayed in one or more areas, such as cognition, language, memory, attention, reasoning, abstract thinking, judgment, problem solving, sensory, perceptual and motor abilities, psychosocial behavior, physical functions, speech and information processing. The term does not apply to brain injuries that are congenital or degenerative in nature, brain injuries induced by birth trauma. [34 C.F.R. § 300.8(c)(12)]

12. Visual Impairment and Blindness

A child with a visual impairment is one whose vision, even with correction, adversely impacts a child's educational performance. [34 C.F.R. § 300.8(c)(13)] Examples are children whose visual impairments may result from congenital defects, eye diseases, or injuries to the eye. The term includes both visual impairment and blindness as follows:

(1) Blind refers to a child whose visual acuity is 20/200 or less in the better eye after correction or who has a limitation in the field of vision that subtends an angle of 20 degrees. Some children who are legally blind have useful vision and may read print.

(2) Visually impaired refers to a child whose visual acuity falls within the range of 20/70 to 20/200 in the better eye after correction or who have a limitation in the field of vision that adversely impacts educational progress.

(a) Progressive visual disorders: Children, whose current visual acuity is greater than 20/70, but who have a medically indicated expectation of visual deterioration may be considered for vision impaired eligibility based on documentation of the visual deterioration from the child's optometrist or ophthalmologist.

B.	Categories	& Summaries	of Evaluation	Information	Required for	Eligibility
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Specific Learning Disability			Emotional Behavior Disorder		
-	Psychological Evaluation	1.	Documentation of interventions		
	2. Comprehensive Educational		Psychological Evaluation		
	Evaluation	3.	Educational Evaluation		
3.	3. Documentation of supplementary		Behavioral Observations		
	instruction that lasts for 12 weeks with	5.	Social History		
	4 data points	6.	Documentation of duration, frequency,		
4.	Classroom Observation (in deficit		and intensity		
	areas)	7.	Exclusionary factors documented		
5.	Analyzed Samples of work (in deficit				
	areas)				
6.	Relevant medical information				
7.	Exclusionary factors documented				
Other	Other Health Impaired		n & Language Disorder		
1.	Medical Evaluation	1.	Documentation of prior evidence-		
2.	Developmental/Educational Evaluation		based interventions		
3.	Psychological (if significant	2.	1		
	cognitive/academic/attention deficits	3.	Articulation Evaluation		
	are present)	4.	Language Evaluation		
4.	Exclusionary factors documented	5.	Voice Evaluation		
		6.	Fluency Evaluation		
	icant Developmental Delay	Autisn			
	3-7 initial & 3-9 reevals)	1.	Psychological Evaluation		
1.	Developmental Evaluation (5 skill	2.	Educational Evaluation		
	areas)	3.	Communication Evaluation		
	Relevant medical information	4.	Behavior Evaluation		
3.	2 0	5.	Developmental History		
	or older				
Traumatic Brain Injury		Orthopedic Impairment			
	Summary of Pre-Injury Functioning	1.			
2.		2.	1 /		
3.	Psychological Evaluation	3.	Psychological (if significant		
	Neuropsychological Evaluation		cognitive/academic deficits are present		
	Psychoeducational Evaluation				
	Intellectual Disability		lard of Hearing		
1.	Psychological Evaluation	1.	Audiological Evaluation		

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2.	Educational Evaluation	2. Otological Evaluation	
		0	
3.	Structured Observation	3. Educational Evaluation	
4.	Adaptive Behavior Evaluation	4. Psychological Evaluation (optional)	
5.	Relevant medical information		
6.	Exclusionary factors documented		
Deaf-Blind		Visual Impairment	
1.	Audiological Evaluation	1. Optometrical or Ophthalmological	
2.	Otological Evaluation	Evaluation	
3.	Ophthalmological Evaluation	2. Educational Evaluation	

C. Determination of eligibility by Eligibility Team (qualified professionals and parents) An eligibility meeting is conducted. The eligibility committee includes parents and qualified professionals. At the eligibility meeting, the members of the team determine whether a disability exists and what the impact is on the education of the child. If there is an adverse impact, the team may determine that the child is a child who needs special education and related services. Evaluation report(s) and an eligibility report are created regardless of whether the child is determined eligible or ineligible.

D. Exclusionary factors for eligibility

E. Documentation of eligibility/ineligibility: variety of appropriate sources and well documented

F. Evaluation Report and Determination provided to parents

1. Autism - Eligibility shall be based on assessment of the five characteristic areas associated with autism spectrum disorder. The assessments shall minimally document that each of the characteristic areas of (1) developmental rates and sequences, (2) social interaction and participation and (3) verbal and non-verbal communication are affected. The adverse effect on a child's educational performance shall be documented and based on the following criteria:

- (1) Developmental rates and sequences. A child exhibits delays, arrests, and/or inconsistencies in the acquisition of motor, sensory, social, cognitive, or communication skills. Areas of precocious or advanced skill development may also be present, while other skills may develop at typical or extremely depressed rates. The order of skill acquisition frequently differs from typical developmental patterns.
- (2) Social interaction and participation. A child displays difficulties and/or idiosyncratic differences in interacting with people and participating in events. Often a child is unable to establish and maintain reciprocal relationships with people. A child may seek consistency in environmental events to the point of exhibiting rigidity in routines.

- (3) Communication (verbal and/or nonverbal). A child displays a basic deficit in the capacity to use verbal language for social communication, both receptively and expressively. Characteristics may involve both deviance and delay. Verbal language may be absent or if present, may lack usual communicative form, or the child may have a nonverbal communication impairment. Some children with autism may have good verbal language but have significant problems in the effective social or pragmatic use of communication.
- (4) Sensory processing. A child may exhibit unusual, repetitive or unconventional responses to sensory stimuli of any kind. A child's responses may vary from low to high levels of sensitivity.
- (5) Repertoire of activities and interests. A child may engage in repetitive activities and/or may display marked distress over changes, insistence on following routines and a persistent preoccupation with or attachment to objects. The capacity to use objects in an appropriate or functional manner may be absent, arrested, or delayed. A child may have difficulties displaying a range of interests and/or imaginative play. A child may exhibit stereotypical body movements.

A child with autism spectrum disorder may be served by any appropriately certified teacher in any educational program as described in the child's individualized education program (IEP). The identification of autism spectrum disorder for educational programming does not dictate a specific placement; however, it is based on the assessed strengths, weaknesses and individual goals and objectives of the child.

2. Deafblind (DB) - For a child to be determined eligible for placement in special programs for the deafblind, the child shall have current optometric or ophthalmological examination and an audiological evaluation, all administered by qualified professionals. Children who are deafblind shall have an audiological evaluation administered by a certified/licensed audiologist annually, or more often if needed. The annual audiological evaluation shall include, but is not limited to: an otoscopic inspection, unaided and aided pure tone and speech audiometry (as applicable), immittance testing, word recognition, hearing aid check and electro-acoustic analysis of the hearing aid (if amplified), and an analysis of a frequency modulated (FM) system check (if utilized). A comprehensive written report is required indicating the dates of the audiological evaluation and a description of the results of the audiological testing and amplification evaluation. In addition, the report should include a description of classroom environmental modifications which will assist the individualized education program (IEP) team in making instructional decisions, the child's ability to understand spoken language with and without amplification, and an interpretation of the results as they

apply to the child in his or her classroom setting. 2. Children who are deafblind may receive educational services in classes with other disabled children; however, the class-size ratio for deafblind shall be maintained. Additional Requirements. Each child who has been diagnosed as deafblind shall be reported in the Georgia Deafblind Census.

3. Deaf/Hard of Hearing (D/HH)

(1) The eligibility report shall include audiological, otological and educational evaluation reports.

(a) Audiological evaluations shall be provided with initial referral. Children who are deaf or hard of hearing shall have an audiological evaluation administered by a certified/licensed audiologist annually, or more often if needed. The annual audiological evaluation shall include, but is not limited to: an otoscopic inspection, unaided and aided pure tone and speech audiometry (as applicable), immittance testing, word recognition, hearing aid check and electroacoustic analysis of the hearing aid (if amplified), an analysis of a frequency modulated (FM) system check (if utilized). A comprehensive written report shall be included in the audiological evaluation. This written report shall include, but is not limited to: the date of the audiological evaluation, description of the results of the audiological testing, an amplification evaluation including the child's ability to understand spoken language with and without amplification, as well an interpretation of the results as they apply to the child in his or her classroom setting.

(b) An otological evaluation report from appropriately licensed or certified personnel is required at the time of initial placement in the program for the deaf/hard of hearing. The otological evaluation report is required as medical history pertinent to the absence of hearing. If such a report is not available upon initial placement, it shall be obtained within 90 days of placement. The initial or most recent otological evaluation result shall be summarized and that otological evaluation report shall be attached to the eligibility report.

(c) A comprehensive educational assessment shall be used in the development of the child's individualized education program (IEP). The educational evaluation shall include assessment data from more than one measure and shall include, but is not limited to, information related to academic/achievement levels, receptive and expressive language abilities, receptive and expressive communication abilities, social and emotional adjustment and observational data relative to the child's overall classroom performance and functioning.

(2) A psychological evaluation, using instruments appropriate for children who are deaf or hard of hearing, is recommended as part of the overall data when

eligibility is being considered.

(3) Children who exhibit a unilateral hearing loss may be considered for eligibility provided documentation exists that indicates academic or communicative deficits are the result of the hearing loss.

Additional Requirements

 An evaluation of the communication needs of a child who is deaf or hard of hearing shall be considered in the program and class placement decisions. An evaluation of a child's communication needs shall include, but is not limited to: language and communication needs and abilities, opportunities for direct communication with peers and professional personnel in the child's preferred language and communication mode, severity of loss, educational abilities, academic level and full range of needs, including opportunities for direct instruction in the child's language and communication mode.
 Any classroom to be used for a child who is deaf or hard of hearing shall be soundtreated and present an appropriate acoustical environment for the child. All placements, including regular education placements and desk arrangements within classrooms shall be made so that environmental noise and interruptions are minimized.
 Recommendation of the appropriate educational environment, including acoustical considerations, should be made by the IEP Team.

4. Each LEA shall have written procedures to ensure the proper functioning of assistive amplification devices used by children who are deaf or hard of hearing. These procedures shall include the designated qualified responsible personnel, daily and ongoing schedules for checking equipment, as well as follow-up procedures.

4. Emotional and Behavioral Disorder (EBD) -

(1) A child may be considered for placement in a program for children with EBD based upon an eligibility report that shall include the following:

(i) Documentation of comprehensive prior extension of services available in the regular program to include counseling, modifications of the regular program or alternative placement available to all children, and data based progress monitoring of the results of interventions

(ii) Psychological and educational evaluations

(iii) Report of behavioral observations over a significant period of time;

(iv) Appropriate social history to include information regarding the history of the child's current problem(s), the professional services and interventions that have been considered or provided from outside the school; and

(v) Adequate documentation and written analysis of the duration, frequency and intensity of one or more of the characteristics of emotional and behavioral disorders.

(2)A child must not be determined to be a child with an Emotional and Behavioral Disorder if the primary factor for that determination is:

a. Lack of appropriate instruction in reading, including the essential components of reading instruction;

b. Lack of appropriate instruction in math;

c. Lack of appropriate instruction in writing;

d. Limited English proficiency;

e. Visual, hearing or motor disability;

f. Intellectual disabilities;

g. Cultural factors;

h. Environmental or economic disadvantage; or

i. Atypical education history (multiple school attendance, lack of attendance, etc.).

The term does not include children with social maladjustment unless it is (3) determined that they are also children with EBD. A child whose values and/or behavior are in conflict with the school, home or community or who has been adjudicated through the courts or other involvement with correctional agencies is neither automatically eligible for nor excluded from EBD placement. Classroom behavior problems and social problems, e.g., delinquency and drug abuse, or a diagnosis of conduct disorder, do not automatically fulfill the requirements for eligibility for placement.

5. Intellectual Disability - A child may be classified as having an intellectual disability (at one of the levels listed below) when a comprehensive evaluation indicates deficits in both intellectual functioning and adaptive behavior. Intellectual functioning and adaptive behavior shall be considered equally in any determination that a child is eligible for services in the area of intellectual disability. A comprehensive educational evaluation shall be administered to determine present levels of academic functioning. The report shall be prepared for each child to provide an adequate description of the data collected and explicit pre-referral interventions prior to evaluation and to explain why the child is eligible for services in a program for children with intellectual disabilities. In situations where discrepancies exist between test score results from intellectual functioning, adaptive behavior and academic achievement, the eligibility report must contain a statement of specific factors considered which resulted in the decision of the eligibility team. Eligibility teams must establish that any limits in performance are not primarily due to the exclusionary factors and must document this in the eligibility report:

A child may be classified as having an intellectual disability at one of the levels listed below:

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Mild intellectual disability (MID)

(1) Intellectual functioning ranging between an upper limit of approximately 70 to a lower limit of approximately 55; and

(2) Deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility, and especially school performance that is expected of the individual's age level and cultural group, as determined by clinical judgment.

Moderate intellectual disability (MOID)

(1) Intellectual functioning ranging from an upper limit of approximately 55 to a lower limit of approximately 40; and

(2) Deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility, and especially school performance that is expected of the individual's age-level and cultural group as determined by clinical judgment.

Severe intellectual disability (SID)

(1) Intellectual functioning ranging from an upper limit of approximately 40 to a lower limit of approximately 25; and

(2) Deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility and especially school performance that is expected of the individual's age-level and cultural group as determined by clinical judgment.

Profound intellectual disability (PID)

(1) Intellectual functioning below approximately 25; and

(2) Deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility and especially school performance that is expected of the child's age-level and cultural group, as determined by clinical judgment.

6. Orthopedic Impairment (OI) - Evaluation for initial eligibility shall include the following:

(1) A current medical evaluation from a licensed doctor of medicine. The evaluation report used for initial eligibility shall be current within one year. The evaluation shall indicate the diagnosis/prognosis of the child's orthopedic impairment, along with information as applicable regarding medications, surgeries, special health care procedures and special diet or activity restrictions.

(2) A comprehensive educational assessment to indicate the adverse affects of the

orthopedic impairment on the child's educational performance. (3) Assessments shall document deficits in: pre-academic or academic functioning, social/emotional development, adaptive behavior, motor development or communication abilities resulting from the orthopedic impairment. When assessment information indicates significant deficit(s) in cognitive/academic functioning, a psychological evaluation shall be given.

Children served in a program for orthopedic impairments should be functioning no lower than criteria outlined for mild intellectual disabilities programs. For those children with orthopedic impairments served in other special education programs due to the severity of their sensory or intellectual disability, support by the OI teacher regarding the implications of the child's orthopedic impairment may be appropriate.

7. Other Health Impairment (OHI) - Evaluation for initial eligibility shall include the following:

(a) The medical evaluation from a licensed doctor of medicine, or in the case of ADD and ADHD an evaluation by a licensed doctor of medicine or licensed clinical psychologist, should be considered by the child's Eligibility Team as part of the process of determining eligibility. The evaluation report shall indicate the diagnosis/prognosis of the child's health impairment, along with information as applicable regarding medications, special health care procedures and special diet or activity restrictions. The evaluation report used for initial eligibility shall be current within one year and must document the impact of the physical condition on the vitality, alertness or strength of the child. In cases of illness where the child's physical health and well-being are subject to deterioration or change, this report shall be updated as frequently as determined by the IEP Committee. A medical diagnosis does not automatically include or exclude a child from determination of eligibility.

(b) A comprehensive developmental or educational assessment to indicate the effects of the health impairment on the child's educational performance. Assessments shall document deficits in pre-academic or academic functioning, adaptive behavior, social/emotional development, motor or communication skills resulting from the health impairment. When assessment information indicates significant deficits in cognitive/academic functioning, a psychological evaluation shall be given.
(c) A child must not be determined to be a child with Other Health Impairment if the determinant factor for that determination is:

a. Lack of appropriate instruction in reading, including the essential

components of reading instruction;

- b. Lack of appropriate instruction in math;
- c. Lack of appropriate instruction in writing;
- d. Limited English proficiency;

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- e. Visual, hearing or motor disability;
- f. Intellectual disabilities;
- g. Emotional disturbances;
- h. Cultural factors;
- i. Environmental or economic disadvantage; or
- j. Atypical educational history (attendance at multiple schools, lack of attendance). Placement and Service Delivery.

(1) A child meeting eligibility criteria be served by any appropriately certified teacher in any educational program, as specified in the child's individualized education program (IEP).

(2) According to State Board of Education Rule 160-1-3-.03 Communicable Diseases, the district shall allow a child infected with a communicable disease to remain in his or her educational setting unless he or she currently presents a significant risk of contagion as determined by the district after consultation with the child's physician, a knowledgeable public health official and/or a physician designated by the LEA (at the LEA's option)

8. Significant Developmental Delay (SDD) - (1) Initial eligibility must be established, and an IEP in place, on or before the child's seventh birthday. SDD eligibility is determined by assessing a child in each of the five skill areas of adaptive development, cognition, communication, physical development (gross and fine motor), and social/emotional development. Any child who scores at least 2 standard deviations below the mean in one or more of the five areas or 1½ standard deviations below the mean in two or more areas shall meet eligibility for SDD.

(2) For children who are kindergarten age or older, initial eligibility shall also include documented evidence that the impact on educational performance is not due to:

(a) Lack of appropriate instruction in reading or literacy readiness, including the essential components of reading instruction;

(b) Lack of appropriate instruction in math or math readiness skills;

- (c) Limited English proficiency;
- (d) Visual, hearing or motor disability;
- (e) Emotional disturbances;
- (f) Cultural factors; or
- (g) Environmental or economic disadvantage.

The application of professional judgment is a critical element at every stage of eligibility determination: as test instruments are selected, during the evaluation process, in the analysis of evaluation results, as well as the analysis of error patterns on standardized, teacher made or other tests.

(3) All five skill areas shall be assessed using at least one formal assessment. In those areas in which a significant delay is suspected, at least one additional formal assessment must be utilized to determine the extent of the delay. All formal assessments must be age appropriate, and all scores must be given in standard deviations.

(4) For children eligible under SDD with hearing; visual; communication; or orthopedic impairments, a complete evaluation must be obtained to determine if the child also meets eligibility criteria for deaf/hard of hearing, visual impairments, speech and language impairments or orthopedic impairments. Students with sensory, physical or communication disabilities must receive services appropriate for their needs, whether or nor specific eligibility is determined.

Placement and Service Delivery

(1) Preschool-aged (3-5) children meeting eligibility criteria as SDD and needing special education services may receive those services in a variety of placement options, as determined by the child's IEP Team and participation by other agencies, such as, but not limited to:

(a) Regular Early Childhood Setting; Head Start Programs Georgia Pre-K Classes Community Daycares Private Preschools

- (b) Separate Early Childhood Special Education Setting;
- (c) Day School;
- (d) Residential Facility;
- (e) Service Provider Location; or
- (f) Home

(2) School-aged children with SDD shall be served by any appropriately certified teacher in any education program designed to meet the needs of the child, as specified by the child's IEP team.

9. Specific Learning Disabilities (SLD) - (1) A child must not be determined to be a child with a specific learning disability if the determinant factor for that determination is:

a. Lack of appropriate instruction in reading, to include the essential components of reading instruction (phonemic awareness, phonics, fluency, vocabulary, and comprehension);

- b. Lack of appropriate instruction in math;
- c. Lack of appropriate instruction in writing;
- d. Limited English proficiency;
- e. Visual, hearing or motor disability;
- f. Intellectual disabilities;
- g. Emotional disturbances;
- h. Cultural factors;
- i. Environmental or economic disadvantage; or

j. Atypical educational history (such as irregular school attendance or attendance at multiple schools) [See 34 C.F.R. § 300.309(a)(3)]

Required Data Collection

(1) In order to determine the existence of Specific Learning Disability, the group must summarize the multiple sources of evidence to conclude that the child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, Stateapproved grade level standards and intellectual development. Ultimately, specific learning disability is determined through professional judgment using multiple supporting evidences that must include:

(a) Data are collected that include:

(i) At least two current (within twelve months) assessments such as the results of the CRCT or other state-required assessment, norm-referenced achievement tests or benchmarks indicating performance that does not meet expectations for State-approved grade-level standards;

(ii) Information from the teacher related to routine classroom instruction and monitoring of the child's performance. The report must document the child's academic performance and behavior in the areas of difficulty.

(iii) Results from supplementary instruction that has been or is being provided:(a) that uses scientific, research or evidence based interventions selected to correct or reduce the problem(s) the student is having and was in the identified areas of concern;

(b) such instruction has been implemented as designed for the period of time indicated by the instructional strategy(ies). If the instructional strategies do not indicate a period of time the strategies should be implemented, the instructional strategies shall be implemented for a minimum of 12 weeks to show the instructional strategies' effect or lack of effect that demonstrates the child is not making sufficient progress to meet age or State-approved grade level standards within a reasonable time frame;

(iv) the interventions used and the data based progress monitoring results are presented to the parents at regular intervals throughout the interventions.

(b) Any educationally relevant medical findings that would impact achievement.(c) After consent is received from the parents for a comprehensive evaluation for special education determination the following must occur:

1. An observation by a required group member;

2. Documentation that the determination is not primarily due to any of the exclusionary factors;

3. Current analyzed classroom work samples indicating below level performance as compared to the classroom normative sample; and

4. Documentation of a pattern of strength and weaknesses in performance and/or achievement in relation to age and grade level standards must include:

(i) A comprehensive assessment of intellectual development designed to assess specific measures of processing skills that may contribute to the area of academic weakness. This assessment must be current within twelve months and

(ii) Current Response to Intervention data based documentation indicating the lack of sufficient progress toward the attainment of age or State-approved grade-level standards.

(iii) As appropriate, a language assessment as part of additional processing batteries may be included.

Eligibility Determination

(1) The child who is eligible for services under the category of specific learning disability must exhibit the following characteristics: a primary deficit in basic psychological processes and secondary underachievement in one or more of the eight areas along with documentation of the lack of response to instructional intervention as supported by on-going progress monitoring.

(2) Deficits in basic psychological processes typically include problems in attending, discrimination/perception, organization, short-term memory, long-term memory, conceptualization/reasoning, executive functioning, processing speed, and phonological deficits. Once a deficit in basic psychological processes is documented, there shall be evidence that the processing deficit has impaired the child's mastery of the academic tasks required in the regular curriculum. Though there may exist a pattern of strengths and weaknesses, evidence must be included documenting that the processing deficits are relevant to the child's academic underachievement as determined by appropriate assessments that are provided to the child in his/her native language. Though a child may be performing below age or Stateapproved grade level standards, the results of progress monitoring must indicate that the child is not making the expected progress toward established benchmarks. This is indicated by comparing the child's rate of progress toward attainment of grade level standards. (3) Underachievement exists when the child exhibits a pattern of strengths and weakness in performance, achievement, or both, relative to age, State-approved grade level standards and intellectual development and when a child does not achieve adequately toward attainment of grade level standards in one or more of the following areas:

(a) Oral expression- use of spoken language to communicate ideas;

(b) Listening comprehension-ability to understand spoken language at a level

commensurate with the child's age and ability levels;

(c) Written expression - ability to communicate ideas effectively in writing with appropriate language;

(d) Basic reading skills-ability to use sound/symbol associations to learn phonics in

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order to comprehend the text;

(e) Reading comprehension-ability to understand the meaning of written language based in the child's native language;

(f) Reading Fluency Skills- the ability to read and process a text with appropriate rate and accuracy;

(g) Mathematics calculation-ability to process numerical symbols to derive results, including, but not limited to, spatial awareness of symbol placement and choice of sequence algorithms for operations required; and

(h) Mathematical problem solving -ability to understand logical relationships between mathematical concepts and operations, including, but not limited to, correct sequencing and spatial/symbolic representation.

(4) Progress monitoring includes the data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting child progress during instruction. When reviewing progress monitoring data, those students that exhibit a positive response to the research validated instruction being provided by general education cannot be considered as having a specific learning disability even though they may show deficits on achievement tests in the specified areas. In addition, children whose achievement in classroom academics indicates performance that is commensurate with pervasive weaknesses that are not indicative of a pattern of strengths and weaknesses may not be considered as having a specific learning disability.

(5) One group member responsible for determining specific learning disability must conduct an observation of the child's academic performance in the regular classroom after the child has been referred for an evaluation and parental consent for special education evaluation is obtained. The observation of the child is conducted in the learning environment, including the regular classroom setting, to document the child's academic performance and behavior in the areas of difficulty. The observation must include information from the routine classroom instruction and monitoring of the child's performance.

The SLD Eligibility Group

(1) The determination of whether a child suspected of having a specific learning disability is a child with a disability must be made by the child's parents and a team of qualified professionals that must include:

(a) The child's regular teacher; or if the child does not have a regular teacher, a regular classroom teacher qualified to teach a child of his or her age;

(b) A highly qualified certified special education teacher; and

(c) A minimum of one other professional qualified to conduct individual diagnostic assessments in the areas of speech and language, academic achievement, intellectual development, or social-emotional development and interpret assessment and intervention data (such as school psychologist, reading teacher, or educational therapist). Determination of the required group member should be based on the data being reviewed and the child's individual needs.

(2) Each group member must certify in writing whether the report reflects the member's conclusions. If it does not reflect the member's conclusion, the group member must submit a separate statement presenting the member's conclusions.

10. Speech-Language Impairment (SI) - All of the special education rules and regulations related to evaluation, eligibility and placement must be followed including:

Evaluation

A) Documentation of the child's response to prior evidenced-based interventions prior to referral for a comprehensive evaluation.]

B) A comprehensive evaluation shall be performed by a certified or licensed SpeechLanguage Pathologist (SLP) for consideration of speech-language eligibility. Following receipt of a clear hearing and vision screening and medical clearance for voice (as appropriate) this evaluation consists of an initial screening of the child's speech sounds, language, fluency, voice, oral motor competency, academic, behavioral, and functional skills using either formal or informal assessment procedures to assist in determining if the child is a child with a disability [34 C.F.R. 300.304(b)(1)]. An in-depth evaluation of each area suspected of being impaired, using at least one formal test and/or procedure.

C) A full and individual initial evaluation for each area suspected of being a disability must be provided and considered prior to the child's eligibility for speech-language services. This may include assessments in the areas of health (e.g. ENT, otolaryngologist, ophthalmologist, and optometrist), vision, hearing, social and emotional status, general intelligence, academic performance, communicative status and motor abilities.

D) The evaluation is sufficient to identify all of the child's special education and related services needs, whether or not commonly linked to the disability category in which the child has been referred or classified [34 C.F.R. 300.304(b)(4)] 34 C.F.R. 300.304(b)(6).

E) Children with voice/resonance impairment must have a medical evaluation to rule out physical structure etiology by a medical specialist either prior to a comprehensive evaluation or as part of a comprehensive evaluation. The presence of a medical condition (e.g., vocal nodules, polyps) does not necessitate the provision of voice therapy as special education or related service nor does a prescription for voice therapy from a medical doctor. A written order from a medical practitioner is a medical opinion regarding the medical evaluation or treatment that a patient should receive. When directed to a school, these medical orders should be considered by the team as a part of the eligibility process. The team, not a medical practitioner, determines the need for an evaluation for special education services based on documented adverse effect of the voice impairment on the child's educational performance.

F) A variety of assessment tools and strategies must be used to gather relevant functional, developmental and academic information about the child, including information provided by the parent. Information from the evaluation is used to determine whether the child is a child

with a disability and the content of the child's IEP including information related to enabling the child to be involved in and progress in the general education curriculum (or for a preschool child, to participate in appropriate activities)m[34 C.F.R. 300.304(b)(i)].

2. Eligibility

A) Determining eligibility for speech-language impaired special education services includes three components:

1) The Speech-Language Pathologist determines the presence or absence of speech language impairment based on Georgia rules and regulations for special education, [34 C.F.R. § 300.8(c)(11)]

2) Documentation of an adverse affect of the impairment on the child's educational performance

3)The team determines that the child is a child with a disability [34 C.F.R. 300.304(b)(1)] and is eligible for special education and appropriate specialized instruction needed to access the student's curriculum. [34 C.F.R. 300.8(b)(2)]

B) Eligibility shall be determined based on the documented results of at least two or more measures or procedures, at least one of which must be formal, administered in the area of impairment and documentation of adverse affect.

A speech-language disorder does not exist if:

A) Environmental, cultural, or economic disadvantage cannot be ruled out as primary factors causing the impairment; or

B) A child exhibits inconsistent, situational, transitory or developmentally appropriate speech language difficulties that children experience at various times and to varying degrees.C) Because children who have communication difficulties do not necessarily have speech or language impairments, the speech-language program may not be the appropriate service delivery model to adequately meet the child's educational needs. For this reason, all children who are suspected of having communication problems shall be the subject of a Student Support Team (SST) to problem solve and implement strategies to determine and limit the adverse effects on the child's educational performance.

(4) For nonverbal or verbally limited children and those with autism and/or significant intellectual, sensory, or physical disabilities, a multidisciplinary team of professionals shall provide a functional communication assessment of the child to determine eligibility for speech language services. The multidisciplinary team shall consist of professionals appropriately related to the child's area of disability.

(5) A child is eligible for placement in a speech-language program if, following a comprehensive evaluation; the child demonstrates impairment in one or more of the following areas: speech sound, fluency, voice or language that negatively impacts the child's ability to participate in the classroom environment. The present adverse effect of the speech-language impairment on the child's progress in the curriculum, including social and/or emotional

growth, must be documented in writing and used to assist in determining eligibility.3. Placement - Placement in the speech-language program shall be based on the results of the comprehensive assessment, and eligibility, along with all other pertinent information.4. Children shall not be excluded from a speech-language program based solely on the severity of the disability. Cognitive referencing (i.e., comparing language scores to IQ scores) is not permissible as the only criteria for determining eligibility for speech-language impaired services.

Communication Paraprofessionals - A communication paraprofessional is an adjunct to the Speech-Language Pathologist (SLP) and assists with certain duties and tasks within the speech language program. The communication paraprofessional is under the supervision of a certified or licensed SLP. The communication paraprofessional can not carry their own caseload, nor do they increase the certified SLP's caseload outside of a self-contained classroom. The primary responsibility for the delivery of services, as indicated on the IEP, remains with the certified or licensed SLP. Children who receive services from the communication paraprofessional shall also receive services from the supervising SLP and/or licensed or certified SLP a percentage of the time designated in the IEP for speech-language services, but no less than one hour per month. Each LEA should develop and implement procedures for the training, use and supervision of communication paraprofessionals.

Traumatic Brain Injury (TBI) - Evaluation for eligibility shall include the following:

 (a) A summary of the child's pre-injury functioning status. This information may be available through previous formal evaluations, developmental assessments, achievement tests, classroom observations and/or grade reports.

(b) Verification of the TBI through the following:

1. A medical evaluation report from a licensed doctor of medicine indicating that TBI has occurred recently or in the past, or

2. Documentation of TBI from another appropriate source, such as health

department or social services reports, or parents' medical bills/records.

(c) A neuropsychological, psychological or psychoeducational evaluation that addresses the impact of the TBI on the following areas of functioning:

1.Cognitive - this includes areas such as memory, attention, reasoning, abstract thinking, judgment, problem solving, speed of information processing, cognitive endurance, organization, receptive and expressive language and speed of language recall.

2. Social/Behavioral - this includes areas such as awareness of self and others, interaction with others, response to social rules, emotional responses to everyday situations and adaptive behavior.

3. Physical/Motor - this includes areas such as hearing and vision acuity, speech production, eye-hand coordination, mobility and physical endurance.

(2) Deficits in one or more of the above areas that have resulted from the TBI and adversely affect the child's educational performance shall be documented.

Placement and Service Delivery

The identification of TBI for educational programming does not dictate a specific service or placement. The child with TBI shall be served by any appropriately certified teacher in any educational program, as specified in the child's individualized education program (IEP) Team minutes.

12. Visual Impairment and Blindness (VI) - 1. A current (within one year) eye examination report shall be completed and signed by the ophthalmologist or optometrist who examined the child.

a. A report from a neurologist in lieu of the optometrist/ophthalmologist report is acceptable for students who have blindness due to a cortical vision impairment.

2. A clinical low vision evaluation shall be completed by a low vision optometrist for children who are not totally blind;

a. if the student is under the age of 8 and/or has a severe cognitive and/or physical disability that would make the use of low vision aids unfeasible, a functional vision evaluation may be used instead of a low vision evaluation to establish eligibility.

i. The low vision evaluation should be completed by age 10 for children who do not have one during eligibility determination prior to age 8 unless other circumstances apply.

ii. The low vision evaluation is often difficult to schedule within the 60-day timeline, therefore, if children meet all other eligibility requirements, the eligibility report shall document the date of the scheduled upcoming low vision evaluation and the team may proceed with the eligibility decision.

iii. Once the low vision evaluation has occurred the eligibility information shall be updated, and as appropriate, the IEP.

1. The low vision evaluation must occur within 120 days of receipt of parental consent to evaluate to determine eligibility for visual impairment.

3. A comprehensive education evaluation shall be administered to determine present levels of functioning. The impact of the visual impairment on the child's educational performance shall be considered for eligibility.

a. Educational assessments may include cognitive levels, academic achievement, and reading ability.

i. Educational assessments related to vision must be completed by a teacher certified in the area of visual impairments.

b. In some cases, comprehensive psychological evaluations may be indicated and must be completed by appropriately certified personnel. 4. Braille instruction is always considered critical to appropriate education for a child who is blind. Children identified with visual impairments shall be evaluated to determine the need for braille skills. The evaluation will include the present and future needs for braille instruction or the use of braille. For children for whom braille instruction and use is indicated, the individualized education program (IEP) shall include the following:

a. Results obtained from the evaluation conducted for the purpose of determining the need for Braille skills;

b. How instruction in braille will be implemented as the primary mode for learning through integration with other classroom activities;

c. Date on which braille instruction will commence;

d. The length of the period of instruction and the frequency and duration of each instructional session; and

e. The level of competency in braille reading and writing to be achieved by the end of the period and the objective assessment measures to be used.

f. For those children for whom braille instruction is not indicated, the IEP shall include a statement with supporting documentation that indicate the absences of braille instruction will not impair the child's ability to read and write effectively.

5. This rule shall become effective March 31, 2010.

1.6 Private Schools

State Rule: <u>160-4-7-.13</u>

LEA Privately Placed or Referred Students

The GCSS will ensure that a child with a disability who is placed in or referred to a private school or facility by the GCSS as a means of providing special education and related services is:

- provided special education and related services in conformance with the student's IEP at no cost to the parents;
- provided an education that meets the standards that apply to education provided by the GaDOE and the GCSS;
- has all of the rights of a child with a disability who is served by the GCSS.

Additionally, the Georgia Department of Education's Department of Special Education shall :

- Monitor compliance of these children through procedures such as written reports, onsite visits and parent surveys ;
- Disseminate copies of State standards to each private school and facility to which the GCSS has referred or placed a child with a disability;
- and provide an opportunity for those private schools and facilities to participate in the development and revision of state standards that apply to them.

Parental Placement in Private School and LEA Offering of FAPE

A parent may remove the child from the GCSS at any time and enroll the child in private school.

The IDEA does not require the GCSS to pay for the cost of private school if FAPE has been or can be provided by a school in the GCSS. Under certain circumstances, the parent may request reimbursement from the GCSS to pay for the private placement. In these circumstances, the parents should notify the school system in writing, at least ten days prior to removing the child

from public school, that they disagree with the IEP and placement and want the school system to reimburse them for the private school tuition. If the GCSS asks to evaluate the child during the ten day period and the parents refuse, then reimbursement may be denied. If the parents want to be reimbursed for all the costs of private school and the GCSS does not agree to it, the parties will go before a due process hearing officer to determine if the GCSS provided FAPE.

Additionally, a parent may choose to use a private school instead of the GCSS at the parent's expense, in which case, FAPE is not an issue. When the student is in private school by parent choice, the student and the parent lose their individual rights to special education services. The GCSS may consider some services when students are placed in private school or home school. These services will be discussed on a student-by-student case.

Provision of Written Notice by Parent to Place in Private School

Under certain circumstances, the parent may request reimbursement from the GCSS to pay for the private placement. In these circumstances, the parents should notify the school system in writing, at least ten days prior to removing the child from public school, that they disagree with

the IEP and placement and want the school system to reimburse them for the private school tuition. If the GCSS asks to evaluate the child during the ten day period and the parents refuse, then reimbursement may be denied. If the parents want to be reimbursed for all the costs of private school and the GCSS does not agree to it, the parties will go before a due process hearing officer to determine if the GCSS provided FAPE.

Reimbursement and Limitations on Reimbursement for Private School Placement

If the parents of a child with a disability, who previously received special education and related

services in the GCSS, enroll the child in a private preschool, elementary school, or secondary school without the consent of or referral by the GCSS, a court or an administrative law judge (A

LJ) may require the GCSS to reimburse the parents for the cost of that enrollment if the court or

A LJ finds that the GCSS did not make FAPE available to the child in a timely manner prior to that enrollment and that the private placement is appropriate. A parental placement may be found to be appropriate by an LJ or a court even if it does not meet the state standards that apply to education provided by the State or the GCSS. The cost of reimbursement may be reduced or denied if:

- At the most recent IEP Team meeting that the parents attended prior to the removal of the child from the LEA, the parents did not inform the IEP Team that they were rejecting the placement proposed by the LEA to provide FAPE to their child and did not state their concerns or their intent to enroll the child in a private school at public expense;
- At least 10 business days prior to the removal of the child from a school in the GCSS, the parents did not give written notice to the GCSS that they were rejecting the placement proposed by the GCSS to provide a FAPE to the child and did not state their concerns or their intent to enroll the child in a private school at public expense.
- If, prior to the parent's removal of the child from the GCSS, the GCSS informed the parents through the notice requirements of its intent to evaluate the child, including a statement of the purpose and scope of the evaluation that was appropriate and reasonable, but the parents did not make the child available for evaluation; or
- Upon a judicial finding of unreasonableness with respect to actions taken by the parents.

Home Schooled Students

Children who are home schooled within the jurisdiction of the GCSS are also considered parentally-placed private school students.

Child Find Process and Children in Private Schools

The GCSS will locate, identify, and evaluate all private schools children with disabilities enrolled by their parents in private, including religious, elementary and secondary schools located in Greene County. The GCSS will utilize all GCSS Child Find requirements, and these activities will be comparable to activities undertaken for children with disabilities who are enrolled in the GCSS (see Section 1.3). The GCSS Child Find process is designed to ensure the equitable participation of parentally-placed private school children and to provide an accurate count of children with disabilities. The GCSS will also consult with appropriate representatives of private school children with disabilities to carry out Child Find activities; these activities are

similar to those undertaken for the public school children and are completed in a time period comparable to that for children attending schools in the GCSS.

Provision of IEPs and Service Plans to Privately Placed Students

A service plan will be developed and implemented for each child with a disability who attends

private school and who will receive special education and related services from the GCSS. The service plan will:

- contain a statement of the special education and related services, and supplementary aids and services, to be provided to the child;
- be in effect at the beginning of each school year; and
- be developed, reviewed, and revised periodically, but not less than annually, in accordance with IEP requirements in IDEA and Georgia Rules.

The GCSS will initiate and conduct the meetings to develop, review, and revise a service plan and ensure that a representative of the private school attends each meeting. As with IEPs, inperson participation in the meeting is encouraged, but participation may be through a conference call or other means. Services provided to children in a private school must be provided by personnel who meet the same standards as personnel providing the services in the GCSS, except private school teachers do not have to meet the special education teacher qualifications. Services may be provided at the private school, or children may be transported to a GCSS school or community setting to receive services. If necessary for the child to benefit from or participate in services, transportation will be provided by the GCSS, but the GCSS is not required to transport the child from their home to the private school. Transportation costs will be included in calculating whether the GCSS has met the requirements of proportionate funding. The GCSS may provide materials, equipment, and property purchased to implement the services to children with disabilities in the private school. These must be used only for those purposes and must be returned when no longer needed. The GCSS may use funds for indirect services such as consultation and private school staff training. No funds may be used for repairs, minor remodeling, or construction of private school facilities. The GCSS will not use the IDEA Part B flow-through or federal preschool funds to finance the existing level of instruction in a private school, the needs of the private school, or the general needs of the children in the private school.

Consultation with Private Schools for Child Count

The GCSS will consult with the representatives of private schools, parents of children who are served in private schools, and parents of children who are home-schooled regarding the design

and development of special education and related services for parentally-placed private school and home-schooled children. This consultation process will be timely and meaningful. More than one consultation may be needed to fully meet the requirement. A consultation will include

the following:

- how parentally-placed private school children suspected of having a disability can participate equitably in the Child Find process;
- how the parents, teachers, and private school officials will be informed of the Child Find

process;

- how the determination of the proportionate share of federal funds available to serve the children with disabilities was calculated;
- how the process will operate throughout the school year;
- how, where, and by whom special education and related services will be provided;
- how funds will be apportioned if funds are insufficient; how and when those decisions will be made; and
- how the GCSS will provide to the private school officials a written explanation of the reason why it chose not to provide services directly or through a contract.

The GCSS will obtain a written Private/Home School Participation and Private School Affirmation signed by the representatives of the participating private schools as documentation of the consultation process and will be prepared to submit this documentation to the GaDOE upon request. If the private school officials believe that the GCSS did not engage in the consultation in a meaningful or timely manner or did not consider the views of the private school officials, it may submit a complaint through the Formal Complaint Process to the GaDOE. If the private school is not satisfied with the decision of the GaDOE, they may submit a complaint to the United States Department of Education.

Private School Representatives at IEPs

The GCSS will initiate and conduct meetings to develop, review, and revise a service plan and ensure that a representative of the private school attends each meeting. As with IEPs,

in-person participation in the meeting is encouraged, but if necessary participation may be through conference calls or other means.

Equitable Services

No parentally-placed private school child with a disability has an individual right to receive some or all of the special education and related services that the child would receive if enrolled

in the GCSS. However, the GCSS has an obligation to provide parentally-placed private school children an opportunity for equitable participation to receive services funded with Federal IDEA

Part B dollars that the traditional LEA has determined, after consultation, to make available to its population of parentally-placed private school children with disabilities. These children with

disabilities may receive a different amount of services than children in public schools. Some children will not receive any services. The GCSS will make the final decisions regarding services

to be provided prior to the start of the school year.

Determination and Limitations of Service

No parentally-placed private school child with a disability has an individual right to receive some or all of the special education and related services that the child would receive if enrolled

in the LEA. See 34 C.F.R. § 300.137(a). However, the traditional LEA has an obligation to provide parentally-placed private school children an opportunity for equitable participation to receive services funded with Federal IDEA Part B dollars that the traditional LEA has determined, after consultation, to make available to its population of parentally-placed private

school children with disabilities. These children with disabilities may receive a different amount of services than children in public schools. Some children will not receive any services.

The traditional LEA will make the final decisions regarding services to be provided prior to the start of the school year. Services Plans A services plan will be developed and implemented for each private school child with disabilities who will receive special education and related services from the traditional LEA. The services plan must:

(1) contain a statement of the special education and related services, and

supplementary aids and services, to be provided to the child;

(2) be in effect at the beginning of each school year; and

(3) be developed, reviewed, and revised periodically, but not less than annually, in accordance with IEP requirements in IDEA and Georgia Rules.

The traditional LEA will initiate and conduct the meetings to develop, review, and revise a services plan and ensure that a representative of the private school attends each meeting. As with IEPs, in-person participation in the meeting is encouraged, but participation may be through conference call or other means. Services provided to private school children must be provided by personnel who meet the same standards as personnel providing the services in the traditional LEA, except private school teachers do not have to meet the special education teacher qualifications in 34 C.F.R. § 300.156(c). See 34 C.F.R. § 300.138(a)(1).

Services may be provided at the private school, or children may be transported to the public school or community setting to receive services. If necessary for the child to benefit from or participate in services, transportation must be provided by the traditional LEA, but the traditional LEA is not required to transport the child from their home to the private school. Transportation costs will be included in calculating whether the traditional LEA has met the requirements of proportionate funding.

The traditional LEA may provide materials, equipment, and property purchased to implement the services to children with disabilities in the private school. These must be used only for those purposes and must be returned when no longer needed. It is also permissible to use funds for indirect services such as consultation and private school staff training. No funds may be used for repairs, minor remodeling, or construction of private school facilities. The LEA may not use the IDEA Part B flow-through or federal preschool funds to finance the existing level of instruction in a private school, the needs of the private school, or the general needs of the children in the private school.

Expenditures

To meet the requirements for provision of services to parentally-placed private school children, the LEA must follow these guidelines:

- For children ages 3-21, the LEA must expend an amount that is the same proportion of the LEA's total Part B of the IDEA flow-through funding as the number of private school children with disabilities, ages 3-21, attending private and home schools in its jurisdiction is to the total number of children with disabilities in its jurisdiction.
- For children ages 3-5, the LEA must expend an amount that is the same proportion of the LEA's preschool funding as the number of private school children and home-schooled children with disabilities, ages 3-5, attending private and home schools in its jurisdiction is to the total number of children with disabilities, ages 3-5, in its jurisdiction.
- Once an LEA expends all of the proportionate share funds for a fiscal year, there is no requirement for the LEA to provide additional funds or continue services.
- If the LEA has not expended all of the funds required by the end of the fiscal year, the LEA must carry over funds for a period of one additional year to be used for proportionate share.
- The LEA must consult with representatives of the private school in deciding how to conduct the annual count of the number of private school children with disabilities who reside in its jurisdiction.
- The LEA must ensure that the child count is done on October FTE-1 of each year since this count is used to determine the amount the LEA must spend in the following fiscal year. This count is also reported in the Consolidated Application with IDEA grant application submission. If the original submitted IDEA grant application and budget detail in the Consolidated Application does not accurately reflect the count reported in October FTE1, a budget amendment must be submitted to revise the count and accurately reflect services and expenditures for proportionate share.

Each LEA must maintain records and report to the GaDOE the following information related to parentally-placed private school children:

• the number of children evaluated

- the number of children determined to be children with disabilities
- the number of children served

Location of Services and Transportation

Services may be provided at the private school, or children may be transported to a GCSS school

or community setting to receive services. If necessary for the child to benefit from or participate

in services, transportation will be provided by the GCSS, but the GCSS is not required to transport the child from their home to the private school.

Chapter TWO: Services and Supports

Chapter 2 addresses the GCSS process for ensuring that a student is placed in an appropriate setting in accordance with state and federal special education law. The chapter discusses the options available for placement in the least restrictive environment (LRE) and specific requirements for certain types of placements.

Indicators:

4a & 4: Suspension and Expulsion 5: LRE

2.1 Least Restrictive Environment (LRE) State Rule: <u>160-4-7-.07</u>

After a student's IEP has been developed, his/her educational placement which includes programs and services must be determined by the IEP team. That level of placement occurs along the continuum of placements available for students with disabilities. Often confused, but not interchangeable, is the term "location". Location refers to the physical setting, such as the specific classroom or facility where a student's IEP will be implemented.

The GCSS shall implement procedures and practices to ensure that all students with disabilities have an educational placement appropriate to meet their individual needs through a continuum of placements.

Compliance Monitoring Protocols

The GCSS Office of Special Education & Student Supports ensures that the GCSS offers a continuum of placements and provides information to all stakeholders regarding those options. Case managers and LEAs for placement meetings ensure students with disabilities

are offered placements in the least restrictive environment given their individual needs.

Professional Learning

GCSS special education staff will provide ongoing professional development regarding LRE protocol during team leader meetings (no less than seven per year). Teachers new to the GCSS receive additional professional learning during professional development opportunities their initial year.

Technical Assistance

The GCSS Special Education Director, Coordinator of Special Education, and Case Managers are available for technical assistance.

LRE Requirements

The Least Restrictive Environment (LRE) standard requires the GCSS to ensure that, to the maximum extent appropriate, students with disabilities, including students in public or private institutions or other care facilities:

- are educated with students who are not disabled; and
- special classes, separate schooling, or other removal of students with disabilities from the regular educational environment occurs only when the nature or severity of the disability of a student is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

LRE requirements apply to both eligible school age students and preschool children. Special Education is not a "place," but rather a set of services delineated in the student's IEP. The LRE provision of the IDEA emphasizes services rather than the placement.

Annual IEP Placement Determination

The student's placement must be determined at least annually. If there are placement concerns prior to the annual review date, the parent or the GCSS may request to reconvene the IEP team to review and revise the IEP. An IEP must be implemented as soon as possible following its development. There can be no unreasonable delay in providing special education and related services to the student.

Determination by IEP Team

The student's educational placement must be determined by a group of persons, including parent(s), and other persons who are knowledgeable about the student, the meaning of the evaluation data; and the placement options. The IEP team determines the student's placement. When the student requires a level of placement which is not available at the Greene County School District, SPED Implementation Manual

zoned school, the GCSS, through coordination with the Director of Special Education and/or Coordinator of Special Education, will determine the location of placement once the IEP team has determined the appropriate placement.

Change of Placement

If at any time, the GCSS proposes or refuses to change the student's educational placement, in response to a parent request, the parent must receive prior written notice explaining the GCSS's position. Any change in a student's placement must be based upon the student's current IEP. When a more restrictive change of placement is considered by the school team, the Director of Special Education and/or Coordinator of Special Education should be contacted and included as a team member. A revision IEP is required when:

- The GCSS personnel or a student's guardian believe that the student's placement may be inappropriate; or
- a significant change in the student's placement is being considered by the school.

Full Continuum of Alternative Placements

The GCSS is required to ensure that a continuum of placement options are available to meet the needs of students with disabilities for Special Education and related services. The continuum must provide for supplementary services (such as resource room or itinerant instruction) in conjunction with placement in a regular education class. The continuum includes, as appropriate, instruction in:

- regular education classes;
- regular education classes with resource room;
- special classes;
- special schools;
- community-based programs;
- home instruction;
- hospitals; or
- institutions.

The continuum of placement options for a child in Early Childhood Special Education may include, as appropriate:

- an integrated or specialized center-based program (i.e., a program in which a group of children receives services at a central location) in a regular or special school;
- a home-based program;
- an itinerant consultant working with a community-based facility; or
- the instruction of the child in a hospital or institution.

Disciplinary Placements

Under certain circumstances involving discipline, the GCSS staff may remove a student with a disability from their current educational placement to an appropriate interim alternative educational setting, another setting, or suspension, including a suspension for more than 10 school days. For a description of these circumstances, see section 2.2.

Private School Placements

Private School Placements by the GCSS: If a student is placed in an out-of-district placement in a private school by the GCSS, it must provide the Special Education and appropriate related services, if any, at no cost to the student's parent and in accordance with the student's IEP. Although the student is placed in a private school, the GCSS remains responsible for the implementation of the student's IEP and must serve the student as it serves students with disabilities in its public schools. If a student requires private school placement, the IEP Team must consult with the Director of Special Education before the IEP meeting for assistance in gathering information regarding whether a private school placement may be appropriate for the student.

Private School Placements by Parents: If a parent unilaterally places the student in a private school or facility, the GCSS may not be required to pay for the costs of that placement if the GCSS made FAPE available to the student in a timely manner before the parent elected the private placement. If the GCSS personnel suspect that the parent may unilaterally place a student in a private school without the GCSS's consent or referral, they should contact the Director of Special Education and/or the Coordinator of Special Education.

Special School Placements

The State of Georgia operates three schools for students who are deaf or blind (Georgia School for the Deaf, Atlanta Area School for the Deaf, and the Georgia Academy for the Blind). Students receive day services or residential services in these schools through the IEP process. For consideration for placement in any of these three schools the IEP meeting must include the Director of Special Education and/or the Coordinator of Special Education.

The Georgia Network for Educational and Therapeutic Support (GNETS) is a program designed for students with an emotional and behavioral disorder. The purpose of the GNETS program is to prevent children from requiring residential or other more restrictive placements. Students may be considered for placement in the GNETS program through a referral initiated by the IEP team. The referral must document the severity, duration, frequency, and intensity of one or more characteristics of the disability category of emotional and behavior disorder. This documentation must also include prior extension of less restrictive services and data which indicate such services have not enabled the student to benefit educationally. Prior to consideration for referral to GNETS, team leaders must contact the Coordinator of Special Education who will then communicate with the Director of Special Education.

Residential Placements

If the IEP team determines that a student requires a residential placement in order to obtain FAPE because the student requires programs and services not available within the GCSS, the building administrator should contact the Director of Special Education and/or the Coordinator of Special Education for assistance in locating and implementing an appropriate residential placement.

Homebound and Hospital Placements

Homebound services are for students with an IEP who are unable to attend classes due to physical or mental illness where confinement in a hospital or in the home is expected to be a minimum of ten (10) consecutive school days. Homebound instruction is one of the most restrictive educational placements offered by the GCSS. Every effort must be made to maintain instruction in the school setting before identifying a Homebound placement. It is the responsibility of the student's attending school to explore all lesser restrictive options. If GCSS personnel receive notice that it is anticipated that the student will be absent from school for at least 10 consecutive school days for medical reasons, that person should contact their assigned special education coordinator.

Procedures for Hospital Homebound Services

The application packet and hospital homebound procedures are provided by the GCSS Counselors. The document consists of a two-part form requiring completion by the parent and physician. The parent is responsible for obtaining the completed physician form. Anticipated confinement duration must be specified on the physician form. (e.g., six weeks, one month). A non-specific period of time (e.g., lifetime, 99 years, to be determined) is not acceptable.

- A description of the student's disability is required. In the case of a student with a psychological diagnosis, a copy of the psychiatrist's/attending physician's Treatment Plan and a copy of the therapist's Treatment Plan is also required.
- The physician/psychiatrist must include a Reentry Plan for the student (a plan to return the student to school within a specified time line).
- The completed packet is returned by the parent to the assigned school's team leader and/or special education coordinator. Homebound Service is considered a placement change for students receiving Special Education services and must be determined during an IEP meeting. The school will collaborate with the Special Education Coordinator to schedule an IEP revision meeting with the student's special education teacher, the Hospital/Homebound teacher, other appropriate school staff, and the student's parents prior to initiation and termination of Homebound Service.

- After the IEP meeting, if homebound services are determined to be necessary in order to provide FAPE, the homebound application packet and the decision of the IEP team is sent to the Office of Special Education so that an instructor can be assigned for the services.
- If an extension of Homebound Services is needed, another application must be submitted or, in exceptional cases, a physician's memo or letter may be offered as an extension of the original application if it is within the same school semester. The extension must also identify a specific ending date.

Non-academic and Extracurricular Settings

LEAs in the GCSS ensure that each child with a disability participates with nondisabiled children in extracurricular services and activities, including meals, recess periods, counseling services, athletics, transportation, after school programs, health services, recreational activities, special interest groups, and clubs sponsored by the GCSS, to the maximum extent appropriate to the needs of that child. The LEA must ensure that each child with a disability has the supplementary aids and services determined by the child's IEP Team to be appropriate and necessary for the child to participate in nonacademic settings.

2.2 Discipline

Section 2.2 addresses the special provisions applicable to governing disciplinary actions involving students with disabilities in the GCSS. It discusses the procedural safeguards that are provided during the student disciplinary process, as well as parents' rights to challenge disciplinary actions.

State Rule: 160-4-7-.10

Compliance Monitoring Protocols

The GCSS is obligated to provide a free appropriate public education (FAPE) to all eligible students with disabilities, including students who have been suspended or expelled, and is prohibited from applying its disciplinary policies in a manner that discriminates against students with disabilities. Below are the requirements for disciplinary actions for a student with a disability in the GCSS.

Professional Learning

School Administrators are trained each summer, which includes a review of discipline reports to determine the effectiveness of rules and regulations for students. The Coordinator of Special Education provides monthly reports to Principals as to monitor the discipline for students with disabilities.

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Technical Assistance

The GCSS Director of Special Education and/or the Coordinator of Special Education, Team Leaders, and Case Managers are available for technical assistance.

Relationship of General Code of Conduct to IEP

The GCSS Code of Student Conduct applies to all students including students with disabilities. However, students with disabilities are afforded specific due process protections. A student served by Section 504 of the Rehabilitation Act must have a manifestation determination before being suspended for more than 10 days.

Students with disabilities can be suspended for a total of up to 10 consecutive or 10 cumulative school days in one school year without providing special education procedural safeguards and services. Saturday school and before/after-school detention do not count toward the 10 days. The Special Education Director should be notified of any special education student approaching 10 days of suspension, so that the appropriate supports are put into place. The Director of Special Education or Coordinator of Special Education should be notified of any 504 student approaching 10 days of suspension as well.

Suspension Beyond 10 Days in a School Year

1. School provides written notice to parent/guardian of intervention or consequence being considered and date of Individual Education Program ("IEP") Manifestation Determination Review. A meeting must be held within 10 days of the date of the decision to discipline the student. A copy of the Notice of Procedures Safeguards should be provided to parents. For students with 504 Plans, GCSS will follow the same procedures.

2. The IEP or 504 team will determine whether the misconduct is caused by the student's disability by reviewing all current and relevant information.

3. If the behavior is a manifestation of the disability, the IEP team or 504 team will review and revise the behavior intervention plan specifically for the misconduct of the student. A disciplinary change in placement (expulsion) cannot occur if the behavior is a manifestation of the disability except in cases of weapons possession, drug possession, and infliction of serious bodily harm. If the following behaviors are determined to be a manifestation of the student's disability, the student can be placed in an alternative educational setting for up to 45 days: Weapons possession, drug possession, and infliction of serious bodily harm.

4. If the behavior is not a manifestation of the disability, school officials may apply the Code of Conduct interventions and consequences. However, the student may not be suspended for more than 10 consecutive or cumulative school days in a year without providing appropriate educational services.

5. Students with disabilities, even if expelled, must be provided with an appropriate education

in an alternative educational setting.

Interim Alternative Settings and 10-day Rule

A disciplinary change of placement occurs when a student with a disability is removed

from their current educational placement for more than 10 consecutive school days in

school year; or in a series of removals that constitute a pattern when:

- the series of removals totals more than 10 cumulative school days in a given year
- the student's behavior is substantially similar to the student's behavior in previous incidents that resulted in the series of removals; and
- such additional factors as the length of each removal, the total amount of time the student is removed, and the proximity of the removals to one another.

For any disciplinary actions that total less than 10 school days in a given school year, the

GCSS is not required to take any action. If school personnel have questions regarding

whether a series of disciplinary actions may constitute a change in placement, they

should consult the Director of Special Education and/or the Coordinator of Special Education.

Long-term disciplinary removal for students with disabilities refers to a student's removal from instruction for over 10 consecutive school days in a given school year. This removal constitutes a change of placement. Procedural Safeguards must be provided to parents when the GCSS proposes a removal that will result in a disciplinary change of placement.

Educational Services, Alternative Instructional Setting

If a student is removed from their current educational placement for more than a total of 10 school days in a school year, the building administrator must ensure that services are provided to the student with a disability on the 11th day of total removals. These services must be provided to the extent necessary to:

- enable the student to appropriately progress in the general curriculum;
- appropriately advance toward achieving the goals set out in the student's IEP; and
- receive as appropriate a functional behavioral assessment (FBA) and behavioral intervention services and modifications, that are designed to address the behavior so that it does not re-occur.

The IEP team (including the Director of Special Education and/or the Coordinator of Special Education) will meet to discuss and offer appropriate compensatory services to

meet the needs outlined in the student's IEP.

Manifestation determination

A manifestation determination meeting must be convened immediately if possible, but no later than 10 school days after the date on which a disciplinary change of placement decision is made.

Procedure

The building administrator contacts the parent to inform them of the recommendation for a long-term removal and to provide them with a charge letter outlining the violations of the Student Code of Conduct. The building administrator must notify the GCSS Coordinator of Special Education so that a manifestation determination/IEP meeting can be scheduled. The IEP team designee is responsible for the meeting notification and meeting arrangements. Appropriate prior written notice must be provided to the parent indicating disciplinary action and meeting arrangements. Participants:

- LEA (GCSS Coordinator of Special Education)
- School Administrator
- Guardian
- School Psychologist
- General Education Teacher
- Special Education Teacher
- Relevant members of the IEP team (as determined by the parent and LEA).

The GCSS is required to proceed with the Manifestation Determination (MDR) meeting in a timely manner. If the parent is unavailable to attend within the 10-day time frame, the manifestation determination meeting can be convened without the parent provided there are documented attempts of due diligence to gain parent participation.

The GCSS Coordinator of Special Education will facilitate the manifestation determination meeting. When conducting a manifestation determination meeting, the IEP Team must review all relevant information in the student's file, including the student's IEP, any teacher observations, and any relevant information provided by the parent to determine:

- if the conduct in question was caused by, or had a direct and substantial relationship to the student's disability; or
- if the conduct in question was the direct result of the GCSS's failure to implement the IEP.

Based on this information, the IEP Team must determine whether the student's behavior that is subject to disciplinary action is a manifestation of their disability. If the LEA, parent and relevant members of the IEP team determine that a student's misconduct was caused by or had a direct and substantial relationship to the student's disability, or a direct result of the GCSS's failure to implement the student's IEP, the conduct shall be determined to be a manifestation of the student's disability.

If the IEP Team determines that the behavior was not a manifestation of the student's disability, the student is subject to the same disciplinary action as nondisabled peers

- after the 10th day of removal, students with disabilities must continue to receive educational services until they are placed in the appropriate alternative setting; and
- the parent may request an expedited due process hearing.

The school of record remains responsible for maintaining the student's attendance and grades, as well as, providing assignments/tests until the student is enrolled in the appropriate program/school.

If the IEP team determines that the behavior was a manifestation of the student's disability,

the team must either:

- conduct a functional behavioral assessment (FBA) unless the IEP team had conducted a FBA before the behavior that resulted in the change of placement occurred, and implement a behavioral intervention plan (BIP); or
- if a BIP had been developed, review the BIP, and modify it, as necessary, to address the behavior.

In addition, the IEP Team should complete all relevant sections of the IEP, as appropriate. The IEP Team may also want to consider if the student needs a reevaluation. The GCSS may not impose disciplinary action and must return the student to the placement from which the student was removed, unless the parent and the LEA agree to a change of placement.

Special Circumstances: Weapons, Illegal Drugs, Injury

The GCSS may remove a student to an interim alternative educational setting for not more than 45 school days without regard to whether the behavior is determined to be a manifestation of the student's disability, in cases where a student:

- carried a weapon to school or to a school function under the jurisdiction of the GCSS;
 - 0 The term weapon means a weapon, device, instrument, material, or substance, animate or inanimate, that is used for, or is readily capable of, causing death or serious bodily injury.
- knowingly possessed or used illegal drugs or sold or solicited the sale of a controlled substance while at school or at a school function under the jurisdiction of the GCSS; or
 - An illegal drug means a controlled substance, but does not 0 include a substance that the student legally possesses or uses under the supervision of a licensed health-care professional, or that is legally possessed or used under federal law.
- had inflicted serious bodily injury upon another person while at school or at a school

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function under the jurisdiction of the GCSS.

 Serious bodily injury is an injury involving substantial risk of death, extreme physical pain, protracted and obvious disfigurement, or protracted loss or impairment of function of a bodily member, organ or mental faculty.

The determination of an interim alternative educational setting is determined by the IEP team. However, actual site determination remains the responsibility of GCSS's Director of Special Education and/or Coordinator of Special Education. A student's parent may challenge removal to an interim alternative placement by requesting a due process hearing. For questions regarding special circumstances, contact the Coordinator of Special Education for assistance.

Appeal Process

A parent/guardian of a child with a disability who disagrees with any decision regarding placement or the manifestation determination under this Rule, or an LEA that believes that maintaining the current placement of the child is substantially likely to result in injury to the child or others, may appeal the decision by requesting a hearing . The hearing is requested by filing a due process hearing request. The GCSS hearing officer hears the fats and makes a determination regarding an appeal under the disagreement. In making a determination under this rule, the hearing officer may:

- return the child with a disability to the placement from which the child was removed if the administrative hearing officer determines that the removal was a violation of this or that the child's behavior was a manifestation of the child's disability; or
- order a change of placement of the child with a disability to an appropriate interim alternative educational setting for not more than 45 school days if the hearing officer determines that maintaining the current placement of the child is likely to result in injury to the child or to others.
- these appeal procedures may be repeated if the LEA believes that returning the child to the original placement is likely to result in injury to the child or to others.
- expedited due process hearing. Whenever a hearing is requested, the parents or the LEA involved in the dispute must have an opportunity for an impartial due process hearing.

The state is responsible for arranging the expedited due process hearing, which must occur within 20 school days of the date the complaint requesting the hearing is filed. The hearing officer must make a determination within 10 school days following the hearing. Unless the guardians and LEA agree in writing to waive the resolution meeting or agree to use the mediation process:

a resolution meeting must occur within seven days of receiving notice of the due

process hearing request

- the due process hearing may proceed unless the matter has been resolved to the satisfaction of both parties within 15 days of the receipt of the due process hearing request.
- the decisions on expedited due process hearings are appealable

Placement during Appeal

Stay-Put Requirements - Once a due process hearing has been initiated:

- the GCSS cannot change the student's educational placement during a due process until the legal proceeding are completed (stay-put);
- unless the student is placed in an alternative educational setting for behavior that is not a manifestation of the disability or
- if the student is removed by the GCSS to an interim alternative educational setting for weapons, drugs, controlled substance or causing serious bodily injury.
- a hearing officer can also remove the student to an interim alternative educational setting for up to 45 school days because it is likely the student may injure him/herself or others.

Protections for Children Not Yet Eligible

In some circumstances a student who has not yet been determined to be eligible as a student with a disability may be entitled to procedural protections. If there was a suspicion of a disability prior to the behavior infraction and recommendation of an alternative placement, discipline must cease and an expedited evaluation must occur unless the infraction was weapons, drugs or serious bodily harm. The LEA is deemed to have knowledge that a student is a student with a disability before the behavior that precipitated the disciplinary action occurred:

- the parent of the student had expressed concern in writing to supervisory or administrative personnel of the appropriate educational agency, or a teacher of the student, that the student is in need of special education and related services;
- the parent of the student has requested an evaluation of the student; the teacher of the student, or other personnel of the LEA, has expressed specific concerns about a pattern of behavior demonstrated by the child, directly to the Director of Special Education of such agency or to other supervisory personnel of the agency.

Exception:

• The LEA is deemed not to have knowledge that a student is a student with a disability if the parent of the student has not allowed an evaluation, has refused or revoked services, or the student has been evaluated, and it was determined that the student was not a student with a disability eligible for services under the IDEA.

Referral to Law Enforcement and Judicial Authorities

The protections described in this Chapter do not prevent GCSS personnel from reporting a crime committed by a student with a disability to appropriate authorities. Similarly, these protections do not prevent state law enforcement and judicial authorities from exercising their responsibilities in applying federal or state law to crimes committed by a student with a disability. If GCSS personnel report a crime committed by a student with a disability to appropriate authorities, they must ensure that copies of the student's special education and disciplinary records are transmitted for consideration by those authorities to whom the agency reports the crime. The student's records may be transmitted only to the extent such transmission is permitted by the Family Educational Rights and Privacy Act.

Change of Placement Due to Disciplinary Removal

For purposes of removal of a child with a disability from the child's current educational placement under this Rule, a change in placement occurs if:

- the removal is for more than 10 consecutive school days, or
- the child has been subjected to a series of removals that constitute a pattern
 - because the series of removals total more than 10 school days in a school year;
 - because the child's behavior is substantially similar to the child's behavior in previous incidents that resulted in the series of removals
 - because of such additional factors as the length of each rem oval, the total amount of time the child has been removed, and the proximity of the removals to one another.
- The LEA determines on a case-by-case basis whether a pattern of removals constitutes a change of placement. This determination is subject to review through due process hearings and judicial proceedings.

2.3 Individualized Education Program (IEP)

State Rule: <u>160-4-7-.06</u>

The GCSS will implement procedures and practices to ensure that all students with disabilities receive an effective special education program that results in progress toward IEP annual goals and in the general education setting.

Compliance Monitoring Protocols

The Special Education Director and Coordinator of Special Education work closely with schools and case managers to ensure that IEPs are written to provide special education and related services in accordance with the student's disability related needs. The case managers assure ongoing progress monitoring is collected for students through quarterly reviews. The case managers must have Annual IEPs developed and ready for review at least 10 days prior to the scheduled IEP meeting for compliance checks.

Professional Learning

GCSS special education staff will provide ongoing professional development as needed during team leader meetings (no less than seven per school year). Teachers new to the GCSS receive additional professional learning during their initial year specific to writing and implementing effective Individualized Education Plans.

Technical Assistance

The Director of Special Education, Coordinator of Special Education, Special Education Team Leaders, and the SPED Administrative Assistant are available for technical assistance.

Definition of IEP Team

The IEP Team is a group of individuals that is responsible for developing, reviewing, or revising an IEP for a child with a disability. The LEA shall ensure that each IEP Team meeting includes the following participants:

- The parents of the student
- Not less than one regular education teacher of the child (if the child is, or may be, participating in the regular education environment)
- Not less than one special education teacher of the child, or where appropriate, not less than one special education provider of the child
- An LEA representative of GCSS who -
 - Is qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of children with disabilities
 - Is knowledgeable about the general education curriculum 0
 - Is knowledgeable about the availability of resources in GCSS 0
 - Can interpret the instructional implications of evaluation results 0
 - 0 The student, when appropriate. A student with a transition plan must be invited to the IEP.

Present Levels of Performance (PLAFF)

The present levels of academic achievement and functional performance section establishes the starting point or baseline that is used to develop the entire IEP. It includes a description of the child's current academic, developmental, and/or functional strengths and needs; results of the initial or most recent evaluation; the results of district or statewide assessments; consideration of special factors; an explanation of how the disability affects the child's participation in the general education curriculum; any concerns of the parent; and, for preschool children, the impact of the disability on participation in age-appropriate activities.

• Current Academic, Developmental and Functional Strengths/Needs: Areas of strength

may refer to academic subjects such as reading, language arts, math, etc.; developmental areas such as communication, motor, cognitive, social/emotional, etc.; functional areas such as self-care, social skills, daily living, communication, social/emotional, etc. This area should describe **SPECIFIC** needs that impact achievement and must be addressed through the IEP goals and/or objectives or through accommodations.

- Results of the Initial or Most Recent Evaluation: This should include a summary of the relevant information from the child's evaluation (not just a listing of scores). This section does not have to include only formal evaluation measures performed on a child. It can include additional formative and summative assessments used for instructional purposes. Best practice is to include information from most recent psychological including processing strengths and weaknesses.
- Results of District or Statewide Assessments: This information must include test scores and must indicate the child's performance level(s). This should also provide a frame of reference for how the child is performing in comparison to same age peers. In addition, IEPs should include the strengths and weaknesses as indicated by the domains of the subtests.
- Consideration of Special Factors: Consideration of special factors must be documented in the IEP. The factors to consider are behavior, limited English proficiency, visual impairments, communication needs, assistive technology, and alternative format for instructional materials. If needs are determined in any of these areas, the IEP must include a description of the supports and/or services that will be provided to the child. If the IEP team feels that a Behavior Intervention Plan is necessary, then the team will follow GCSS guidelines and first implement a Functional Behavior Analysis in order to determine a baseline and cause for the behavior.
- Impact of the disability on involvement and progress in the general education curriculum: This section should describe individual characteristics of the child's disability that affect his or her classroom performance. Examples of specific characteristics for a specific learning disability may include short term memory problems, poor organizational skills, and auditory processing problems, etc. This section must indicate how classroom instruction is impacted by the specific characteristics or deficits of the disability. Merely stating the student's eligibility category does not adequately describe the impact on involvement and progress in the general education curriculum. Statements should reflect individual needs and not be applicable to a large group of students.
- Parent Concerns: What is written should be the result of ongoing communication with the parent regarding the child's academics, behavior, performance on goals, and/or future plans. This area must be addressed in the IEP. Even if the parent does not attend the meeting or does not provide input at the time of the meeting, this information should be drawn from communication that has occurred over the

previous school year.

Annual Goals and Objectives

The GCSS IEP goals are written to address an individual student deficits in order to enable that student to make progress in grade level standards. All students are expected to be working toward grade level standards, so it is not necessary to list those standards in the IEP. The goals should address the needs described in the present levels of academic achievement and functional performance that will enable the child to progress in the grade level standardsbased curriculum. The goals should be written in measurable form and should describe what the student can be reasonably expected to accomplish within one school year.

Example: The student is not making progress in the general education curriculum because of his inability to follow directions from the teacher, and he often completes assignments incorrectly.

- Goal: The student will comply with oral directions the first time given by the teacher by listening, clarifying, and verbally agreeing to do as asked 4 out of 5 times for three consecutive weeks.
- Short term objectives or benchmarks are not required for all students. Only those students who participate in the GAA are required to have either benchmarks or short term objectives. However, it is recommended that short term objectives or benchmarks for all students be considered.

At times a parent may request short term objectives for a particular area of the IEP even though they may not be required. Therefore, school personnel and the parent(s) should work together to reach an agreement about short term objectives as appropriate.

Short-term objectives for students on alternative assessment:

Low incidence students all have short-term objectives associated with overarching goals to enable learning to be scaffolded. These objectives are written based on individual student needs.

Criteria for Measurement of Goals/Objectives

GCSS staff utilize data collection including grades, behavior data, observations, common formative and summative assessments and individually prepared assessments to measure progress on goals and objectives. Criteria for mastery is individually determined by the IEP team; however, the customary measure used in GCSS is 80%.

Progress Reporting and Schedule

IEP progress reporting occurs concurrently with school-based progress reports for all students.

• Elementary Schools: every 4 ¹/₂ weeks

- Middle Schools: every 4 ¹/₂ weeks
- High Schools: every 9 weeks

Plan for Services (Special Education, Related services, Modifications/Accommodations, Positive Behavioral Interventions & Supports) with Frequency, Location, and Duration of Services

IEP teams determine appropriate services including academic needs, related services, and student supports based on present levels of performance. Although the first consideration for services is the regular classroom environment, more restrictive placements may be necessary when needed services cannot be provided in the general education setting. A continuum of services must be considered for each individual student. The team discusses benefits and consequences for all levels of services considered during the annual IEP meeting. Services can be updated or modified through an IEP amendment.

The continuum of alternative services includes instruction in:

- general classes with supplemental aids and materials
- self-contained settings
- special schools
- home instruction
- hospital or residential facilities

Consideration of assistive technology:

Assistive technology (AT) is a component of the educational programs of students with disabilities.

Assistive Technology Devices are any items, equipment, products, or system whether acquired commercially, teacher-made, modified, or customized, that are used to increase, maintain, or improve the functional capabilities of children with disabilities. For example, some students' ability to learn, compete, work, and interact with others may improve with the use of the following:

- adapted toys
- switches
- computers
- amplification systems
- wheelchairs
- memory aids
- magnifiers
- augmentative communication devices
- other adapted devices

Assistive Technology Services are services needed to support effective use of AT devices. AT services may include training or technical assistance for the child and/or the child's family, and training or technical assistance for professionals, employers, or other individuals who are substantially involved in the major life functions of an individual with a disability. Services also include selecting, designing, fitting, customizing, adapting, applying, retaining, repairing, or replacing assistive technology devices.

Explanation for exclusion of participation with non-disabled peers

Every GCSS IEP includes a narrative when the IEP team determines that the student should be excluded from participating with typical peers. This determination is made on an individual basis and includes consideration of the whole child:

- Academic strengths and areas of need
- Social-Emotional strengths and areas of need
- Adaptive strengths and areas of need
- Functional strengths and areas of need

Testing Accommodations or Modifications:

Accommodations versus Modifications - IEP teams may believe that both accommodations and modifications reduce the effect of the student's disability on an assignment or assessment; however, there are important differences. An accommodation does not change the construct of the assessment and does not lessen the learning expectations for the student. The construct is not changed in depth or breadth under an accommodation. A modification often changes the construct and changes the learning expectations. For example, an accommodation for a classroom assignment might be extended time so that the student can complete all parts of the assignment. A modification for that assignment might be taking a portion of the assignment.

Accommodations DO	Accommodations DO NOT	
Keep the test construct intact while changing the manner in which a test is administered or how the student responds	Change the construct the test is designed to measure (this would be a modification)	
Reduce or eliminate the effect of the disability on the assessment	Reduce learning expectations for the student with a disability (this would be a modification)	

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Help ensure the results of the assessment are an accurate measure of student knowledge and skill within the construct	Absolutely ensure a proficient score on an assessment
Help ensure the assessment is equitable for the student with a disability	Provide an advantage

The GCSS adheres to the following state guidelines regarding testing accommodations for both statewide assessments and GAA 2.0:

• Georgia requires all students to participate in statewide assessment programs. For any grade where all students are assessed, students with disabilities must participate in the regular assessment or the Georgia Alternate Assessment (GAA 2.0). The GAA 2.0 is designed for students with the most significant cognitive disabilities, approximately one percent of all students enrolled in assessed grades. Questions regarding the GAA's role in accountability measures can be answered by the GaDOE Accountability Division. All students must be included to the fullest extent possible in all statewide assessments and have their assessment results included with Georgia's accountability system. The GaDOE participation requirement is supported by federal legislation requiring the participation of students with disabilities in standards-based instruction and assessment initiatives.

Identification of Appropriate Accommodations

Caveat: GA DOE provides an approved list of accommodations. The IEP team may not identify any accommodations that are not on the approved list. If a student must have an accommodation that is not on the list, the IEP team should work with the coordinator to discuss ramifications of potential accommodations.

GCSS adheres to GA DOE guidance when choosing appropriate accommodations:

- Are the accommodations intended to lessen the effect of the student's disability as progress occurs on grade level standards?
- Are the accommodations chosen based on individual student need and not according to the student's special education eligibility?
- Are the accommodations necessary for the student's access to the test?
- Are the accommodations regularly utilized on classroom-based assessments?

Standard v. Conditional Accommodations

- Standard Accommodations
 - do not change the construct that the item or test is intended to measure but do allow for the reduction or elimination of the effects of the student's disability on the

test;

- are available for any student with an IEP, provided that the IEP team determines the accommodation to be appropriate and that it is documented on the IEP form;
- are appropriate when used alone, in combination, and for specific content areas, depending on the unique needs of the individual student.
- Conditional Accommodations
 - may encroach on the construct being measured by the test, meaning that these accommodations can change what the test measures;
 - require that the results of the test in which conditional accommodations are utilized be interpreted in light of the use of those accommodations.
 - The GCSS policy requires a special education coordinator be included in the IEP meeting when conditional accommodations are being considered.

Consideration of Extended School Year (ESY)

GCSS recognizes the need for some students with disabilities to receive services beyond the regular school year in order to access their free appropriate public education. Extended school year (ESY) refers to special education and/or related services provided beyond the normal school year for the purpose of providing FAPE to a student with a disability. These services are distinct from enrichment programs, summer school programs, and compensatory services and are not simply an extension of time. These services, at no cost to the parent, will vary in type, intensity, location, inclusion of related services, and length of time, depending on the individual needs of the student. The consideration of ESY services is a part of the IEP process. The IEP committee must address the provision of ESY services in order for the student to receive FAPE.

- Guidelines for ESY Decision-Making: Because ESY services are uniquely designed to provide FAPE to students with disabilities, it is necessary to emphasize that these services are not provided based on the following:
 - the category of student's disability;
 - mandated twelve-month services for all students with disabilities;
 - providing child care service for the student;
 - a continuation of the total IEP provided to a student with a disability during the regular school year;
 - required to be provided all day, every day, or each day;
 - an automatic program provision from year to year;
 - summer school, compensatory services, or enrichment programs;

- required to be provided in a traditional classroom setting;
- a service to be provided to maximize each student's potential.
- The IEP committee should consider the following when determining the appropriateness of providing ESY services:
 - degree of regression/ time of skill recoupment;
 - degree of disability;
 - the child's rate of progress;
 - consideration of any behavioral/ physical problems which the child may possess;
 - the availability of alternative resources for serving the child;
 - the ability of the child to interact with children who are non-disabled;
 - areas in the child's program which require continuous attention.
- Provision of ESY in the IEP
 - ESY must be considered annually.
 - ESY discussion may be initiated by the parent, the student, the student's teacher(s), related services providers, and/or administrators.
 - The GCSS requires case managers provide data to IEP committees to assist in making the determination for ESY services.

Transition Services

The successful transition of students with disabilities from school to post-school environments should be a priority of every IEP team. The purpose of a Transition Service Plan is to assist students in building the skills and supports they need to reach their post-school goals.

Transition requires support from multiple sources so the student and his or her family can make choices, develop connections, and access services. Beginning not later than the IEP to be in effect when the student begins ninth grade or turns 16, or younger if determined appropriate by the IEP team, and updated annually thereafter, the IEP must include:

- appropriate measurable postsecondary goals based upon age-appropriate transition assessments related to training, education, employment, and where appropriate, independent living skills; and
- transition services (including courses of study) needed to assist the child in reaching those goals. A course of study should focus on instructional and educational classes and experiences that will assist the student in preparing for transition from secondary education to postsecondary life. This should relate directly to the student's postsecondary outcome goals and should show how a planned course of study is linked to these goals. The course of study should be meaningful to the student's future and should motivate the student to reach successful post-school outcomes.

Desired Measurable Postsecondary Outcome/Completion Goals should be measurable and related to what the student wants to achieve after graduation. They should be "major life

accomplishments" or "completion goals." Goals should be written in the areas of education/training, employment, and independent living (if appropriate). They should be clear and understandable, positively stated, and based on academic achievement and functional performance. They must be based on age-appropriate assessments and must be practical and relevant to transition needs. Outcome/completion goals can change and become more refined as the student has more experience and gets closer to graduation.

- Preferences, Strengths, Interests, and Course of Study Based on Present Levels of Performance and Age-appropriate Transition Assessments **s**hould provide an assessment of the skills and interests related to education, employment, training, and independent living skills (as appropriate) and should be conducted in conjunction with the development of the transition components. The initial transition assessment may be prior to the eighth grade and could occur when a reevaluation consideration is conducted. It should also be ongoing and fluid. Assessment tools that clearly describe a student's strengths and weaknesses and document a student's interests and perceptions about their skills should be utilized. Surveys and interviews work well for this type of assessment. Also, six characteristics should be considered when conducting a transition assessment.
- The transition assessment should include the following: be child centered, be continuous, occur in many places, involve a variety of people, have understandable data, and be sensitive to cultural diversity.
- Measurable Transition IEP Goals are based on age-appropriate transition assessment, including transition activities and services appropriate to attain the postsecondary outcome/completion goals. This section should include measurable transition IEP goals that directly relate to the how, when, where, and what answers that are needed to complete <u>each</u> post secondary outcome/completion goal.
 - These goals should be relevant to "how to get to" the desired postsecondary outcomes. They must be meaningful. This section is divided into the following areas: education/training, development of employment, community participation, adult living skills and post-school options, related services, and daily living skills (as appropriate). At least one measurable transition IEP goal must be determined for education/training and development of employment. Measurable transition goals for independent living should be addressed if appropriate.
- Transition Activities and Services should address the transition activities and services that are needed to attain these measurable goals. Transition activities and services should be planned as the "what is needed to achieve these goals." Many activities and services should be planned and implemented for each goal.
- Persons and Agency Involved should include those who will help the student achieve the goals stated. Documentation that these persons were invited to the Transition IEP meeting and that the parent and student (if over 18) were notified of their possible

attendance must be kept. (If necessary, participating agency does not attend, you should document other actions for agency linkages.)

• Date of Completion and Achieved Outcome should state the date completed and specify what was achieved. If the student does not attend the IEP meeting, the district must take other steps, including verbal and written input, to ensure that the student's preferences and interests are considered before developing the transition aspects of the IEP.

Transfer of Rights at 18 Years of Age

At the IEP meeting before the student turns 18, a statement that the student has been informed of his or her rights that will transfer to the student upon reaching the age of 18 must be included in the IEP. The IEP should also document, at age 18, that the rights have been transferred. Once the rights have transferred to the student at age 18, the district must provide any notice required to both the child and the parent. All rights given to the parent then transfer to the student.

Excusal of IEP Team Member

A general education teacher, special education teacher and LEA are required members of the IEP team. However, if the parent of a child with a disability and the LEA agree, in writing, that the attendance of the member is not necessary because the member's area of the curriculum or related services is not being modified or discussed in the meeting that member may be excused. Prior to the meeting, the excusal must be documented in the Go-IEP Meeting Notice and submitted in writing to both the parent and the IEP Team.

Transition for Children Birth Through 2

The GCSS will cooperate with the Babies Can't Wait (BCW) Coordinator or other representative of BCW to assist with the smooth transition of services for our students' birth through age 2. The Initial IEP team meeting will include the BCW Coordinator.

Parent participation in IEP: Notification and Invitation

The GCSS will take steps to ensure that one or both of the parents of a child with a disability are present at each IEP Team meeting or are afforded the opportunity to participate, including notifying parents of the meeting early enough to ensure that they will have an opportunity to attend, and scheduling the meeting at a mutually agreed upon time and place.

- The invitation to the IEP Team meeting shall indicate the purpose, time, and location of the meeting, participants who will be in attendance, and informs the parents of their right to invite other individuals who, in their opinion, have knowledge or special expertise regarding their child, including related services personnel.
- The invitation shall also inform the parents of a child previously served in Babies Can't Wait of their right to request that an invitation to the initial IEP team meeting be sent

to the Service coordinator or other representative of Babies Can't Wait to assist with the smooth transition of services.

- For a student with a disability, beginning not later than entry into ninth grade or by age 16 whichever comes first, or younger if determined appropriate by the IEP Team, the invitation must also indicate that a purpose of the meeting will be the consideration of postsecondary goals and transition services for the student.
- Schools will invite the student and identify any other agency that will be invited to send a representative.
- If neither parent can attend an IEP Team meeting, GCSS staff must use other methods to ensure parent participation, including individual or conference telephone calls or video conferences.
- A meeting may be conducted without the parents in attendance if GCSS staff is unable to convince the parents that they should attend . In this case, the school must keep a record of its attempts to arrange a mutually agreed on time and place such as detailed records of telephone calls made or attempted and the results of those calls; copies of correspondence sent to the parents and any responses received; and detailed records and results of visits made to the home or place of employment and the results of those visits.
- GCSS must take whatever action is necessary to ensure that the parents understand the proceedings of the IEP Team meeting, including arranging for an interpreter for a parent who is deaf or whose native language is other than English . GCSS will provide a copy of the IEP to the parents at no cost. The district will ensure that the parents of each child with a disability are members of any group that makes decisions on the child's educational placement.

IEP/Individual Service Plans

Each parentally placed private school child with a disability who has been designated to receive special education and/or related services must have a services plan and it shall be conducted within 30 days of determination. The services plan describes the specific special education and/or related services that the school district will provide to the child. The GCSS will ensure that a representative of the private school attends each meeting to develop the services plan. If the private school representative cannot attend, theGCSS will use other methods to ensure participation, including individual or conference telephone calls. This will help ensure communication about the child's needs among key stakeholders.

• Service Delivery (including on-site) Services may be provided on the premises of private, including religious, elementary and secondary schools, to the extent consistent with state and federal laws. Services may also be provided at an alternate location in a manner deemed appropriate by the school district. Services will be provided by Walton County School District Staff. Services will be scheduled during the regular school day. In making decisions about the delivery of services, including

the location of services, the LEA must engage in timely and meaningful consultation and give due consideration to the views of the private school representatives and representatives of parents of parentally placed private school children with disabilities.

• The assigned Case Manager will utilize Go-IEP to develop services plan meeting notifications, the services plan document, and eligibility redeterminations. The Case Manager is responsible for delivery of services and regularly reporting progress monitoring and updating progress reports in Go-IEP. The Case Manager must maintain detailed therapy notes including the dates services were provided and the time frame of delivery for each session (beginning and ending time). The Case Manager is responsible for coordinating all Services Plan meetings including inviting the SEIS in which the private school is located to act as LEA for the meetings. The Special Education Director or designee will conduct periodic observations of services being delivered by the case manager.

Inter and Intra -State Transfer of Students with IEPs

If a child with a disability transfers into GCSS from a different school district in the same school year within Georgia, GCSS (in consultation with the parents) will provide a free and appropriate education to include services comparable to those described in the child's IEP. This is required until either GCSS adopts the child's IEP or develops, adopts, and implements a new IEP that meets the IEP requirements.

If a child with a disability transfers to a different school district in the same school year who had an IEP that was in effect in a school district in another State and transfers to Georgia within the same school year, GCSS (in consultation with the parents) will provide a free and appropriate education to include services comparable to those described in the child's IEP. This is required until either GCSS conducts an evaluation if determined to be necessary by a GCSS School Psychologist and/or develops, adopts, and implements a new IEP.

FERPA and Transmittal of Records

To facilitate the transition for a child described above, GCSS will take reasonable steps to promptly obtain the child's records, including the IEP, supporting documents, and any other records relating to the provision of special education or related services to the child, from the previous LEA in which the child was enrolled. GCSS will attempt to get parental consent for the records, however, FERPA does not require prior parental consent to disclose education records to officials of another school where the student seeks or intends to enroll.

Review and Revision of the IEP

The GCSS will ensure that the IEP team:

• Reviews the child's IEP periodically, but not less than annually, to determine whether

the annual goals for the child are being achieved; and

- Revises the IEP, as appropriate, to address-
 - Any lack of expected progress toward the annual goals and in the general curriculum, if appropriate;
 - The results of any reevaluations conducted if applicable as well as any outside evaluations presented by parents
 - Information about the child provided to, or by, the parents;
 - The child's anticipated needs; or
 - Other matters.
- Consolidation of IEP Team meetings. To the extent possible, GCSS will encourage the consolidation of reevaluation meetings for the child and other IEP Team meetings for the child.
- Consideration of special factors. In conducting a review of the child's IEP, the IEP Team must consider the special factors such as: behavior, level of English Proficiency, visual impairment, communication, and need for assistive technology.
- A regular education teacher of the child, as a member of the IEP Team, will participate in the review and revision of the IEP of the child.
- Failure to meet transition objectives-
 - Participating agency failure. GCSS will work with local agencies to ensure access for participating in developing, reviewing and revising transition objectives. If a participating agency fails to provide the transition services described in the IEP, GCSS must reconvene the IEP Team to identify alternative strategies to meet the transition objectives for the child set out in the IEP.
 - Nothing in this part relieves any participating agency, including the State Vocational Rehabilitation Agency, of the responsibility to provide or pay for any transition service that the agency would otherwise provide to children with disabilities who meet the eligibility criteria of that agency.
- Children with disabilities in adult prisons.
 - The following requirements do not apply to children with disabilities who are convicted as adults under State law and incarcerated in adult prisons (Department of Corrections)
 - Participation of children with disabilities in State and district wide assessments; and
 - The requirements related to transition planning and transition services do not apply to children whose eligibility under Part B of the IDEA will end, because of their age, before they will be eligible to be released from prison based on consideration of their sentence and eligibility for early release.
- Modifications of IEP or placement . The IEP Team of a child with a disability who is convicted as an adult and incarcerated in an adult prison may modify the child's IEP or

placement if the State has demonstrated a bona fide security or compelling penological interest that cannot otherwise be accommodated.

The IEP requirements in this Rule and the LRE requirements do not apply with respect to the modifications described in paragraph (g)(2) above .

Monitoring Procedures in GCSS

In review of the components of the IEP and ensuring that IEP meetings and IEP information adheres to mandated compliance expectations, GCSS provides the following:

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- <u>Monthly Team Lead Meetings</u> Each school has a Special Education Team Leader that is responsible for providing support to the special education team for that school. They are instructed to follow the guidelines of the Monthly Team Lead Guide.
- <u>LEA Trainings</u> Team Leads will be trained; a train-the-trainer model will be used to redeliver to Case Managers twice a year (provide training agenda to Coordinator of Special Education). These trainings are offered to provide building level LEA's with the proper information needed to act as LEA's during the IEP meeting.

Monitoring

- <u>Case Manager Expectations</u> Case managers are reminded of the expectations as it relates to IEP writing, implementation, and compliance. This document outlines the various areas that should be considered when writing an IEP. GCSS Case Managers are encouraged to prepare IEP's five days in advance of the IEP meeting so that team leads can review them for compliance.
- <u>Suspension Review</u> GCSS has provided Team Leads/Case Managers with a protocol for reviewing student suspension. If a student receives five days of suspension, the Case Managers along with their respective Team Lead will review the students behavior information and determine if the Behavior Intervention Plan should be revised. This process is to ensure that SWD students are not suspended past the ten day limit without careful consideration of all factors that relate to the behaviors.
- <u>Monthly Review of Go-IEP Reports</u> The Coordinator of Special Education will extract reports on a monthly basis that are provided in Go-IEP to remind school based SPED Team Leads of compliance concerns, i.e.- Overdue Progress Reports and other reports as needed.
 - If procedures are not being appropriately followed, the Coordinator of Special Education will address concerns and refer personnel to aforementioned documents of compliance

2.4 Personnel, Facilities, and Caseloads

State Rule: <u>160-4-7-.14</u>

Personnel are staff members employed by the Greene County School System. Facilities are designated locations for providing job-related services. Caseloads are the number of

students assigned to a special education staff member who is responsible for the development, implementation, review, and revision of IEPs. The GCSS shall provide classrooms of suitable size in a distraction-free area, as required by the type of program or services to be established, with appropriate furniture, materials, supplies and equipment to meet the needs of the class or individual children to be served. The GCSS will adhere to State Board Rule 160-4-7-.14 in regards to maximum class size and caseloads. The following outlines the procedures for maintaining a highly qualified staff for delivery of special education services, appropriate facilities and appropriate caseloads.

Compliance Monitoring Protocols

Credentials and licenses of special education personnel are verified and maintained by the HR department. Each teacher's highly qualified status is verified at a minimum of once annually by the HR department.

The Special Education Director checks for appropriate size of classroom facilities at least once annually. Any noted irregularities regarding the physical size/space or access to special education facilities are reported to the Assistant Superintendent for Operations and the building principal for resolution.

The Coordinator of Special Education reviews each teacher's class size and caseload at least twice annually through reports in the student information system and segment forms maintained by the caseload managers. Any noncompliance is shared with the Special Education Director, Assistant Superintendent, and building principals.

Building principals are responsible for hiring of all special education certified and licensed personnel with the exception of related services personnel. Building principals verify credentials of special education personnel during the employee application process, and credentials are maintained by the HR department. Building principals are responsible for maintaining adequate classroom space for serving students with disabilities including the provision of appropriate furniture, instructional materials and equipment. Building principals are responsible for following Georgia Department of Education rules regarding class size and caseloads for students receiving special education services.

Related services personnel are hired by Northeast GA RESA – includes OT, PT, audiology, orientation and mobility specialist, DHH teachers and VI teachers. Credentials and licenses for these personnel are maintained by Northeast GA RESA and available upon request to the district.

Professional Learning

District special education staff will provide ongoing professional development as needed during team leader meetings (no less than seven per school year). Teachers new to the GCSS receive additional professional learning during their initial year specific to caseloads and case management.

Technical Assistance

Special Education Team Leaders, Coordinator of Special Education, and the SPED Administrative Assistant are available for technical assistance.

Maintenance of Credential for Professional Employees

Obtaining and maintaining of appropriate/current credentials is the ongoing responsibility of any professional employed by or under contract by the GCSS. The Human Resources Department shall maintain copies of appropriate credentials during the application process, and subsequent years when credentials are renewed.

Teachers of students with disabilities, prior to employment, shall have a valid Georgia Teaching Certificate with an endorsement appropriate for the disabilities of the students they serve. Additionally, special education teachers must meet the highly qualified teacher requirements for their respective teaching assignments, as designated by federal and state guidelines. Special education teachers must be qualified for any content area in which they are identified as teacher of record.

Classroom Size and Appropriateness

Instructional areas for students with disabilities shall be located in classrooms with students of similar chronological age and shall be comparable to other classrooms within the school. This means comparable to other classrooms in regards to appropriate furnishings, materials, supplies and equipment to meet the needs of the class or individual children to be served. Students with disabilities should not be served in classrooms that are too small, have visual or auditory distractions or do not have items necessary to provide appropriate instruction. GA BOE rule requires thirty-eight square feet provided for each child in the class with a variance of 10 percent depending upon the total number of personnel in the class at any time, the type of children and class, the kind and amount of furniture and equipment required and the necessity for storage capabilities.

The building principal is responsible for securing adequate facilities for students with disabilities served in his/her school. Classroom facilities are checked at a minimum of once annually by the special education director or designee. Any facility issues regarding class

size, access and/or safety are reported by the Special Education Director to the building principal and Assistant Superintendent for Operations. The Assistant Superintendent for Operations and Facilities Director shall include the Special Education Director in plans for any new building construction or renovations where students with disabilities are to be served.

Maximum Class Size and Caseload by Eligibility Category

The Maximum Class Size and Caseloads for personnel serving children ages 3 to 5 are listed below:

- Full Day Program Maximum Class Size = 8 Maximum Caseload = 16
- Part Day Program Maximum Class Size = 12 Maximum Caseload = 32
- Community Program Maximum Caseload = 32

The chart below outlines the maximum class size and caseload limits for students ages 6 to 22 based on program area. The GCSS will adhere to the state guidelines below with the understanding that the board has continued waiver approval for the Superintendent of Schools to increase the class size maximums to exceed the current requirements by up to 5 additional students in special education classes.

Program Area	Delivery Self Contained (SC) or Resource ®	Maximum Class Size without Para	Maximum Class Size with Para	Maximum Caseload
Mild Intellectual Disability	SC	10	13	14
	R	10	13	26
Moderate Intellectual Disability	SC	NA	11	11
Severe Intellectual Disability	SC	NA	7	7
Profound Intellectual Disability	SC	NA	6	6
Emotional Behavior Disorders	SC	8	11	12
	R	7	10	26

Greene County School District, SPED Implementation Manual

Adapted from SPED Implementation Manual, Clarke County School District Adapted from Special Education Rules Implementation Manual, GaDOE

Specific Learning Disabilities	SC	12	16	16
	R	8	10	26
Visual Impairment	SC	NA	6	7
	R	3	4	13
Deaf/Hard of Hearing	SC	6	8	8
	R	3	4	11
Deaf-Blind	SC	NA	6	7
Speech Language Impairment	SC	11	15	15
	R	7	NA	55
Orthopedic Impairments	SC	NA	11	11
	R	4	5	15

Each paraprofessional is equivalent to 1/3 teacher and affects individual class size, caseload and system average proportionately. Three paras are the maximum number that can be used to increase maximum class size for any special education class. Additional paras to used to increase maximum class size for any special education class must be approved by the Director of Special Education.

If children from different programs/delivery models are within the same segment, the class size shall be determined by the program/delivery model with the smallest class size. The caseloads shall be determined by averaging the respective caseloads.

The placement of children with autism, traumatic brain injury, or other health impairments, and significant developmental delays in the above program areas will not change class sizes.

Children with an IEP designating the service location for the delivery of goals and objectives to be the regular classroom environment, shall be reported in their special education program category if instruction is provided in a team/collaborative (co-teaching) model or consultative model.

Monitoring of special education class size and caseloads – the building principal or principal designee is responsible for monitoring class size and caseloads. Caseload managers at each elementary school are responsible for posting segment sheets at least twice annually (during the fall and spring FTE cycle). Class size and caseloads at the secondary schools are reported through the special education team leader at each site. The team leader at each building will review these reports and notify the Special Education Coordinator of any noncompliance. Upon report the Special Education Director will work with the building principal to resolve the noncompliance which may require rescheduling or moving/hiring additional staff.

2.5 Georgia Network for Educational and Therapeutic Support (GNETS)

State Rule: 160-4-7-.15

The Georgia Network for Educational and Therapeutic Support (GNETS) is comprised of 24 programs which support the local school systems' continuum of services for students with disabilities, ages 5-21. The programs provide comprehensive educational and therapeutic support services to students who might otherwise require residential or other more restrictive placements due to the severity of one or more of the characteristics of the disability category of emotional and behavioral disorders (EBD).

Compliance Monitoring Protocols

The Special Education Director and Coordinators work closely with the local GNETS to ensure compliance monitoring. The GCSS will ensure that GNETS services are necessary for students to receive FAPE – removal from the general education setting will occur only when the nature or severity of a student's social, emotional and/or behavioral challenges are such that education in a general education setting with the use of supplementary services and intensive individualized interventions cannot be achieved.

Professional Learning

District special education staff will provide ongoing professional development as needed during monthly team leader meetings.

Technical Assistance

Special Education Team Leaders, Special Education Coordinators, and the District Compliance Clerk are available for technical assistance.

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Eligibility and Placement

In order for a student to receive services through a GNETS program the student must be referred through the IEP process. Prior to initiating a referral for GNETS services, the Case Manager and SPED Team Leader must consult with the Director of Special Education and/or Coordinator of Special Education. The Coordinator of Special Education will review all relevant information prior to initiating any referral for GNETS services. After this review, the Coordinator of Special Education will notify the Case Manager and SPED Team Leader if there is or is not enough supporting documentation to consider a GNETS referral. The appropriate supporting documentation includes:

- Current IEP
- Current FBA within the past year •
- Current BIP (proof that the BIP has been revised based on student's needs and implemented with fidelity)
- Comprehensive evaluation results within the last three years •
- Progress monitoring data
- A Continuum of placements has been offered within the district

If there is sufficient documentation, the Coordinator of Special Education will determine whether to seek GNETS consultation services or an initial referral for direct services. The Coordinator of Special Education will send the GNETS consultation packet or referral packet. The appropriate packet which will be completed by the Case Manager and SPED Team Leader. The Case Manager and SPED Team Leader will send the completed packet back to the Coordinator of Special Education who will forward it to the Rutland Academy Student Review Panel. The Rutland Student Review Panel reviews cases on a monthly basis. After review the panel will notify the Coordinator of Special Education whether consideration for GNETS services is warranted or not. If not, the panel will make suggestions for revising the referral packet or recommendations for behavioral strategies that may be implemented by the school. If consideration for GNETS services is warranted, the Coordinator of Special Education will coordinate an IEP team meeting including the parents and the GNETS Director or designee.

Documentation of Ongoing Effectiveness and Improvement

If the IEP team recommends GNETS services, the following documents must exist in the student's records:

- Current IEP •
- FBA/BIP administered within the past year
- Comprehensive re-evaluation within the last 3 years

It is best practice to include the following documents to assist with immediate services delivery.

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- Completed Guiding Questions Checklist (on WCBOE intranet)
- School History
- GNETS consultation documents

The information related to the guiding questions above should be clearly documented within the present level of performance section of the student's IEP. This will require an amendment of the current IEP. If the IEP team recommends consult services, the specific services will be notated by the case manager in the supports section of the IEP and/or minutes. If the IEP team recommends direct services, IEP goals should be developed and/or revised to include the behaviors that necessitate placement in the GNETS program and the data that supports the placement decision as well as the criteria that will be considered to insure that the student is served in the least restrictive educational placement. For direct services, the services section of the IEP should be amended to reflect the amount of services, location of services. Transportation services to and from home to the GNETS facility should be added to the IEP. The IEP team should consider transportation needs for students participating in any extracurricular activities or partial day GNETS services. The Special Education Coordinator will complete the transportation form and submit it to the transportation department after the IEP meeting. The Coordinator of Special Education will communicate the change in placement with the GCSS Compliance Specialist as well as the zoned school.

Recommended Class Size by Level

It will be the responsibility of the GNETS to ensure appropriate class sizes by level using the State reporting guidelines. FTE reporting will be completed by the GCSS SPED Administrative Assistant with guidance from the Coordinator of Special Education whenever necessary.

Positive Behavioral Interventions and Supports/Academic Curriculum

PBIS and Academic Curriculum decisions and planning for GNETS will be the coordinated be the Director and Instructional Specialists working directly for the GNETS facility. Guidance and support may be provided by the GCSS when requested.

2.6 Seclusion and Restraint

Introduction: Greene County School System (GCSS) supports a positive approach to behavior that uses proactive strategies to create a safe school climate that promotes dignity, creates authentic student engagement, increases instructional time, and improves student achievement for all students. When teachers and administrators implement evidence-based positive behavior supports with fidelity, a school environment is created that is conducive to learning and students are able to achieve without the constant interruptions that occur when teachers are required to address discipline problems in the classroom. Unfortunately, students sometimes exhibit behaviors which place themselves or others in imminent danger. Schools in the Greene County School System implement proactive strategies and interventions to reduce the likelihood of these situations. Responses to these dangerous situations are addressed in the School Safety Plan.

The following procedures are developed for school staff and teachers ensure safety in the school, while complying with the Georgia State Board of Education Rule: 160-5-1-.35: SECLUSION AND RESTRAINT FOR ALL STUDENTS, which prohibits the use of seclusion and limits the use of restraint to those situations in which students are a danger to themselves or others.

Part 1: Definitions

Chemical restraint refers to any medication that is used to control behavior or restrict the student's freedom of movement that is not a prescribed treatment for the student's medical or psychiatric condition.

Mechanical restraint refers to the use of any device or material attached to or adjacent to a student's body that is intended to restrict the normal freedom of movement and which cannot be easily removed by the student. The term does not include an adaptive or protective device recommended by a physician or therapist when used as recommended by the physician or therapist to promote normative body positioning and physical functioning, and/or to prevent self injurious behavior. The term also does not include seatbelts and other safety equipment (e.g., safety harness) when used to secure students during transportation.

A prone stander or adaptive chair with attached lap tray is not considered a mechanical restraint if used consistent with physician or therapist recommendations, to promote correct body positioning in a student with a disability. However, if the same device is used for the sole purpose of restricting the student's movement, it would be considered a mechanical restraint.

Physical restraint – refers to direct physical contact from an adult that prevents or significantly restricts a student's movement. The term physical restraint does not include prone restraint, mechanical restraint, or chemical restraint. Additionally, physical restraint does not include: providing limited physical contact and/or redirection to promote student safety, providing physical guidance or prompting when teaching a skill, redirecting attention, providing guidance to a location, or providing comfort. The term physical restraint also does not include a physical escort whereby an employee temporarily touches or holds the hand, wrist, arm, shoulder, or back of a student for the purpose of inducing a student who is acting out to walk to a safe location.

Prone restraint refers to a specific type of restraint in which a student is intentionally placed face down on the floor or another surface, and physical pressure is applied to the student's body to keep the student in the prone position.

Seclusion refers to a procedure that isolates and confines the student in a separate area until he or she is no longer an immediate danger to himself/herself or others. The seclusion occurs in a specifically constructed or designated room or space that is physically isolated from common areas and from which the student is physically prevented from leaving. Seclusion may also be referred to as monitored seclusion, seclusion timeout, or isolated timeout. Seclusion does not include situations in which a staff member trained in the use of de-escalation techniques or restraint is physically present in the same unlocked room as the student, time-out as defined in paragraph (1)(g) of this rule, in-school suspension, detention, or a student-requested break in a different location in the room or in a separate room.

Time-out refers to a behavioral intervention in which the student is temporarily removed from the learning activity but in which the student is not confined.

Part 2: Use of Seclusion and Restraints

- GCSS prohibits the use of seclusion in all Greene County School System schools and educational programs.
- When a student exhibits behaviors that place that student or others in immediate danger, and the student is not responsive to verbal directives or other less intensive deescalation techniques, administrators and teachers are authorized to use physical restraint in accordance with these standards.
- Employees should only use approved physical restraint techniques which are part of the GCSS's training program. Chemical, mechanical, and prone restraints are prohibited.
- Physical restraint should not be as a form of discipline or punishment, when the student cannot safely be restrained, or when the use of the intervention would not be advisable due to the student's psychiatric, medical, or physical condition.
- When a staff member who has not received physical restraint training has to physically restrain a student in an emergency to prevent injury to the student or others, that staff member should ask others, if present, to request assistance from a trained individual immediately.
- Physical restraints that involve the following techniques should not be used:
 - Bone locks or hyperextension of joints;
 - Pressure or weight on the chest, lungs, sternum, diaphragm, back, or abdomen, causing chest compression;
 - Straddling or sitting on any part of the body or any maneuver that places pressure, weight, or leverage on the neck or throat, on any artery, or on the back

of the student's head or neck, or that otherwise obstructs or restricts the circulation of blood or obstructs the airway;

- Any type of choking, hand chokes, or any type of neck or head hold; and
- $\circ~$ Any technique that involves pushing on or into the student's mouth, nose, or eyes.

Part 3: Staff and Faculty Training

Greene County School System will use a continuum of safe interventions to support students in imminent danger to themselves or others. Physical restraint training shall be provided as part of the Greene County School System's full continuum of research-based positive behavioral intervention strategies, crisis intervention, and de-escalation techniques.

- School-level SPED personnel shall receive training regarding GCSS Physical Restraint Procedures (as applicable). In addition, key school-based staff should be identified to receive training in the use of physical restraint techniques and procedures. This training shall be provided as part of a program which addresses a full continuum of positive behavioral intervention strategies, crisis intervention, and de-escalation techniques. School principals should identify key employees for training based on the likelihood that such employees will interact with students who may engage in aggressive behaviors.
 - The district behavior specialist will schedule trainings using my learning plan.
 - The district behavior specialist will maintain and upon request publish updated lists trained staff with certification dates and recertification status.
- Physical restraint training for key staff members will culminate in certification in accordance with approved certification protocol.
- Physical restraint techniques should only be applied as a last resort when the student's behavior poses an immediate danger to the student or others and never as a punitive measure. Emergency physical restraints are intended to be utilized by individuals who have successfully completed training in the use of physical restraint techniques. The techniques are designed to protect all individuals involved.
- Physical restraint should be immediately terminated when the student is no longer an imminent danger to himself or others, or if the student exhibits signs of severe distress or injury.
- Cardio-pulmonary resuscitation (CPR) training will be provided to staff as an ongoing opportunity to ensure trained staff are available in each building.
- Coaching and follow-up training will be provided on an on-going basis under the direction of Certified Master Trainers of the GCSS's approved training program.

Part 4: Documentation of the Use of Restraint

The use of physical restraint must be documented by staff or faculty participating in or supervising the restraint for each student in each instance in which the student is restrained. The incident report will include the following information:

- 1. Date of Incident
- 2. Student's Name
- 3. Location of Restraint
- 4. Precipitation Behavior/Antecedent: The report should include a fact-based description of the behavior which necessitated the use of physical restraint *and* the student's behavior immediately preceding that behavior. Generalized, summary characterizations of behaviors (e.g., "noncompliant" or "physically aggressive") should be avoided.
- 5. Less Intensive Interventions: The report should describe efforts to de-escalate the situation and any alternatives to physical restraint which were attempted prior to the use of physical restraint. Generalized characterizations of interventions (e.g., "verbal redirection") should be avoided.
- 6. Detailed Description of Restraint: The report should include a detailed description of the type of physical restraint technique which was used.
- 7. Observations of Student's Behavior and Physical Status during the restraint
- 8. Injuries to the Student or Staff
- 9. Total Time Spent in Restraint: Where practicable under the circumstances, staff should use best efforts to document the beginning and ending time of the restraint.
- 10. Staff Participating in the Restraint
- 11. Training of Staff Participating in Restraint
- 12. Student's Special Education Category of Eligibility, if any
- 13. Staff Signatures

Documentation will be maintained at the school and district level through the student information system. Procedures will be reviewed annually. The records will be maintained and follow Greene County School System's records retention schedule.

Procedures for Documenting a Physical Restraint

- 1. When physical restraint is used, administrators should be notified immediately
- 2. An incident report should be completed when restraint is required
- 3. Documentation in the student information system should be completed
- 4. Written parental notification will be provided each time their child is restrained.
- 5. Parental notification should occur in a timely manner not to exceed one school day.
- 6. The written notification should include a copy of the incident report.
- 7. In the event a student is injured or removed from the school setting by law enforcement or medical personnel, the parent should be notified immediately
- 8. Documentation of restraints must be maintained by the school administrators and reviewed by administrators or other designees on a weekly basis.

Part 5: Procedures for Observing and Monitoring the Use of Physical Restraint When a physical restraint has been initiated, the goal is to release the restraint as soon as possible. If there are signs of verbal and physical de-escalation during containment, then releasing the restraint should occur.

The following safety guidelines, based on approved curriculum should be followed:

- Communicate with staff members and the student
- Monitor the students physical condition
 - Airway
 - Breathing
 - Circulation
 - Level of Consciousness
- Release when appropriate
 - At anytime a student is no longer a physical threat to themselves or others.
 - When the student's physical safety is in jeopardy from either a positional situation or a medical situation
 - After 15 minutes
- Coaching and follow-up training will be available to address specific areas of concerns
- NOTE: GCSS does not allow for the use of mechanical restraint, chemical restraint, prone restraint, or seclusion.

Part 6: Procedures for Periodic Review of the Use of Restraint and the Documentation **Required:**

- The school principal or designee will review completed restraint incident reports as appropriate on a weekly basis.
- Based on the incident reports, the principal or designee should conduct an on-going ٠ analysis of the following:
 - The frequency with which physical restraint techniques are used;
 - The location where physical restraints are used;
 - The training level of personnel involved in incidents requiring physical restraint;
 - The degree to which effective de-escalation techniques and positive behavior supports are used prior to the use of physical restraint;
 - The appropriateness and efficacy of physical restraint techniques;
 - The occurrence of injuries to students and staff;
 - The frequency with which students eligible for special education are subject to physical restraint; and
 - The adequacy of documentation of restraint and timely parental notification.
- The principal or designee should use physical restraint data in order to determine whether there is an overuse of physical restraint in particular settings, by particular

staff, or with specific students and whether additional training may be necessary for personnel.

- The Coordinator of Special Education will review physical restraint incident reports from all schools to evaluate:
 - The frequency with which particular schools use physical restraint;
 - The training level of personnel involved in incidents requiring physical restraint;
 - The degree to which effective de-escalation techniques and positive behavior supports are used prior to the use of physical restraint;
 - The appropriateness and efficacy of physical restraint techniques;
 - The occurrence of injuries to students or staff;
 - The frequency with which students eligible for special education are subject to physical restraint; and
 - The adequacy of documentation of physical restraint.
- Monthly summary reports will be maintained and documented through the Monthly Discipline Review Meetings conducted with each school team.
- Data collected by the Coordinator of Special Education should be used to identify schools where the repeated use of physical restraint warrants further review of the efficacy of the school's system of positive behavior supports, program of instruction for students with behavioral problems, and training of staff. The Coordinator of Special Education will, as needed, make recommendations to the Superintendent regarding changes in policies or procedures which may be necessary to reduce the emergency use of physical restraint in schools and improve documentation related to such use.
- When a student repeatedly must be restrained, the staff should determine if the interventions are effectively meeting the student's needs.
 - For students with disabilities, it may be necessary to contact the behavior specialist to conduct a functional behavioral assessment, develop or revise the Behavior Intervention Plan, or consider more effective placement options.
 - Staff should also consider consulting with support services to examine additional interventions.

Part 7: Frequently Asked Questions:

Seclusion:

Does the prohibition of seclusion prevent a student from being placed in time-out? No, students can be removed from the instructional activity and placed in another location in the classroom or other instructional setting. A student may be placed in time-out for a short, pre-determined period of time if he/she is not confined in a separate room or isolated setting. The classroom staff should be able to see the child placed in time-out to promote his/her safety. If a student is frequently placed in time-out, the school staff should analyze the behaviors that result in the student being placed in time-out and other interventions should be considered and implemented.

If a student, who is demonstrating behavior that presents an immediate danger to himself/herself or others, requests a break in a different location, is this considered seclusion if another adult is in the room with the student? No, students may use this technique as a form of self-imposed de-escalation.

Does the prohibition of seclusion prevent a student from being removed from the classroom or other instructional setting to another location where the student works with a staff member trained in deescalation techniques? No, students may be removed to another setting such as a staff member's office or another location in the school if he/she can be safely removed to the location.

Does the prohibition of seclusion prevent the use of in-school suspension? No, in-school suspension is not considered to be seclusion.

Doesn't the prohibition of seclusion interfere with my rights as a teacher to remove disruptive students from my classroom? No. Teachers may utilize classroom management techniques, including removing a disruptive student from the classroom. However, the student must not be placed in seclusion.

Restraint:

Could a weighted vest that is intended to address sensory issues in children with sensory integration disorders be used to control behavior or restrict the student's freedom of movement? No. Weighted vests should only be used for the purpose and manner described by a physician, physical therapist, or occupational therapist.

Does this rule prevent a teacher from grabbing a student to prevent the student from entering traffic?

No. The rule's definition of physical restraint specifically excludes limited physical contact necessary to promote student safety. This includes the limited physical contact necessary to prevent the student from entering traffic.

Would a law enforcement officer be allowed to place a student in handcuffs on school property? Yes. Nothing in the restraint and seclusion rule interferes in any way with the duties of law enforcement personnel.

Is there any part of the rule that would prohibit staff from breaking up a fight in the school or educational program? No. School staff must take reasonable actions needed to protect students from harm. Staff may use physical restraints to break up a fight when the students are an imminent danger to themselves or others and the students do not respond to less intensive

interventions. Nothing in the rule prohibits a staff member from defusing a fight or physical altercation.

Should restraints be terminated when the student is no longer an imminent danger to himself or others? Yes. The restraint should be immediately terminated when the student is no longer an imminent danger to himself or others.

Should restraint ever be used as a form of punishment? No. Restraint should only be used in situations in which the student is a danger to himself or others.

Are brief holds (generally less than thirty seconds) which prevent or significantly restrict a student's movement permitted if used to address severe aggressive or self-injurious behaviors? Yes, if the hold is used to reduce severe aggressive or self-injurious behavior which places the student in immediate danger, the student is not responsive to less intensive/restrictive behavior interventions, and the hold technique is founded on evidence-based practices.

Should the use of physical restraint be documented in an Individualized Education Program (INDIVIDUAL EDUCATION PLAN) or Behavior Intervention Plan (BEHAVIOR INTERVENTION PLAN) for students with disabilities? If a student who is eligible for special education services regularly engages in interfering behaviors which also cause the student to be an immediate danger to self or others, it may be appropriate to identify in the student's BEHAVIOR INTERVENTION PLAN particular physical restraint techniques which may be used if the student fails to respond to less intensive/restrictive interventions. This may be appropriate for a student who regularly engages in self-injurious behaviors such as head-banging, hitting, or biting. Identified reductive strategies may include a particular type of hold which prevents or significantly restrict a student's movement provided, however, the use of a particular type of physical restraint would be contraindicated due to the student's psychiatric, medical, or physical condition, a statement to that effect may also be included in the BEHAVIOR INTERVENTION PLAN.

If a physical restraint technique such as a therapeutic hold is identified in a student's BEHAVIOR INTERVENTION PLAN is it necessary to use de-escalation techniques and attempt less restrictive behavior intervention strategies first? Yes. Even if a particular type of physical restraint is identified in a student's BEHAVIOR INTERVENTION PLAN, it cannot be used unless the student is not responsive to less intensive or restrictive behavior interventions, including verbal directives or other de-escalation techniques.

If a student's BEHAVIOR INTERVENTION PLAN permits the use of a reductive strategy to prevent the student from engaging in self-injurious behaviors, is it still necessary to complete an incident

Greene County School District, SPED Implementation Manual rict Created July 2019 110 *report and notify the parent each time the strategy is used?* If the reductive strategy prevents or significantly restricts the student's movement, it is considered a physical restraint and an incident report must be completed. The parent must be notified within a reasonable time not to exceed one school day from the use of the restraint.

Is parent notification required each time there is direct physical contact with a student? No. Only if the direct physical contact prevents or significantly restricts a student's movement is parental notification required.

If a particular type of physical restraint is not identified in a student's BEHAVIOR INTERVENTION PLAN does that mean it cannot be used? Not necessarily. The rationale behind identifying a particular type of physical restraint in a student's BEHAVIOR INTERVENTION PLAN is to identify the restraint technique which the INDIVIDUAL EDUCATION PLAN Team considers to be the least restrictive and most appropriate when the student engages in a target behavior which creates an immediate danger to self or others and the student is not responding to less intensive/restrictive behavior interventions. It is not possible to predict all student behavior and the circumstances in which such behavior may occur. Accordingly, it may be appropriate to use a physical restraint technique which is not identified in the student's BEHAVIOR INTERVENTION PLAN. However, if a particular type of physical restraint would be contraindicated due to the student's psychiatric, medical, or physical condition, it cannot be used.

2.7 Related and Shared Services

Related Services are designed to assist special education students in meeting goals and objectives established by the IEP or 504 team. In order to receive related services students must be found eligible for special education in one or more qualifying eligibility category. Related services should not be added to an IEP or a 504 plan prior to completion of the referral process.

Related Services may include:

Audiology Interpreting Services Occupational Therapy Orientation and Mobility Physical Therapy School Nurse Services Speech/Language Therapy Transportation

Adaptive Physical Education

Adaptive Physical Education (APE) is a direct service that can be provided should the IEP

team determine that the child is in need of such service. APE is an adapted, or modified, physical education program designed to meet the individualized gross motor needs, or other disability related challenges of an identified student. In many cases, but not all, a child my need APE due to being visually impaired, physically disabled, severely cognitively disabled, severely multiply disabled, or other health impaired. APE services can be provided one-on-one, in a small group, or within the general physical education environment. If the IEP determines that the student requires APE the IEP team must develop annual goals and short term objectives for APE. The team must also determine and document in the IEP the frequency, duration, location, and provider of APE services.

Special Education Eligible Categories

Deaf/Hard of Hearing

Visually Impaired

Stand-Alone Eligibility Service – NEGA RESA provides services in two areas of eligibility which students can be served solely by the RESA educational team. These low incidence areas of eligibility include Deaf/Hard of Hearing and Visually Impaired. Referral for these services should typically be conducted in conjunction with a full evaluation (initial or reevaluation). If the IEP team suspects difficulties with vision or hearing, these professionals should be contacted and a referral completed to allow them to fully participate with the team. It is very helpful when RESA professionals are invited to participate in team meetings with students who will be transitioning from Babies Can't Wait or Georgia PINES with vision or hearing difficulties.

Area of General Supervision III: Student Progress <u>Overarching Questions</u>

Indicators: 3: Assessment 7: Preschool Outcomes

Chapter Three: Parent Engagement Overarching Ouestions

Indicators:

8: Parent Involvement 16: Complaint Timelines 17: Hearing Timelines 18: Resolution Session 19: Mediation

3.1 Procedural Safeguards and Parent Rights

Compliance Monitoring Protocols

When a student is referred for special education, a GCSS school psychologist will provide parents with a copy of their Parents Rights and will provide a thorough explanation of these rights. After an initial evaluation and consent, the GCSS provides and explains Parents' Rights to parents at least once annually during the annual IEP meeting. Parents are also provided with their rights in the following instances: upon receipt of a state complaint, upon a request for a due process hearing, upon notification by the GCSS that a child will be removed from his current placement and the removal constitutes a change of placement under the discipline provisions of IDEA and state rules because of a violation of a code of student conduct, upon prior to accessing a child's or parent's public benefits or insurance for the first time, and upon request by the parent. Additionally, parents can be provided with a digital copy of their rights upon request. For each instance in which Parents Rights are offered, GCSS employees document this provision in the GCSS IEP minutes template.

Professional Learning

The GCSS Director of Special Education and/or Coordinator of Special Education provides annual training regarding providing when and why parents will be informed of their rights. Special education staff will provide ongoing professional development as needed during team leader meetings (no less than seven per school year).

Technical Assistance

The GCSS Coordinator of Special Education and School Psychologists are available to provide technical assistance.

Definition of Parent The state of Georgia has adopted the federal definition of parent which includes explanations for "parent," "person acting as a parent," "surrogate parent," and "guardian." (See 34 C.F.R. § 300.30; Georgia Rule 160-4-7-.21(31)). Throughout the rest of this document, the IDEA definition of parent is being used wherever "parent" is referenced.

- "Parent" means a biological parent, an adoptive parent, a person acting as a parent, a legal guardian, a surrogate parent, or a foster parent.
- "Person acting in the place of a parent" means a person such as a grandparent, a stepparent or other relative with whom the child lives, or a person other than a parent who is legally responsible for the welfare of a child.
- "Surrogate Parent" means an individual appointed by the LEA to make educational

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decisions regarding a FAPE of a child with a disability.

• "Guardian" means a person authorized to act as the child's parent and/or to make educational decisions, but it does not mean the State if the child is a ward of the State.

There are some exceptions when a biological or adoptive parent still has legal authority to make educational decisions for the child, and another person is qualified to act as the parent. (See 34 C.F.R. § 300.30(b); Georgia Rule 160-4-7-.21(31)(b)-(c)). School personnel must determine the appropriate person(s) to make educational decisions on behalf of the child. In most instances, this person is the child's parent. The parent receives notice, gives consent, requests mediation, files formal complaints, requests due process hearings, gives or refuses to give permission for release of records, and fulfills all other requirements.

Parent Involvement

Family, school, and community partnerships are defined as parents, children, families, school personnel, and community members communicating and sharing responsibilities to ensure the success of all children. Meaningful partnerships recognize the family as the most important and enduring resource in a child's life. It is especially important for families of children with disabilities to be involved in the educational process that includes eligibility decision making and planning and reviewing the Individualized Education Program (IEP).

Greene County School System encourages parent involvement through periodic parent meetings/trainings focused on understanding their role as a parent of a child with a disability. These meetings/trainings occur at least three times per school year. In addition to these meetings/trainings, the district hosts an annual Parent Expo which brings together community service providers related to finding success with postsecondary outcomes.

Rule: <u>160-4-7-.09</u> (The term "Procedural Safeguards Notice" also refers to the document commonly identified as "Parent Rights")

When Parent Rights Must Be Provided to Parents

A paper copy of Parent Rights will be given to parents at least one time per school year at the annual review, except that a copy shall also be given to parents in the following circumstances:

- 1. Upon initial referral or parent request for evaluation;
- 2. Upon receipt of the first state complaint in a school year;
- 3. Upon receipt of the first request for a due process hearing in a school year;
- 4. Upon notification by the GCSS to the parent of the decision to remove the child from his or her current placement and the removal constitutes a change of placement under the discipline provisions of IDEA and state rules because of a violation of a code of student conduct;

5. Prior to accessing a child's or parent's public benefits or insurance for the first time; and 6. Upon request by the parent.

If requested, the GCSS will provide a copy of Procedural Safeguard/Parent Rights notice by electronic mail.

Content of Parents Rights

Independent Educational Evaluations - If a parent disagrees with the school's evaluation, they may have their child tested by a professional evaluator not employed by the school district,

at public or private expense. Contact the GCSS to find out the procedures for accessing this right. Upon request, the GCSS will provide parents with a list of independent evaluators so that they may choose one to test their child. The GCSS will consider the results of an independent evaluator. The IEP Team uses the results of the test to determine if the child has a disability or needs special education services.

Prior Written Notice

The GCSS will provide prior written notice to parents before the GCSS initiates or changes or refuses to initiate or change the identification, evaluation, placement, or provision of a FAPE for their child.

Parental Consent

The GCSS will obtain informed, written consent from a parent or guardian for each of the following requests:

- to conduct an initial evaluation,
- to conduct a reevaluation,
- before providing initial special education and related services,
- before disclosing any personally identifiable information that is subject to confidentiality.

For these actions, every attempt possible will be made to have an in-person meeting with the parents. In the event that a parent does not attend a meeting or that a parent has a question outside of an IEP meeting, the parent is encouraged to immediately discuss any questions or concerns with the special education case manager or coordinator or to request an IEP meeting for further discussion.

After an initial evaluation and recommendation for special education and related services, the GCSS will obtain consent from the parent before providing any services to the student.

Additionally, once the student is provided with special education and related services, a

parent may revoke consent any time. To revoke consent, a parent must provide the revocation of consent in writing; this revocation will apply to all special education and related services. A parent may not revoke consent for individual services. Once a parent has provided written revocation of consent for special education and related services, the GCSS will provide the parent with prior written notice that includes all required components outlined by the Georgia Department of Education.

Access to Education Records

The GCSS will maintain the confidentiality of information for every student's educational record. Unless otherwise noted by a court order, the GCSSS will assume that both parents of a child have the authority to inspect and review the child's educational records. Parents of a child with a disability are always allowed to request and to review the educational records of their child. These records include:

- Identification Process to determine eligibility,
- Evaluation Nature and scope of assessment procedures,
- Placement Educational placement of the Child, and
- FAPE Provision of free appropriate public education.

Complaint Process

If a parent, or any individual or organization, believes that a violation of the IDEA or the Georgia Department of Education Special Education rules has occurred, they may file a formal complaint with the Georgia Department of Education (GaDOE). A formal complaint investigation is a procedure to determine if the GCSS is complying with federal laws and Georgia laws in relation to the provision of special education and related services to children with disabilities. Once a formal complaint is filed, the investigation is conducted by the GaDOE through the use of qualified, contracted investigators. In addition to the filing the complaint with the GaDOE, the person or party filing the complaint must provide a copy of the complaint to the GCSS. The GCSS will then respond to the complaint; all attempts will be made to respond within 10 business days. When a parent files a complaint, he will have the opportunity to voluntarily engage in mediation with the GCSS to resolve the dispute.

Mediation

Disagreements between a parent and the GCSS can be discussed and resolved through a mediator, a trained impartial third person. The GCSS or a parent can request mediation to resolve disputes. This process is voluntary for each party, so both parties must agree to mediation. Any discussions during the mediation process are confidential and cannot be used as evidence in any due process hearings or civil proceedings. When in mediation with a GaDOE contracted mediators, if an agreement is reached, the written agree is legally binding in state or district courts. If this agreement is not carried out, there may

be a formal complaint filed.

Due Process Hearings

In addition to mediation and the state complaint process, certain disagreements between the parent and the GCSS may be resolved through a due process hearing. Parents or the GCSS may request an impartial due process hearing regarding any matter related to the identification, evaluation, placement, or the provision of FAPE to a student. When an impartial due process hearing request is filed, the GCSS will offer and convene a resolution meeting with the parent and relevant members of the IEP team within 15 days unless the parents and the GCSS agree to waive the meeting or to participate in mediation instead of the resolution meeting. If the resolution meeting, or alternate mediation, does not result in agreement the due process hearing will be held within 45 days after the 30-day resolution period. An impartial due process hearing is conducted as an administrative hearing.

Student Placement during Pending Due Process

In addition to mediation and the complaint process, certain disagreements between a parent and the GCSS may be resolved through a due process hearing. Parents or the GCSS may request an impartial due process hearing regarding any matter related to the identification, evaluation, placement, or the provision of FAPE to a student. When an impartial due process hearing request is filed, the GCSS will offer and convene a resolution meeting with the parent and the relevant members of the IEP Team within 15 days unless the parties agree to waive the meeting or participate in mediation instead of a resolution meeting. When the resolution meeting, or the alternate mediation, does not result in agreement, the impartial due process hearing will be held within 45 days after the 30-day resolution period.

Interim Placements

When a hearing has been requested by the GCSS or a parent, the student shall remain in his or her current educational placement unless the parent and the GCSS both agree to an alternate placement. If the hearing request is filed as an expedited hearing request, the child shall remain in the interim alternative educational setting pending the decision of the Office of State Administrative Hearings' administrative law judge unless the parent and the GCSS agree otherwise. If the hearing is the result of an initial admission to public school, the child shall be placed, with the consent of the parent, in the school program until completion of the hearing proceedings. The current educational placement includes the services provided in the IEP and all related services. Other special circumstances may apply, and for these circumstances the GCSS will review Georgia Rule (160-4-7-.18) to determine the student's status pending a due process hearing.

Private School Placement by Parent

The Individuals with Disabilities Act (IDEA) does not require GCSS to pay for the cost of education, including special education and related services, of a child with a disability at a private school or facility if the GCSS made FAPE available to the child and the parent chose to place the child in a private school or facility. However, for students enrolled in private schools, the school system where the private school is located must include the child in the population of those whose needs are addressed under the IDEA provisions regarding children who have been placed by their parents in a private school.

1. When a child is placed by the parent in a nonprofit private elementary or secondary school, the system where the private school is located must consider the student an eligible child in any provision or consideration of proportionate share of federal funds. There is no individual entitlement to special education and related services when a child is parentally enrolled in a private elementary or secondary school in the circumstances described above.

2. If a child with a disability who has previously received special education and related services from the school system has been enrolled by his parents in a private elementary or secondary school without the consent of, or referral by, the school system due to a disagreement about the provision of FAPE, a court or administrative law judge (ALJ)/hearing officer may require the school system to reimburse the parents for the cost of that enrollment if the court or ALJ/hearing officer finds that the school system had not made FAPE available to the child in a timely manner prior to that enrollment and that the private placement is appropriate.

3. The cost of any reimbursement described in paragraph (2) above may be reduced or denied if: a. At the most recent IEP Team meeting that the parents attended prior to removal of the child from the public school, the parents failed to inform the IEP Team that they were rejecting the placement proposed by the school system to provide a FAPE to the child, including stating their concerns and their intent to enroll their child in private school at public expense; or b. The parents failed, at least 10 business days (including any holidays that occur on a business day) prior to removal of the child from the public school, to give the school system written notice that they were rejecting the placement proposed by the school system to provide a FAPE to the child, including stating their concerns and their intent to enroll their child in private school at public expense; or

c. Prior to the parents' removal of the child from the public school, the school system provided to the parents written notification of its intent to evaluate the child, along with a statement of an appropriate and reasonable purpose of such evaluation but the parents did not make the child available for the evaluation; or

d. Upon a judicial finding of unreasonableness with respect to actions taken by the parents.

4. Reimbursement must not be reduced or denied for failure of the parent to provide notice

Greene County School District, SPED Implementation Manual rict Created July 2019 referred to in paragraph (3) above if:

- a. The school prevented the parent from providing the notice;
- b. The parent had not received his or her notice of rights; or
- c. Compliance with the notice requirements would likely result in physical harm to the child.

5. Reimbursement may, in the discretion of the court or ALJ/hearing officer, not be reduced or denied for failure of the parent to provide notice referred to in paragraph (3) above if: a. The parent is illiterate or cannot write in English; or

b. Compliance with the notice requirements would likely result in serious emotional harm to the child.

Due Process Hearings

In addition to mediation and the state complaint process, certain disagreements between the parent and the GCSS may be resolved through a due process hearing. Parents or the GCSS may request an impartial due process hearing regarding any matter related to the identification, evaluation, placement, or the provision of FAPE to a student. When an impartial due process hearing request is filed, the GCSS will offer and convene a resolution meeting with the parent and relevant members of the IEP team within 15 days unless the parents and the GCSS agree to waive the meeting or to participate in mediation instead of the resolution meeting. If the resolution meeting, or alternate mediation, does not result in agreement the due process hearing will be held within 45 days after the 30-day resolution period. An impartial due process hearing is conducted as an administrative hearing.

Attorneys' Fees

U.S. District Courts can award reasonable attorneys' fees to prevailing parties, whether they are a parent, State Educational Agency (SEA), or local system as part of any settlement of a due process complaint or civil action. Attorneys' fees awarded to SEAs or local systems may only be granted under certain guidelines.

1. The attorney of a parent may be forced to pay the public agency's attorneys' fees when that attorney files a complaint or civil action that is frivolous, unreasonable, or without foundation, or if the attorney continued to litigate after the litigation clearly became frivolous, unreasonable, or without foundation.

2. The parents or their attorney may be forced to pay the public agency's attorneys' fees if the parents' due process complaint or subsequent civil action was presented for any improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation.

3. Not all legal and administrative proceedings and services are eligible for reimbursement. A court may not award attorneys' fees for any services performed subsequent to the time of a written offer of settlement that is made to the parents if:

a. The offer is made in accordance with Rule 68 of the Federal Rules of Civil Procedure, or in the case of an administrative hearing, at any time more than 10 days prior to the hearing;b. The offer is not accepted within 10 days; and

c. The court or administrative hearing officer finds that the relief finally obtained by the parents is not more favorable than the offer of settlement. However, attorneys' fees may be awarded to parents who were substantially justified in rejecting the settlement offer.

4. In addition, IEP Team meetings are not eligible for reimbursement unless the meeting is convened as a result of an administrative proceeding or judicial action, or, at the discretion of the state, for a mediation session.

5. Attorneys' fees for Resolution Sessions are also ineligible for reimbursement.

Provided in Language Understandable to Parents

Upon parent request, the GCSS will provide notice in writing, in the parents' native language, or other principal mode of communication, at a level understandable to the general public.

Parental Opportunity to Review Records

The Family Educational Rights and Privacy Act (FERPA) of 1974 allows parents to inspect and review all of their child's educational records that are maintained by the GCSS. Additionally, IDEA specifies that the GCSS must allow parents to examine all education records that are collected, maintained, or used by the GCSS under Part B of the IDEA. The GCSS will comply within a timely manner and within no more than 45 days when a parent requests to inspect records.

Parental Participation in Meetings

The GCSS includes parents in all decision-making teams for their child. The parents will be included in decisions about eligibility, initial evaluation, reevaluation, development, review, and revision of the IEP, the provision of FAPE, and educational placement. It is not a requirement for parents to be invited to participate in informal meetings involving GCSS personnel or in meetings for professional learning, lesson planning, or service provider coordination. Additionally, parents will not be invited to participate in the meeting to prepare a proposal or response to a parent request that will be addressed at a later meeting.

The GCSS will make all attempts to notify the parents at least 10 days prior to any meeting that

involves the identification, evaluation, and educational placement of their child, and the provision of FAPE to their child. Additionally, the GCSS will work to ensure that the meetings occur at a mutually agreeable time and location. If neither parent can be present in a meeting concerning educational decisions for a child, the GCSS will utilize telephone conferencing and individual conferencing. When needed the GCSS will utilize social workers to visit the parent to provide access to a telephone or to help coordinate transportation. If after at least three concerted, documented efforts the IEP team cannot convince the parent to attend, the meeting can proceed without the parent. Concerted efforts to be utilized include: detailed records of phone calls made or attempted and the results of those calls; copies of correspondence sent to the parents and any responses received; and detailed records of visits made to a parent's home or place of employment and the results of those visits. The GCSS understands the critical role of parent involvement in educational decisions about their child and the impact that the involvement will have on individual services and on the development of a more collaborative relationship with the IEP team. Parent contributions are important and help ensure the educational progress of the child.

Independent Educational Evaluations

The parents of a child with a disability have the right to obtain an independent educational evaluation (IEE) at their own expense, and some instances at the public expense. When requested, the GCSS will provide the parent with information about where to obtain an IEE and the criteria for such evaluations. If a GCSS school psychologist determines that the IEE meets the criteria provided by the GCSS, the results of the evaluation will be considered by the IEP team in any decision related to the provision of a FAPE. Additionally, this evaluation may be utilized as evidence for any due process hearing.

For an IEE to occur at the expense of the GCSS, the parent must request an IEE after an evaluation with which the parent disagrees. The GCSS will provide the criteria for IEEs including the location of the evaluation, the qualifications of the evaluators, and a cost limit for the IEE. However, when applicable, the GCSS will also allow the parents an opportunity to explain the circumstances that warrant an IEE that does not meet GCSS criteria.

If a parent requests an IEE at the GCSS's expense, the GCSS will either pay for the independent evaluation or will begin due process procedures to show that the GCSS evaluation is appropriate. If there is a due process hearing and the GCSS's evaluation is judged to be sufficient then the GCSS will not have to pay for an IEE. Parents are not entitled to an IEE at a publix expense before the GCSSE is allowed to conduct its own evaluation. If the parents do not agree with the evaluation after it occurs, they may then request an IEE at the GCSS's expense. If the parents disagree and request an IEE, the GCSS will ask why the parents disagree, but the parents are not required to provide an explanation. If the GCSS agrees to provide an IEE, the GCSS will provide a list of qualified examiners from which to choose for the IEE, and the GCSS

will work with the parents to find a mutually agreeable evaluator.

Parental Consent

The GCSS is required to obtain informed written consent for each of the following actions : initial evaluation, reevaluation, consent for initial placement, and before disclosure of personally identifiable information that is subject to confidentiality. Parental consent is voluntary and can be revoked at any time.

Initial Evaluation

Reevaluation

Consent for Initial Placement

The LEA is required to obtain informed written consent for each action requested, as outlined below. Parental consent is voluntary and may be revoked at any time. Consent is required for each of the following actions:

- to conduct an initial evaluation;
- to conduct a reevaluation;
- for the initial provision of special education and related services; and
- before disclosure of personally identifiable information that is subject to confidentiality.

If a parent has questions about any proposed actions or changes to the IEP, it is recommended that he or she discuss the questions with the special education teacher or administrator or request an IEP Team meeting for further discussion. Consent for the initial evaluation does not provide consent for initial provision of special education and related services. A parent may revoke consent for the receipt of special education and related services once the child is initially provided special education and related services. This revocation of consent must be made in writing and is for all special education and related services, not for individual services. When a parent revokes consent for special education and related services, the LEA must provide the parent prior written notice including all required components.

Parental Refusal for Consent/Revocation

If a parent refuses to give consent for an evaluation, the GCSS may pursue the evaluation through mediation or a due process hearing. If the child is homeschooled or placed by the parents in a private school at their expense, the GCSS cannot use the mediation or due process hearing procedures to override the parents' refusal for evaluation.

Parent Consent Not Required

The GCSS does not need consent to perform the following routine duties:

- Review existing evaluation information.
- Screen a child to determine appropriate instructional strategies for curriculum

implementation.

• Administer a test or evaluation that is given to all children without consent for that test or evaluation.

3.2 Surrogate Parent State Rule: <u>160-4-7-.11</u>

Compliance Monitoring Protocols

The GCSS will make all efforts to ensure the assignment of a surrogate parent not more than 30 days after a public agency or the LEA determines that the child needs a surrogate parent. The GCSS social worker, Homeless Education Program Liaison, and the Office of Special Education and Student Supports will maintain a list of adults who have been trained as surrogate parents. Special education case managers will ensure that any adult who is acting in the place of a parent or legal guardian has been provided with surrogate training.

Professional Learning

GCSS social worker and the Homeless Education Program Liaison are trained annually on the process for surrogate parent training. They will communicate any needs and any updated information to the GCSS special education staff.

Technical Assistance

GCSS social worker is available to provide support and training to special education coordinators and teachers.

Efforts to Locate Parents

The GCSS will make all efforts to locate the parents of a student served through special education and related services. If a parent or guardian is not able to be reached, or if the legal guardianship status of a custodial adult is in question, the school will make a referral to the school's social worker. School social workers strive to locate and identify parents through home visits, phone calls, and contacts with agencies such as the Department of Family and Children Services and the Probate Court.

Ward of the State

Children in foster care may not require a surrogate if they are placed in a stable foster home and the foster parent is willing and able to provide the parent participation and educational responsibilities as required for IDEA. Many foster parents can act as the parent and do not require a surrogate. However, the GCSS does provide surrogate training to foster parents using the same surrogate parent training so that they are best equipped to protect the child's rights and aid in the decision-making process. Usually, students placed in short term, temporary foster homes, or group homes will need a surrogate parent. Surrogate training is provided by the GCSS social workers.

For a child who is a ward of the State of Georgia, a judge overseeing the child's case may appoint a surrogate parent. The surrogate parent has no financial responsibility or other responsibility for the day to day care of the student. The surrogate parent must protect the child's rights in the educational and decision-making processes, including the identification, evaluation, and placement of the student; follow confidentiality requirements of Georgia Rules and federal law; use discretion in the sharing of information; participate in developing the student's IEP; exercise other rights given to parents under the IDEA and Georgia Rules; not be an employee of the State, the district, or any other agency that is involved in the education or care of the child; have no interest that conflicts with the child he or she represents; and have the knowledge and skills that ensure adequate representation of the child. Volunteer Court Appointed Special Advocates (CASA) are sometimes appointed educational surrogates. The School Social Worker can provide training as needed to an appointed CASA who becomes a surrogate parent at any time throughout the school year.

Homeless Youth

In GCSS, determination of an unaccompanied or homeless youth will be made by the Homeless Education Program Liaison. In cases when an unaccompanied or homeless youth is determined to be in need of a surrogate parent, the Homeless Education Program Liaison will conduct the training of an identified surrogate.

Appointment of Surrogate

A surrogate parent is needed when no parent can be identified; the public agency, after reasonable efforts, cannot locate a parent; the child is a ward of the State; or the child is an unaccompanied, homeless youth as defined by the McKinney-Vento Homeless Assistance Act. Training involves a meeting with the GCSS social worker and the surrogate parent. The social worker shares a powerpoint presentation and discusses the following topics:

- Responsibilities of Surrogate Parents
- What is IDEA
- Categories of Disabilities under IDEA
- Eligibility for services
- IEP meetings

LEA Determines Need

The GCSS will make all efforts to ensure the assignment of a surrogate parent not more than 30 days after a public agency or the LEA determines that the child needs a surrogate parent.

LEA Maintains List

In the GCSS, school social worker, as well as any others who train surrogate parents, is responsible for adding names and contact information to a list of approved surrogates. The list also includes the date that the surrogate was trained and the name of the trainer.

Criteria for Surrogate Parent Selection

Surrogate parents may not be an employee of the State, the GCSS, or any other agency that is involved in the education or care of the child; have no interest that conflicts with the child he or she represents; and have the knowledge and skills that ensure adequate representation of the child. The training provided to surrogate parents ensures that they have the knowledge and skills to help make informed decisions regarding special education matters related to the child. In looking for possible surrogate parents, possibilities include:

- Adult relatives who are involved in the child's life and who would be the best choice for the child's advocate; it is not necessary for the relative to house the child in her home.
- Court appointed special advocate (CASA) volunteers
- Child's attorney or guardian ad litem, when the attorney feels comfortable with this option, or
- Another responsible adult who knows the child.

Surrogate Parent Responsibilities

The surrogate parent must protect the child's rights in the educational and decision-making processes, including the identification, evaluation, and placement of the student; follow confidentiality requirements of Georgia Rules and federal law; use discretion in the sharing of information; participate in developing the student's IEP; exercise other rights given to parents under the IDEA and Georgia Rules; not be an employee of the State, the district, or any other agency that is involved in the education or care of the child; have no interest that conflicts with the child he or she represents; and have the knowledge and skills that ensure adequate representation of the child.

3.3 Dispute Resolution State Rule: 160-4-7-.12

Compliance Monitoring Protocols

When there is a dispute between a parent and the GCSS over the identification, evaluation, placement, or provision of FAPE, a parent or the GCSS can request a due process hearing. For a parent to begin a due process hearing, they must first file a complaint in writing to

the GCSS and to the Georgia Department of Education. For the GCSS to begin a due process hearing, the GCSS will file a complaint in writing to the GaDOE and will also notify the parent. Additionally, other options prior to completing the due process hearing include mediations and Facilitated IEPs.

Professional Learning

The GCSS special education director and coordinators attended a training on conducting Facilitated IEP Meeting, and the team continues to receive professional learning on this process through online training sessions. Additionally, the special education director and coordinators consult with the GCSS contracted attorney when there are litigious matters or questions about legal proceedings.

Technical Assistance

The GCSS Coordinator of Special Education and the Director of Special Education and Behavior Supports are available for technical support. Additionally, the GCSS utilizes an attorney to provide legal assistance for litigious matters.

When the parent and the GCSS disagree over the identification, evaluation, placement, or provision of FAPE, either party may request a due process hearing. An impartial due process hearing is designed to provide an opportunity to resolve differences between concerned parties in the identification, evaluation, placement or provision of a free and appropriate public education for a student with a disability. A hearing may be requested by either the GCSS or the family when the parties cannot agree and other means of dispute resolution have not been successful. A due process hearing must be conducted and the decision issued within 45 days of the request for a hearing. Extensions may only be allowed when both parties agree and the extension does not violate the rights of the student.

When a request for a due process hearing is made, the GCSS and the parents will be asked if they would consider participating in either an Early Resolution Session or mediation prior to the hearing.

Due process hearings are conducted by the Office of State Administrative Hearings (OSAH). Once a request is received by OSAH, an administrative law judge (ALJ) will be assigned to conduct the due process hearing. That ALJ will contact both parties and begin to set up the arrangements for the impartial due process hearing

A. Formal Complaints

1. Procedures for Filing a Complaint

When a parent, or someone working at the parent's request files a complaint, the complaint must be filed in writing and sent to the GCSS and the Georgia Department of Education (GaDOE), Division for Special Education Services (DSES.) The GaDOE DSES has a form available on their website that may be utilized. Additionally, supporting documentation should be provided if available. Once this complaint is received by the GaDOE, a team will determine that the allegation(s) can be investigated and begin its investigation as appropriate. Upon receipt of the written complaint, the GCSS will contact that parent to propose a resolution to the complaint; a copy of the proposal will also be provided to the DSES. If the parent accepts the GCSS's proposal to resolve the complaint, the GaDOE will discontinue the investigation. If the GCSS and the parent do not reach an agreement, the investigation will continue.

In addition to the system having the opportunity to present a proposal, the parent also has the opportunity for a mediation process. Mediation is available to a parent at no cost. Mediation is a non adversarial process conducted by a qualified and impartial mediator who is trained in effective mediation techniques to resolve disputes. If a parent chooses to participate in the mediation process, the complaint investigation may still proceed. The timeline for the complaint may be extended if the parent and the GCSS agree to partake in mediation. If the parties reach an agreement in mediation, a written agreement will be developed and implemented. Mediation is legally binding in a State or District court. If the parties reach an agreement, the complaint will be closed. If agreement is not reached, the complaint investigation will continue and a decision of compliance made by the GaDOE. Within 60 days of the receipt of the complaint, the DSES will issue a written decision to the complainant that addresses each allegation in the complaint and contains findings of fact and determinations of compliance or noncompliance. The timeline may be extended to accommodate for mediation or other exceptional circumstances with respect to a particular complaint. If there is a violation of the law or regulations, then a resolution will be required. The resolution may include technical assistance activities and corrective actions to achieve compliance.

2. Why File a Complaint

Filing a formal complaint gives parents the opportunity to express concerns regarding possible IDEA violations. The DSES will review the complaint and will assist the GCSS and the parent in coming to a resolution. The process is simple and user friendly. Most individuals who file a complaint are not represented by legal counsel.

B. Mediation

1. Procedures for Mediation

Either the parent and the student, or the GCSS may request mediation. The first step is for the parent or the GCSS to ask the other party if they are willing to mediate the disputed issues. If a

parent is requesting mediation, they can contact the GCSS's Special Education Office, and a Special Education Coordinator will complete the request for mediation and submit it to the GaDOE. Upon receipt of the request, Special Education Services and Supports assigns the request to a mediator. The mediator will contact both parties to develop the timeline, set up the meeting location and begin preparation. Mediation will occur at a location and time convenient to both parties. Once parties have agreed to a date and location, participants should be prepared to spend most of the day in mediation. If a resolution is reached, the mediator will facilitate the agreement, and all parties will sign the mediation agreement. After mediation, both parties are expected to carry out the activities they agreed to during the mediation as outlined in the agreement since this is a legally binding document. If mediation is being requested as part of a due process hearing, the mediation will not delay nor deny the right to a due process hearing. However, discussions during mediation cannot be used as evidence in any due process hearing or civil proceeding.

2. Preparing for Mediation

If a parent requests mediation, the parent should be prepared to:

- define the problem and explain any concerns;
- state preferred resolutions;
- share information that will help clarify and resolve the problem;
- listen to the information and the point of view shared by others;
- keep an open mind; and
- brainstorm with the other parties involved and develop a creative solution to the problem.

3. Why Request Mediation

Requesting mediation will give a parent the opportunity to express your concerns regarding possible IDEA violations. Some of the benefits of the mediation process are: confidentiality, voluntary for both parties, occurs in a short period of time, provided at no cost, the process is less burdensome that a due process hearing or a formal complaint and high success rate for resolving issues.

4. Facilitated IEPs (FIEP)

The GCSS offers Facilitated IEP (FIEP) Team Meetings. The GCSS Special Education Director is trained in the Facilitated IEP process, but the GCSS special education staff or a parent can also place a request with the GaDOE for a Facilitated IEP by completing the IEP Team Meeting Facilitation Request and submitting it to the GaDOE at least 10 days prior to the IEP meeting date. Once approved, a facilitator is provided at no cost to the GCSS. The FIEP is a collaborative dispute prevention and resolution process used when members of an IEP team agree that the presence of a third party would help facilitate communication and problem solving. A FIEP can be especially useful when there is a history of communication challenges or a meeting is

expected to be particularly complex or controversial. In a FIEP meeting, an impartial facilitator helps to keep members of the IEP team focused on the development of the IEP while addressing conflicts and disagreements that may arise during the meeting. At the meeting, the facilitator will use communication skills that create an environment in which the IEP team members can listen to each member's point of view and work together to complete the development of a high quality IEP.

C. Impartial Due Process Hearings

For an Impartial Due Process Hearing, the initiating party, either the GCSS or the parent, should inform the other party and the GaDOE of the request for a due process hearing. The GCSS is responsible for relaying the hearing request to GaDOE Special Education Services and Supports on the day the request is received in the system. The GCSS special education staff is available to assist a parent as they complete the request. The request will contain the name of the student, the school in which the system is enrolled, the GCSS, contact information for the family, and contact information for the GCSS. The request will also contain a description of problem and a proposed resolution. Once the GaDOE receives the request, immediate contact will be made with the Office of State Administrative Hearings (OSAH) to assign the case to an ALJ. The ALJ will then contact the parents and the GCSS to begin to set up the logistics of the hearing An expedited due process hearing may be requested if the request is related to a manifestation determination or placement in an alternative educational setting

A due process hearing must be conducted and the decision issued within 45 days of the request for a hearing. If an Early Resolution Session or mediation is to be used, the timeline of 45 days begins at the conclusion of a 30 day resolution period of request or earlier if the meeting does not result in a settlement. Other extensions may only be allowed when both the GCSS and the parents agree and the extension does not violate the rights of the student. In the event of a due process hearing, the GCSS will provide prior written notice within 10 days, or if the GCSS has already provided prior written notice, the GCSS will respond to the due process request within 10 days. If the GCSS feels that the due process request is insufficient, the GCSS will notify that ALJ within 15 days of receiving the request. The ALJ will then have 5 days to determine if the request is sufficient. If sufficient, the timeline moves forward. If not sufficient, the parent must re-file the request. In this case, the GCSS will offer an Early Resolution Session or Mediation the parent. If an Early Resolution is to be used, the GCSS will set up a resolution session within 15 days of receipt of due process request.

4. Procedures and Rights for a Hearing

The hearing will be conducted at a time and place convenient to the parent and the GCSS and in an impartial location. The GCSS will provide the parent/guardian information about low cost or no cost legal services. Parents have the right to request and obtain copies of all records concerning the student from the school system; the request must be made five or more business days prior to a hearing. The GCSS or the parent may be accompanied and advised by legal counsel or another individual with knowledge or training related to the student with disability about whom the hearing is being conducted. Either party may present evidence at the hearing if disclosed to the other party at least five business days prior to the hearing. Either party may compel the attendance of witnesses. One party must provide a list of witnesses to the other party at least five business days prior to the hearing. Both parties will receive a copy of the written record of the hearing. Parents have the right to have the student present at the hearing. Confidentiality of information shall be maintained even when in a hearing. Parents in a hearing have a right to obtain relief that the ALJ determines appropriate, which may include payment for an independent evaluation, reimbursement for services, alteration of the IEP, alteration of the placement, or other relief as determined by the ALJ. An appeal to a due process hearing must be filed within 90 days in a State or District Court.

5. Student Status while under Due Process

When a hearing has been requested by either party, the student shall remain in his or her current educational placement unless the parent and the system agree to an alternate placement. If the hearing is the result of an initial admission to public school, the student shall be placed with the consent of the parent in the school program until completion of the hearing proceedings. The current educational placement includes the services provided in the IEP and all related services.

Chapter Four: Readiness for College and Career

Overarching Questions

4.0 Introduction

Transition services are intended to prepare students to make the transition from the world of school to the world of adulthood. In planning what type of transition services a student needs to prepare for adulthood, the IEP Team considers areas such as postsecondary education or vocational training, employment, independent living, and community participation. For students with disabilities, these choices may be more complex and may require a great deal of planning.

This chapter serves as the procedure manual for developing transition activities and writing compliant transition plans.

Indicators: 1: Graduation Rates 2: Dropout Rates 13: Secondary Transition 14: Post School Outcomes

4.1 Bridge Law

State House Bill 400

Methods for Compliance Monitoring

Implementation of the required components of the Bridge Bill are monitored annually by school counselors and reported to school administration. Each 8th grade student is required to complete and turn in a copy of their Individual Graduation Plan (IGP). The school graduation coaches ensures that students attending GNETS complete and turn in their Individual Graduation Plans (IGP) to school administration.

Georgia's BRIDGE (Building Resourceful Individuals to Develop Georgia's Economy) Act was signed into law May, 2010, to enable middle and high school students to appreciate the relevance of education in regard to future, long-term goals.

- A. Key Components of the BRIDGE Act
 - 1. All GCSS's middle schools students will receive the following:
 - a. Career awareness career interest inventories
 - b. Information to assist students in evaluating their academic skills

and career interests

- c. Regularly scheduled advisement
- 2. All GCSS's high school students will receive the following:
 - a. Career counseling
 - b. Career guidance
 - c. Regularly scheduled advisement
 - d. Information to assist students in successfully completing individual graduation plans in preparation for post-secondary options
- 3. Individual Graduation Plans (IGP)
 - a. Beginning in 8th grade, all GCSS students map out a rigorous academic plan including math, science, fine arts, world languages or career pathway coursework
 - b. The IGP is based on the student's chosen academic and career area
 - c. The IGP is developed in collaboration with parents/guardians, student, school counselor and/or advisor-case manager.

4.2 Transition Procedures

Methods for Compliance Monitoring

It is the responsibility of the GCSS case manager to develop and update transition plans at least annually beginning for students entering high school or by their 16th birthday. The Coordinator of Special Education will review two randomly selected transition plans by December of each school year to ensure plans are compliant with state guidelines. Corrective feedback will be shared with all team leaders as part of our ongoing professional development process.

See also Transition Services under State Rule: 160-4-7-.06 IEP

Transition services are intended to prepare students to make the transition from the world of school to the world of adulthood. In planning what type of transition services a student needs to prepare for adulthood, the IEP Team considers areas such as postsecondary education or vocational training, employment, independent living, and community participation. For students with disabilities, these choices may be more complex and may require a great deal of planning. Transition requires support from multiple sources for the student and his/her family to make choices, develop connections, and access services.

Transition Definition

Transition is the successful transition of students with disabilities from school to post-secondary environments which should be a primary focus of educators who work with these students. The purpose of transition planning is to assist students with disabilities to build the skills and supports they need to successfully reach post-secondary goals. Transition is important in order to prepare students for change, ensure that appropriate steps are being taken to help students become more self-determined.

Transition planning begins at the elementary level and continues through high school. Although there are multiple components, the basis of transition planning includes:

- A results-oriented process which focuses on education and training needed to help students reach their long-term goals
- Facilitates the movement from school to post-secondary activities.
- Based on the student's needs; taking into account preferences, interests, strengths, and skills

IDEA Requirements for Transition Plans

A transition plan must be in place when the student begins ninth grade or turns 16. One can be in place for younger students if determined appropriate by the IEP team and is updated annually thereafter. The IEP must include: (1) appropriate measurable postsecondary goals based upon age appropriate transition assessments related to training, education, employment, and where appropriate, independent living skills, and (2) the transition services (including course of study) needed to assist the child in reaching those goals. Course of study should focus on instructional and educational classes and experiences that will assist the student to prepare for transition from secondary education to postsecondary life and a regular high school diploma. It should relate directly to the student's post-secondary outcome goals and show how the planned course of study is linked to these goals. The course of study should be meaningful to the student's future and motivate the student to reach successful post school outcomes.

The student should be involved in the transition components of the IEP and should be invited to this portion of the IEP meeting. If the student does not attend the IEP meeting, the school system must take other steps including verbal and written input to ensure that the student's preferences and interests are considered before developing the transition aspects of the IEP. It should also be noted that the parent and student should be aware of other agencies that must be invited to help with successful transition planning.

Transition Assessment

A clear understanding of the student's strengths and needs is critical to developing and implementing effective transition plans. The purpose of transition assessment is to help Individualized Education Plan (IEP) teams determine the appropriate courses of study and

community/vocational experiences that the student will need to be successful in post-school goals. Whether a student is interested in pursuing postsecondary education, trade school, employment (supported included) or other activities associated with adult living, assessments will provide valuable information about the student's abilities and deficits.

For further guidance and examples regarding Transition Assessment refer to the following link for the <u>State Transition Manual</u>. The Case Manager will insure that the appropriate Transition Assessments are given to each student that is of transition age or grade, on their caseload. The assessment can include interest inventories, questionnaires, surveys, skills inventories, and interviews. Assessments should include input from students, parents, and teachers and case managers.

It is the expectation of the GCSS that the Transition Assessments are completed at least one month prior to the annual IEP review. Allowing this time will assure that the case manager has all of the information to work on the Transition Plan with the student.

Writing Transition Plans

Case Managers will compile and review Transition Assessment data and progress monitoring for current Transition Goals and Activities with the student. Once those have been completed, the case manager and student will review post-secondary goals for employment, education, and/or independent living and update as needed. Transition goals and activities for the upcoming IEP will be developed by the case manager and student that support the post-secondary goals utilizing all data from transition assessments and checklists.

When writing the Transition Plan in Go-IEP, the case manager must address all areas within the plan. The following sections must include:

Preferences:

Areas of consideration include course of study, post-secondary education, vocational training, employment, continuing education, adult services, and community participation:

- Student's grade and age,
- Diploma track
- Student's interests and preferences (tasks or career related, can include social if it can be linked to a vocational skill)
- Info on courses that the student has taken related to their career interest, or courses that the student can benefit from
- Info on other experiences the student has had related to future goals, or experiences that can be beneficial.

• "According to the Transition Questionnaire..." Should reference any transition assessment that was used which relates.

Post-Secondary Goals:

These goals are to be achieved after graduation and there must be a completion goal for Education and Training and Employment.

Education and Training - Required:

Goals based on academics, functional academics, life-centered competencies or career/technical training needs and job training. Goals should be related to what the student will do to gain more education or training to reach their post-secondary goal:

- Credit recovery to graduate on time
- Intervention classes to improve test scores
- Tutoring and Help sessions when grades fall
- Seeking assistance before course tests
- Functional academic skills in the community
- Measurable ask yourself "How do I know when they have completed this?"

For each post-secondary goal area, transition goals and activities (yearly goals), data will be collected and completed by the IEP review date.

Development of Employment - Required:

Goals based on occupational awareness, employment related knowledge and skills, and specific career pathway knowledge skills. Goal is related to what the student will do to develop their employment skills or greater knowledge of a career:

- Career awareness activities (interest inventories, jobs folder, research, etc.)
- Job Acquisition Skills (applications, interviews, etc.)
- Job Sampling
- Completing chores at home
- Measurable ask yourself "How do I know when they have completed this?"

Community Participation - Team Determined Need:

Goals based on knowledge and demonstration of skills needed to participate in the community (e.g. tax forms, voter registration, building permits, social interactions, consumer activities, accessing and using various transportation mode). Goal is related to what the student will do to increase their involvement in the school or local community, and as a contributing citizen, such as:

- Transportation- knowing and assessing
- Communication/Interaction- engaging with peers
- Consumerism: making purchases, using post office

- Activities: Volunteering, clubs and sports, etc.
- Civic duties: Taxes, voting, selective service, legal status to work
- Measurable ask yourself "How do I know when they have completed this?"

Adult Living Skills/Post School Options - Team Determined Need:

Goals based on skills for self-determination, interpersonal interactions, communication, health/fitness, and the knowledge needed to successfully participate in Adult Lifestyles and other Post School Activities (e.g. skills needed to manage a household, maintain a budget, and other responsibilities of an adult). Goal addresses the student's need to improve areas such as:

Self-advocacy- knowing disability, speaking up for oneself, expressing strengths and weaknesses, making preferences known

- Home Living Skills- independently caring for chores and other activities as assigned, following a schedule and calendar, etc.
- Health/Fitness- care that is critical to reaching post-secondary goals
- Adult responsibilities- making appointments, keeping schedule of important dates
- Finances- checking and savings account, paying bills
- Meal Prep- Planning, shopping for, and preparing meals.
- Measurable ask yourself "How do I know when they have completed this?"

Daily Living Skills - Team Determined Need:

Goals based on adaptive behaviors related to personal care and well-being to decrease dependence on others. (Broad based goals that focus on the carrying out of a task independently- NOT the teaching of a new skill). Goal is related to what the student will do to increase independence or appropriate behaviors, such as:

- Hygiene, Toileting, Initiation, Cleaning
- Measurable ask yourself "How do I know when they have completed this?"
- Activities clearly spell out the actions needed.

Developing Transition Activities

The statement of transition services includes a multi-year plan of strategies and activities that will assist the student to prepare for post-secondary activities such as post-secondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, and community participation.

For each goal listed in the transition plan, there must be at least one activity or strategy selected to assist the student in completion of the goal. IEP teams should specify the

expected date of implementation. The dates of implementation can be from the date of the IEP meeting to any date prior to the student's expected date of high school graduation. The Case Manager is responsible for arranging, providing and/or implementing each activity or strategy. When others are involved in the transition process, the case manager should also share the specific responsibilities and monitor continual progress (student, parent, school staff, etc.). If other individuals are involved in monitoring the transition plan, they must attend the IEP meeting when the plan is developed.

Data and progress notes on goals should be documented in the IEP. Progress Notes should remain in the plan from year to year, as to create a fluid log of information from year to year.

4.3 Community-Based Instruction

Community-Based Instruction (CBI) is an effective instructional method for teaching, in real-life settings and under the supervision of educators, the skills that students will need for functional daily living as productive adults. In the short term, CBI helps students develop age-appropriate skills for functioning outside the school environment. Ultimately, CBI prepares students for successful transition to adulthood after graduation, helps students to live independently, and enhances their quality of life.

Method for Compliance Monitoring

Students are strategically placed at job training sites matched to their abilities and interests. These sites are carefully selected based on accessibility, skills required, social atmosphere, safety factors, opportunities for interaction, and environmental stimulation. When a student is placed at a job site, a teacher or paraprofessional instructs and supervises students on tasks as they learn skills in the "real world" where they will be used. The community becomes their real-world classroom. All CBI job sites and transportation requests are reviewed and approved by the Coordinator of Special Education.

DEFINITION AND PURPOSE OF COMMUNITY BASED INSTRUCTION

CBI is designed to be a hands-on program and is often implemented during trips to community locations. "Locations, such as 'community' or 'campuses,' are appropriate for services such as community-based instruction or orientation and mobility training." A critical component of CBI is the involvement of other members of the community such as businesses, teachers, and local establishments. Students with disabilities have special needs because of their wide range of learning abilities and performance. These needs are best met through direction instruction in settings where the students live, work, and play and will most likely live in the future. The local community offers many opportunities for these students to learn skills necessary for participation in the natural environment. It is with this philosophy that the GCSS supports community–based instruction.

Community-based instruction has been found to be an appropriate instructional intervention for individuals with disabilities.

Community-Based Instruction:

- enhances general functioning in non-school environments (home, community, recreational, workplace)
- increases the number of integrated environments available to studentS enhances social contacts and relationships
- increases skill acquisition
- promotes independence
- provides access to meaningful choices and opportunities
- gives the general public the experience of interacting constructively in natural environments with individuals who have disabilities
- contributes to the dignity and human rights to which all individuals are entitled

PROCEDURES FOR COMMUNITY BASED INSTRUCTION

Guidelines for CBI (Kregel, 1997)

- Instruction should focus on activities not isolated skills. For example, shopping may include choosing a store, trying clothes on, selecting an article of clothing, and finally paying for the item.
- Instruction should take place at the time of day at which the task is usually performed.
- When possible, the student should spend the majority of time with his or her same-aged peers.
- The length of time between instructional sessions will vary depending upon student needs and the task to be learned. For example, some students may be able to acquire community skills when instruction occurs once a month, once a week, or several sessions per week.

On and Off Campus Emergency Plans

- All staff members involved with Community-Based Instruction will become familiar with the following information. In case of emergency situations in the community, the major concerns are:
 - Supervision and safety of all students
 - Notifying proper authorities with clear, and concise information

- Before leaving campus, all procedures for Community-Based Instruction will be followed along with these precautions:
 - Each student will have on her/his person an identification card, which gives personal information.
 - Sign-out procedures should be determined at the beginning of the year with the building administrator.
 - An administrator should be selected as a contact in case of emergencies. An alternative person should also be identified.
- An emergency packet should be placed in the office, or in a readily available location, which contains the following items:
 - Student information form with emergency medical informatioN
 - List of all community instruction sites

Glossary Definitions (glossary of common terminology) State Rule: <u>160-4-7-.21</u>

CBI Program for Students with Intellectual Disabilities: The special education program for high school students with disabilities who are significantly cognitively disabled and are in Mild, Moderate or Severe and Profound classes. Students require a significantly modified, integrated curriculum based on functional life skills instead of the general education curriculum with/without support. They earn Carnegie Units/Access credits which along with other requirements lead to a regular education diploma.

Accommodation: A change in instruction or setting that enables students to demonstrate their abilities in the classroom or an assessment/test setting. Accommodations are designed to provide equity, not an advantage, for students with disabilities. Accommodations include assistive technology as well as alterations to presentation, response, scheduling, or settings. When used appropriately, they reduce or even eliminate the effects of a student's disability but do not reduce or lower the standards or expectations for content. Accommodations that are allowed and appropriate for assessments do not invalidate assessment results.

Adapted Physical Education (AdPE): AdPE is physical education that has been modified so that students with disabilities who are unable to participate in regular PE can participate in a modified or adapted PE.

Alternative Teaching: A co-teaching model used in a class when several students need specialized instruction. One teacher takes responsibility for the large group while the other teacher works with the smaller group.

Applied Behavior Analysis (ABA): ABA is a scientifically designed teaching method that utilizes rewards to teach specific behaviors and skills and reduce unwanted behaviors.

Assistive Technology (AT): The systematic application of technology, engineering methodologies, or scientific principles to meet the needs of, and address the barriers confronted by persons with developmental disabilities in areas including education, employment, supported employment, transportation, independent living, and other community living arrangements.

Assistive Technology Device: Any item, piece of equipment or product system, whether acquired commercially off the shelf, modified or customized that is used to increase, maintain, or improve the functional capabilities of students with disabilities. Low and high technology devices may be purchased, constructed or modified to meet the student's needs. Examples of commonly used devices are a pencil grip, Boardmaker, specialized software, or low or high voice output devices.

Attention Deficit Hyperactivity Disorder (ADHD): A condition in which a child exhibits signs of

developmentally inappropriate hyperactivity, impulsivity, and inattention. These characteristics are usually present before the age of 7. ADHD is similar to "Attention Deficit Disorder" except emphasis is place on the hyperactivity. The appropriate terms are ADHD-predominately inattentive type or ADHDpredominantly hyperactivity type. There is no longer an ADD diagnosis.

Autism Spectrum Disorder (AU): A developmental disability caused by a physical disorder of the brain appearing during the first three years of life. Symptoms include disturbances in physical, social and language skills; lack of eye contact; abnormal responses to sensations; and abnormal ways of relating to people, objects and events; unusually high or low activity levels; insistence that the environment and routine remain unchanged; little imaginative play, and repetitive movements such as rocking and spinning, head banging, and hand twisting.

Autism Small Group Class: Students with Autism Spectrum Disorder demonstrate deficits in the areas of communication and socialization. They may require a setting in which the principles and procedures of Applied Behavior Analysis are utilized. The classroom environment should be equipped with minimal visual and auditory distractions, boundaries clearly defined, schedules displayed, transition cues utilized, workstations labeled and organized, and student specific data should be evident. Students participate in direct instruction, discrete trial instruction, functional skill instruction, independent work, or natural environment teaching.

Autism Spectrum Disorders (ASD): Students with ASD exhibit evidence of delay, arrests or inconsistencies in developmental rates and sequences in motor, sensory, social cognitive or communication skills. Difficulties may also exist in social interaction and participation, and the use of verbal/nonverbal language, especially for social communication and lack of eye contact. Unconventional, unusual, or repetitive responses to sensory stimuli may also be evident. The student may display stress over changes and/or engagement in repetitive activities.

Behavior Checklists: Objective protocols that permit an observer to count or check for the existence or absence of a given behavior or set of behaviors through direct observation of the student being evaluated.

Behavior Intervention Plan (BIP): An individual plan for a student with disabilities exhibiting behavioral difficulties. The Behavior Intervention Plan is based upon the results of a Functional Behavioral Assessment and should have positive interventions, supports and other strategies to address challenging behaviors and enables the student to learn socially appropriate and responsible behavior in school.

Behavior Management/Modification: To develop, strengthen, maintain, decrease or eliminate behaviors in a planned or systematic way.

Campus Based Skills Training (CBST): The Campus Based Skills Training Program is for Transition Academy (TA) students who do not qualify to go into the Community for skills training and the seniors in the Moderate program who should be rising Transition Academy students in Access classes. Students engage in age-appropriate, vocationally related tasks on campus which are supervised and developed by

the Transition Specialist assigned to that school. The Access teachers have the option of including all their students in their campus program, but the Campus Based Liaisons are responsible for **only** the seniors who should be rising TA students or students who are aging out.

Collaborative classes: The special education teacher collaborates with two teachers during the same class period to provide specialized instruction and implement the accommodations and modifications required in the students' Individual Educational Programs (IEPs) and Individual Learning Plans (ILPs). The special education teacher participates in each class an average of one-half the segment each day per week according to the needs of the students and class activities. The special education teacher incorporates the specialized instruction for each student with disabilities into the class lesson plans. The special education teacher collects data to modify instruction as needed and to monitor student progress on IEP goals and objectives.

Community Based Instruction (CBI): Community-Based Instruction is an instructional model that provides students with intellectual disabilities an opportunity to learn and practice functional skills across a variety of community settings. It allows educators to present curriculum content in natural settings while addressing deficits in generalization. All objectives and activities selected for instruction in the community are coordinated with classroom instruction. This allows for skills to be taught simultaneously, both in the classroom and the community, thereby giving multiple opportunities for practicing and generalizing functional skills. CBI transportation is provided for intellectual disabilities classes from once per quarter to once per month with Transition Academy students going more often. 3 Created May 2011

Community-Based Skills Training (CBST): An instructional model used in the Transition Academies which uses community settings as an extension of the classroom. Community-based instruction provides the opportunity for the student to learn, develop, and/or practice independence skills directly in the settings in which performance is required. Non-paid job sites are developed with partnering businesses by the Community Based Skills Manager and participating students are enrolled in the Transition Academies.

Conduct Disorders: A diagnosis in the DSM-IV, conduct disorders that describe anti-social patterns of rule-violating behavior, often directed with the intent to harm others or property. Some authorities describe conduct disorders as failing to have an emotional basis and describe those who have conduct disorders as making a conscious choice to engage in the behaviors, thereby differentiating conduct disorders from emotional disturbances. Such behaviors may include overt physical aggressions, disruptiveness, negativism, irresponsibility, and defiance of authority.

Confidentiality: The process of keeping records for students with disabilities private and confidential. Parents and school district representatives with a "legitimate educational interest" are entitled to access a student's records. The school special education file should be maintained in a secure location and include all evaluations, eligibility reports, IEPs and other special education records. The Central Office Records Room maintains all original documents prepared on individual students. Confidentiality is also extended to certain mediation and settlement agreements and to the discussion in those meetings. Confidentiality also includes classroom observations and the names of other students in the classroom.

Continuum of Service: The range of placements required to be available, as appropriate, for the education of students with disabilities including regular classroom; regular classroom with direct service: consultative, co-teaching, or collaborative; small group classes; special classes within a school or center location; home based instruction; and instruction in a hospital or residential setting.

Consultative: Students with disabilities receive their instruction with accommodations or modifications as required in their IEPs from the General Education Teacher in a regular education class. Special Education provides direct support by consulting with the General Education Teacher and the student for a minimum of one segment per month.

Co-Teaching classes: An instructional delivery model in which the special education teacher collaborates with one general education teacher for the entire class period on a daily basis. The special education teacher and general education teacher share responsibility for planning, delivery, and assessment of the instruction for all students in the class. The special education teacher incorporates specialized instruction for each student with disabilities into the class lesson plan. The special education teacher delivers the specialized instruction according to students IEPs through flexible grouping with the general education teacher. The special education teacher collects data to modify instruction as needed to maximize student achievement and to monitor students' progress on IEP goals and objectives.

Curriculum Guide for Students with Intellectual Disabilities: A year long instructional plan specifically designed for classrooms of students with intellectual disabilities that aligns instruction to standards in a way that allows the teachers to align multiple grade levels in a planned, systematic process that will meet GAA and IEP requirements. A guide has been designed for each level – elementary, middle school and high school. Teachers have the flexibility to substitute specific standards/elements within content areas, but must still have a one year curriculum plan incorporating all grade levels and content areas. The guide provides a structure for integrated unit instruction as defined by the Georgia DOE.

Deaf/Hard of Hearing (D/HH): A category of disability describing a hearing loss sufficient to cause difficulty hearing and understanding language and so impacting educational access and learning. Students who are deaf/hard of hearing may require the services of the DHH teacher.

Developmental Disability (DD): A disability or impairment originating before the age of 18 which may be expected to continue indefinitely and which constitutes a substantial impairment. The disability may be attributable to an intellectual disability, cerebral palsy, epilepsy, or other neurologic conditions and may include autism.

Differentiation: Differentiated instruction occurs when the teacher proactively plans varied approaches and methods to what students need to learn, how they will learn it, and how the students will present what they have learned. Differentiation increases the possibility that each student will learn as efficiently as possible and achieve to the maximum of their potential.

Direct Parent Referral: The process which occurs when parents request that their child by-pass the

tiered intervention process (RTI) and be referred directly to Special Education for eligibility. The tiered intervention process is a problem-solving model that organizes school intervention services for students who are not meeting academic or behavioral expectations. The RtI process also helps identify which students respond favorably to the interventions and which students may need referral to special education. Parents should not be encouraged to bypass this valuable process. A Direct Parent Referral is used only when parents feel that their child is a child with a disability and requires special education services. Determination of eligibility may or may not require a psycho-educational evaluation. Direct Parent Referral does not circumvent the requirement of documentation of interventions implemented in the classroom and progress monitoring as a component of eligibility for special education, but does require that the evaluation/eligibility process begin and be completed within a 60-day evaluation period.

Discrete Trial Instruction (DTI): Discrete Trial Instruction describes a one to one adult to student instructional technique that teaches skills in a planned, controlled and systematic manner to students with autism. DTI is used when a student needs to learn a skill but requires the information to be taught in small repeated systematic steps. DTI is an adult directed activity. It is applied during an adult to student, one to one teaching situation. Each trial or teaching opportunity has a definite beginning and end, thus the descriptor discrete trial. DTI incorporates the principles of Applied Behavior Analysis and is the direct teaching of skills that individuals with autism may not learn naturally.

Due Process Hearing: A formal legal proceeding presided over by an impartial public official who listens to both sides of the dispute and renders a decision based upon the law. A parent of a student with a disability who disagrees with the school system must put his/her request for a due process hearing in writing to the Office of Special Education and Student Supports.

Emotional and Behavior Disorder (EBD): A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree which disrupts the child's or adolescent's educational, academic, or developmental performance: An inability to learn which cannot be explained by intellectual, sensory, or health factors; an inability to build or maintain satisfactory interpersonal relationships with peers or teachers; a general pervasive mood of unhappiness or depression; or a tendency to develop physical symptoms or fears associated with personal or school problems.

Eligibility Team: The educational professionals who determine a student's eligibility for special education services, including a school psychologist, special educator, general educator, related support staff and parents. Other professionals may be included as needed.

Evaluation: The collection of information (includes testing, observations, and parental input) about a student's learning needs, strengths, and interests. The evaluation is part of the process of determining whether a student qualifies for special education programs and services.

Extended School Year Services (ESY): A term referring to the school program for students with disabilities that extends beyond the regular school year. An IEP committee reviews data which indicates progress on goals/objectives and determines if ESY services are required as part of the student's Free and Appropriate Public Education (FAPE). The intent of ESY is to prevent significant regression which

compromises the student's ability to make meaningful progress on the IEP, therefore, not providing the student with FAPE. ESY is not provided to guarantee mastery of goals/objectives.

Flexible Grouping: The models of co-teaching used by the general education teacher and special education teacher to deliver instruction in a co-teaching class. The models include Parallel Teaching, Station Teaching, Alternative Teaching, and Team Teaching.

FM Amplification System: A system in which the teacher wears a microphone and an FM Transmitter that broadcasts his/her voice to receivers used by students. The receiver may be either attached directly to a hearing aid, other personal amplification device, or in a desktop device with speakers. These devices allow students amplified access to the teacher's voice.

Free Appropriate Public Education (FAPE): A key requirement of federal legislation (IDEA) which requires that special education and related services be provided to all students with disabilities. The following requirements must be met: (a) Are provided at public expense, under public supervision and direction, and without charge; (b) Meet the standards of the state board of education and the laws pertaining thereto; (c) Include preschool, kindergarten, elementary school, and secondary school education; and (d) Are provided in conformity with an individualized educational program (IEP).

Full Time Equivalency (FTE): FTE reporting is the way Georgia's local school districts earn their State funding for education. This process is based on the student enrollment and the specific educational services that are provided to students. Special education services earn higher funding "weights" than general education services to students. The special education teacher should be aware that both the students' service information (entered in the Infinite Campus data system) and their academic schedules directly impact the FTE counts and the State funding the district receives. The special education leadership staff coordinates the process with special education teachers to assure the accuracy of the FTE count in each school.

Functional Behavioral Assessment (FBA): An assessment to determine the function of a student's disruptive behavior through an analysis of the antecedents and consequences surrounding the behavior. Specific functions of behavior could include escape (i.e., getting out of an assignment) or attention (either peer or adult). A Functional Behavioral Assessment is the initial step in the development of a Behavior Intervention Plan.

Functional Curriculum: A curriculum model for students with moderate and severe disabilities. Content is selected based on identified skills needed for functioning in current and future integrated community, residential, and vocational environments. The instruction for students in the moderate and severe/profound classes is based on the Curriculum Guide for Students with Intellectual Disabilities . 6 Created May 2011

Georgia Alternate Assessment (GAA): A computer based assessment designed by the GaDOE for students with significant cognitive disabilities under the Individuals with Disabilities Education Act (IDEA) whose IEP team has determined they are unable to reasonably participate in the regular assessment program. The purpose of the GAA is to ensure all students, including students with

significant cognitive disabilities, are provided access to the state curriculum and given the opportunity to demonstrate progress toward achievement of the state standards.

Georgia Network for Educational and Therapeutic Support (GNETS): The GNETS program supports local school systems' continuum of services by providing comprehensive special education and therapeutic support for students whose behavior severely impedes their learning. The programs provide comprehensive educational and therapeutic support services to students who might otherwise require residential or other more restrictive placements due to the severity of one or more of the characteristics of the disability category of emotional and behavioral disorders (EBD).

Goals and Objectives Probes: Data that is collected on IEP goals and objectives on a regular basis and is reported to parents on the same schedule as report cards or progress reports for general education students.

Go IEP: The web-based special education data management system used to manage the IEP process and other program and state reporting requirements to ensure compliance with FAPE and IDEA as well as develop a quality education plan for GCSS's students with disabilities. The application is integrated with GCSS's data warehouse, student information and transportation systems.

Hard of Hearing: A term to describe individuals who have some amount of hearing loss, but still rely on hearing and listening to communicate and learn.

Home Based Services (HB): Instructional services provided by a Special Education Home Based teacher to students with disabilities who are unable to attend school because of extensive suspensions or the student's medical condition is a part of or related to his/her eligibility. The IEP team determines that the student should receive educational services, then further determination is made for either Hospital/Homebound or Home Based services. The Special Education Coordinator should be contacted when services are required. See Hospital/Homebound.

Hospital/Homebound (HHB): Instructional services made available to students who are able to participate in educational instruction but who are medically unable to attend school for a minimum of ten consecutive days or equivalent on a modified calendar, or intermittent periods of time throughout the school year. If the student's medical condition <u>is not</u> a part of or related to his/her eligibility, then services would be provided through Hospital/Homebound services. The School Counselor should be contacted. See Home Based Services.

Inclusion: The process of educating students with disabilities in the general education setting with nondisabled peers. Students receive specialized instructional services through a consultative, collaborative or co-teaching model.

Individualized Educational Program (IEP): A written plan for each student with a disability that is developed by a team of professionals (teachers, therapists, psychologist, etc.) and the child's parents. IEPs are based on a multidisciplinary evaluation, describe the student's current level of academic achievement and functional performance and how the student's disability affects his/her involvement

and progress in the general education curriculum. The IEP includes special education and related services the student will need to make progress toward the annual goals. The IEP must be reviewed regularly and updated at least annually.

IEP Team: The team of professional educators and parents/guardians who develop and monitor a student's Individualized Educational Program. The team is required by state law to include members who have the role of a special education teacher, general education teacher, evaluator, Local Education Agency (LEA) representative, and parent/guardian. Other specialists and the student should be included as appropriate.

Individual Learning Plan (ILP): A document used for instructional planning purposes that allows teachers to design instruction that meets each student's individual learning needs. It is developed for each student with a disability by the case manager using data from the student's IEP, eligibility report, psychological report (if applicable), and other sources as appropriate. The ILP contains the student's processing strengths and deficit areas, levels of functioning, learning styles, and effective research-based strategies that will support the student in maximizing his/her achievement.

Individuals with Disabilities Education Act (IDEA): The federal law that was enacted to ensure that all students with disabilities have available to them a free appropriate public education (FAPE) that emphasizes special education and related services designed to meet their unique needs and prepare them for employment and independent living; to ensure that the rights of students with disabilities and their parents are protected; to assist states, localities, educational service agencies, and federal agencies in providing for the education of students with disabilities; and to assess and ensure the effectiveness of efforts to educate students with disabilities.

Individualized Transition Plan: The plan developed by teachers, parents, and the student at age 14 as part of the IEP which specifies the education, training, and employment activities that will occur to prepare the student for postsecondary education, work, leisure, and independent living after leaving school. The Transition Plan is required by law for students with disabilities at the IEP meeting before the student turns 16 years old.

Intellectual Disability (ID): Intellectual functioning based on multiple sources of information documenting IQ scores below 70. There is evidence of significant limitations in the child's effectiveness in meeting standards of maturation, learning, personal independence or social responsibility, and especially school performance. The student's adaptive behavior in school and home is significantly below average.

Interim Alternative Education Setting (IAES): An educational placement designated by the IEP team for a special education student after involvement in a weapons or illicit substance violation at school. The IAES can be determined from a number of options including alternative school placement or afterschool program placement and have a duration of 45 calendar days.

Least Restrictive Environment (LRE): The policy mandated by IDEA that students with disabilities be educated in the general school environment with their nondisabled peers to the greatest extent possible.

Local Education Agency/ **LEA Representative:** The law defines LEA Representative as a representative of the local educational agency who:

• is qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of children with disabilities

- is knowledgeable about the general education curriculum; and
- is knowledgeable about the availability of resources of the local educational agency;

Low Incidence Classes - Mild (MID), Moderate (MOID), Severe (SID), and Profound (PID):

Students with intellectual disabilities are usually served in a small group classroom for a part of or majority of the school day. Students are 8 Created May 2011

mainstreamed into designated general education classes whenever possible for enrichment depending on cognitive and achievement levels and areas of interest. Instruction is aligned to the GA Performance Standards (GPS), based on the Curriculum Guide for Students with Intellectual Disabilities and specialized to meet the cognitive and developmental needs of students with emphasis on daily living skills.

Manifestation Determination Review (MDR): School personnel may remove a student with a disability who violates the district code of student conduct from his or her current placement to an appropriate interim alternative educational setting, another setting or suspension, for not more than 10 days in a school year. After the student has been removed for 10 days in the school year and the student again violates the code of student conduct, a Manifestation determination meeting must be held to determine if the conduct in question was caused by, or had a direct and substantial relationship to the child's disability or if the conduct was the direct result of the LEA's failure to implement the student's IEP. If the violation was deemed a manifestation of the student's disability, a Functional Behavioral Assessment and Behavioral Intervention Plan must be conducted, or revised if already in place, and the student should be returned to the placement from which the student may be suspended, but the IEP team must determine appropriate services needed to provide FAPE so as to enable the student to continue to participate in the general education curriculum in the same setting, another setting or interim alternative educational setting.

Mediation: An informal process for resolving disputes between parents and schools. Mediation sessions are conducted by an impartial neutral third party at no cost to parents or school districts.

Mild Intellectual Disability (MID): A mild intellectual disability is defined by the GADOE as intellectual functioning ranging between an upper IQ limit of approximately 70 to a lower IQ limit of approximately 55; deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility, and especially school performance that is expected of the individual's age level and cultural group.

Moderate Intellectual Disability (MOID): A moderate intellectual disability is defined by the GaDOE as intellectual functioning ranging from an upper IQ limit of approximately 55 to a lower IQ limit of approximately 40; and deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility, and

especially school performance that is expected of the individual's age-level and cultural group.

Modifications: Refers to alterations in curriculum that change, lower, or reduce learning expectations and outcome. Modifications can increase the gap between the achievement of students with disabilities and expectations for proficiency at a particular grade level. Consistent use of modifications could adversely affect students throughout their educational career. Modifications in Statewide assessments may invalidate the results. The use of modifications exposes the student to the entire curriculum, but only partial mastery is expected.

Multidisciplinary Team: A team of professional educators with various areas of expertise who evaluate, provide educational services for students with disabilities, and are responsible for specific program design and implementation.

Nursing: The nurse serves as a liaison among family, community health providers, educators and other school personnel, to assure that the special health care needs of students with Individualized Education Plans (IEPs) are addressed in the school. Special education nurses perform skilled medical procedures that require a licensed nurse. Special education nurses provide competency-based training to school staff for delegated healthcare procedures.

Occupational Therapy (OT): An occupational therapist uses purposeful, goal directed activities and task analysis to enable children with a disability to benefit from their Individualized Education Plans (IEP's). Occupational Therapists in the school setting address skills which may interfere with a student's educational performance such as hand function, oral motor function, visual motor and perceptual skills, sensory awareness/processing, self-care and pre-vocational 9

tasks. These areas can be addressed through a variety of intervention strategies, which may include direct therapy with the child, consultation with the teacher, modification of the environment, provision of adaptive equipment, and staff training.

Oppositional Defiant Disorder (ODD): The covert display of underlying aggression by patterns of obstinate, but generally passive behavior. Students with this disorder often provoke adults or other children by the use of negativism, stubbornness, dawdling, procrastination, and other behaviors.

Orientation & Mobility (O&M): This term refers to the teaching and training of skills to a blind/visually impaired student that will familiarize him/her with surroundings and enable him/her to travel safely and independently throughout the environment.

Orthopedic Impairment (OI): Disorders that are caused by congenital anomalies such as deformity/absence of limb, disease such as muscular dystrophy, etc, or other causes such as cerebral palsy, amputations, etc. Evidence of deficits in academic functioning, emotional development, adaptive behavior, motor or communication skills may exist.

Other Health Impaired (OHI): Chronic or acute health problems documented with a medical report that indicates limited strength, vitality or alertness which adversely affect a student's educational performance. Evidence of deficits in academic functioning, adaptive behavior, social/emotional

development, motor or communication, motor skills or emotional development exists.

Parallel Teaching: A co-teaching model in which the general education teacher and special education teacher are teaching the same content to different groups, but present the instruction in a different way depending on student needs. Flexible grouping allows simultaneous teaching.

Paraprofessional/Para: Support personnel assigned to support students with disabilities under the leadership of a special education teacher.

Parent Mentors: Parents of children with disabilities who are employed on a part-time basis by the GCSS as Special Education Parent Mentors. The goal of the Parent Mentor Program is to nurture communication among parents and educators, ultimately leading to greater success for students with disabilities.

Partial Participation: The curriculum and instructional approach for students with moderate and severe disabilities which allows them to participate in a general education class or other school setting for the purpose of enrichment and the development of curriculum objectives which target participation within a task in lieu of the ability to independently perform the task. The general education teacher is not responsible for grades or the achievement level of students with moderate or severe disabilities who partially participate in their class. The student receives special education support as required in the IEP.

Pervasive Developmental Disorder (PDD): The umbrella term used in DSM-IV which includes subcategories of Autism Spectrum Disorders, i.e. ,Childhood Autism, Asperger's Syndrome, Rett Syndrome, Childhood Disintegrative Disorder, and Pervasive Developmental Disorder-Not Otherwise Specified.

Physical Therapy (PT): School-based physical therapists assist students with disabilities to access their education. This includes activities of a school day such as moving throughout school grounds, sitting, standing in line or at the board, moving in class or through the building. Interventions may include adaptations to school environments, working with a student on motor skills, assistance with identifying and obtaining special equipment, collaboration with other professionals, and training school staff.

Positive Behavioral Interventions and Supports (PBIS): PBIS is an evidence-based, data-driven framework proven to reduce disciplinary incidents, increase a school's sense of safety and support improved academic outcomes. The premise of PBIS is that continual teaching, recognizing and rewarding of positive student behavior will reduce unnecessary discipline and promote a climate of greater productivity, safety and learning. PBIS schools apply a multi-tiered approach to prevention, using disciplinary data and principles of behavior analysis to develop school-wide, targeted and individualized interventions and supports to improve school climate for all students. Implementing PBIS can be a proactive strategy for teaching pro-social school-wide behaviors.

Picture Exchange Communication System (PECS): A picture exchange communication system is a form of augmentative and alternative communication (AAC) that uses pictures instead of words to help children communicate. PECS was designed especially for children with autism who have delays in speech

development.

Psychological Report: A written report of the results of an evaluation conducted by a school psychologist that identifies student strengths and weaknesses and offers recommendations the student may need to be successful.

Related Services: Services required for a student to benefit from special education. Related services may include transportation and supportive services such as speech, audiology, psychological services, physical and occupational therapy, and interpreters for persons with hearing impairments.

Response to Intervention (RtI): A tiered intervention process which is a problem-solving model that organizes school intervention services for students who are not meeting academic or behavioral expectations. The model provides high quality instruction and intervention matched to individual student needs, monitors progress frequently, and applies student response data to educational decisions. The RTI process progresses from universal to intensive interventions. This process also helps to identify which students respond favorably to the interventions and which students may need referral for consideration under Section 504 or special education.

Revocation of Parental Consent for Placement: On December 1, 2008, Congress passed an amendment to IDEA which allows parents to unilaterally remove their children from special education by putting their request in writing to the school district. The parent has the right to revoke consent for services and the District has no standing to impede the parent's request. The amendment does not allow a parent to revoke consent for part of the services provided by the IEP and keep specific services. If the parent and the District disagree about whether FAPE would be provided with or without the provision of a specific service, the school district may use due process procedures. Revocation of consent means the removal of all special education services outlined in the IEP.

School Psychologist: An individual who is trained in both psychology and education and provides consultation, assessment, intervention and training for students with learning, social, emotional, or developmental problems.

Section 504: A part of the Rehabilitation Act of 1973 that states "No otherwise qualified individual with a disability shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

Severe Emotional and Behavior Disorder (SEBD): When a child or adolescent exhibits behavioral, emotional and/or social impairment that consequently disrupts their academic and/or developmental progress, family and/or interpersonal relationships, and has impaired functioning that has continued for at least one year, or has an impairment of short duration and high severity.

Severe and Profound Intellectual Disabilities (SID/PID): A generic classification of disorders which involves physical, sensory, intellectual, social-interpersonal performance deficits significantly below average. These deficits are not limited to any given setting, but are evident in all environmental settings

and often involve deficits in several areas of performance. The GaDOE defines severe intellectual functioning as ranging from an upper IQ limit of approximately 40 to a lower IQ limit of approximately 25 and profound disabilities as intellectual functioning below approximately 25; and deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility and especially school performance that is expected of the individual's age-level and cultural group.

Significant Developmental Delay (SDD): The term refers to a delay in a child's development in adaptive behavior, cognition, communication, motor skills or emotional development to the extent that, if not provided with special intervention, the delay may adversely affect a child's educational performance in age-appropriate activities. Initial eligibility must be established on or before the child's seventh birthday. A categorical eligibility must be established by the end of the school year in which the child turns nine years old.

Small Group Class/Self-contained: A special education class for students with disabilities who require specialized instruction taught by a special education teacher. The model of service required in a subject area when a student's disability is so severe that he/she cannot benefit from a less restrictive placement. Students are usually functioning at least two to three grade levels below average in the subject area or may require an alternative curriculum or modifications that are too extensive to be delivered in a general education class. Students receive specialized instruction on grade level standards as well as remediation for deficit skills.

Special Education Diploma: "The document awarded to students with disabilities assigned to a special education program who have not met the state assessment requirements referenced in GaDOE Rule 160-3-1-.07 Testing Programs – Student Assessment or who have not completed all of the requirements for a high school diploma but who have nevertheless completed their Individualized Education Plans (IEP)." (A default diploma for SWD)

Special Education Programs/Services: Programs or services which provide specially designed instruction (offered at no cost to families) for children 3 years old through age 21 with special needs who are found eligible for such services. These include specialized learning methods or materials in the regular classroom and special classes and programs if the learning or physical disabilities are more severe.

Special Needs Preschool (SNP): The special education program for young children ages 3 – 5 with disabilities. Preschool children with disabilities may be served through home-based, community-based, or facility-based (elementary school) model, or unique combinations of these models.

Specific Learning Disability (SLD): A disorder in understanding or using spoken or written language, characterized by imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. A primary deficit in basic psychological processes is identified. There is evidence of underachievement in one or more of the following areas: oral expression, listening comprehension, written expression, basic reading skills, reading comprehension, reading fluency, mathematical calculation, or mathematical problem solving. Achievement in the classroom indicates a pattern of

strengths and weaknesses. The achievement deficiencies are directly related to a pervasive processing deficit and correlates to the child's response to scientific, research-based interventions. The term does not include students who have learning problems which are primarily the result of visual, hearing, or motor disabilities; intellectual disabilities or environment, cultural or economic disadvantage.

Specialized Instruction: The use of research-based strategies designed to meet the individual needs of students with disabilities in a collaborative, co-teaching, or small group class. Instruction includes the adaption of the content, methodology, and/or instructional delivery that addresses the unique needs of the student that result from the student's disability, and ensures access to the general curriculum.

Speech/Language Impairment (SI): An impairment in the areas of articulation, fluency, voice, or language that adversely affects a student's educational performance. Speech-Language Pathologists (SLPs) assess students, plan interventions, and provide speech and language support for students who are eligible for speech/language services.

Station Teaching: A co-teaching model in which the general education teacher and special education teacher divide content and students. Each teacher presents the content to one group and subsequently repeats the instruction to the other group. If appropriate, a third "station" could require students to work independently.

Students with a Disability (SWD): A child who is determined by a school multidisciplinary eligibility team to have a disability according to state rules and regulations and who by reason of that disability requires special education and related services.

Team Teaching: A co-teaching model in which the general education teacher and special education teacher deliver the same instruction at the same time using a whole group approach.

Timelines Report: A timelines report is the Go-IEP Report used by special education personnel to document the time between a referral to special education and the eligibility determination meeting. Documentation on the Go-IEP Timelines Report includes information such as the student's name, DOB, referral date, due date, psychological evaluation date, and eligibility meeting date. This information is summarized by the special education supervisor to determine the timeliness of the eligibility process at each school.

Traumatic Brain Injury (TBI): A form of acquired brain injury that occurs when a sudden trauma causes damage to the brain. Symptoms of a TBI can be mild, moderate, or severe, depending on the extent of the damage to the brain. Deficits in cognitive, social, or motor skills due to acquired injury adversely impact educational performance.

Universal Design: The design of curricula with the needs of all students in mind so that instruction, materials, and assessment are usable by all. Universal design curriculum is designed to be innately flexible, enriched with multiple media so that alternatives can be accessed whenever appropriate. The curriculum takes on the burden of adaptation so the student doesn't have to, minimizing barriers and maximizing access to both information and learning.

Visually Impaired (VI): A category of disability describing a student whose best corrected visual acuity in the better eye is 20/70 or worse. Students may require the services of a teacher of Visually Impaired students.