



Special Education Plan

Parent Meeting

January 22, 2025

Positive Behavior Support Questions

1. How does the district support the emotional, social needs of students with disabilities?

2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.

✓ Ensure that all staff, including general education teachers + TAs, are trained.

Focus on a preventive or proactive model vs reactive.

Improve consistency of access to behavioral analyst. Evaluate if there is a need for more behavioral support staff.

Improve communication amongst the team, + consultative services w/

3. Describe the district positive school wide support programs. } behavioral support.

✓ Inclusivity training for students.

Programs on cyber bullying, etc.



4. Describe the district school based behavior health services.

5. Describe the district restraint procedure.



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Indicator 3A: Assessment

1. How do we improve participation of special education students in state assessment?



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Positive Behavior Support Questions

1. How does the district support the emotional, social needs of students with disabilities?
 - Evaluate / identify additional methods to increase general education classroom time
 - Increase the number of Behavioral Analysts or their dedicated time at individual schools so they can provide more review and planning for improving individual student or special ed classroom participation in general ed classrooms
2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.
 - Expand ~~more~~ training to all Teacher Assistants and General Ed teachers
 - More proactive and preventative ~~training~~ training
3. Describe the district positive school wide support programs.

Expand inclusion awareness to general ed students at middle and high school levels to improve general ed participation



4. Describe the district school based behavior health services.

Identify and review other potential consultants in order to generate additional ideas and programming/training solutions

5. Describe the district restraint procedure.



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Positive Behavior Support Questions

1. How does the district support the emotional, social needs of students with disabilities?

- Can we incorporate trauma informed practices into PBIS model
- Disability Inclusive Curriculum (Pennsbury utilizes this) - could this be infused into the PBIS model?
- Staff that support the PBIS model - how will they be provided with the time to utilize these resources (i.e. the links online) to provide lessons or skill groups for students in their buildings.
- Is there room to incorporate peer support for students w/ disabilities

2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.

- Will there ever be consideration for TA's to have RBT training.
- Scheduled, periodic refreshers for CPI training - could this be considered
- Consideration to support teachers ongoing learning on incorporating PBIS with students with disabilities (i.e. the child with ADHD worked 5x as hard to sit still or focus - we need to ensure students with disabilities are feeling the positivity)

3. Describe the district positive school wide support programs.

- Can we focus on middle school and high school / more age / developmentally appropriate to include all grade levels

* the questions on this page all point directly to more training for staff - this should be mandatory for ~~all~~ staff

- refer to toolkit (DEE in Philly)

disabilityequalityeducation.org.



4. Describe the district school based behavior health services.

a need for more professionals (ie. counselors,
CAREs)
do we have inclusion facilitators?
Collaborate w/ a neuropsychologist?
expand to all populations in special education
(not just ES or AS)

5. Describe the district restraint procedure.



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Students taking tests without having had the skills taught due to individual levels

(i.e. LS student getting pre-algebra instruction but taking the Algebra Keystone - this is why parents often opt kids out

Students who have alternate pathways will bomb these tests and bring down participation or passing numbers



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1. How does the district support the emotional, social needs of students with disabilities?

- ✓ - Recognize a response to trauma
- Trauma-informed care in the least restrictive environment
- Don't group kids w/ large grade spans for ESY

2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.

- ✓ - Continue to ensure all staff receive research-based training and know each student's individual needs, including all parts of the FBA

3. Describe the district positive school wide support programs.



4. Describe the district school based behavior health services.

Continue CARES program

5. Describe the district restraint procedure.

Last resort



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Allow parents access to test beforehand



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Positive Behavior Support Questions

1. How does the district support the emotional, social needs of students with disabilities?

- ✓ - do we need to hire more behavior analysts to address the social/emotional needs of our students?
- how many FBAs are the BCBA's writing?
- where do we generate/determine the number of behavior analysts employed by the district?

2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.

- ✓ - length of time to train teachers/TAs
- training with your building level IEP team on the same day
- Use a Professional Development day to do CPI training?
- are gen ed teachers getting trained in CPI?
 - those in inclusion classrooms?

3. Describe the district positive school wide support programs.

- ✓ - is PBIS sufficient?
- when will PBIS be at high school?
 - anticipated start date
 - wait until full cycle of middle school kids?
- gradually introduce by high school grade level



4. Describe the district school based behavior health services.

- counseling groups - what kinds?
 - scheduling for the kids
- growing need at elementary level for CARES coordinator?

5. Describe the district restraint procedure.

- de-escalation procedures
 - Used prior to using a restraint - is that communicated to parents?
- get information out to parents about restraint procedures & options a head of time
 - fully explained how it relates to the individual child - especially children who have a potential need to be restrained or use CPT
 - what does it look like for my child?
- parents as a resource for other parents at IEP meetings



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- opt out vs. participation in PSSAs
based on student levels of anxiety
- who is communicating that?



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1. How does the district support the emotional, social needs of students with disabilities?

✓ More proactive, intervention-based instead of reactive.
Focus on incentives
Social-use counselors, experts to discuss inclusion w/ the classroom. PBIS model

2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.

✓ Mandated vs voluntary training
Inhouse ~~to~~ trainers
knowing ~~all~~ of staff trained
percentage

3. Describe the district positive school wide support programs.



4. Describe the district school based behavior health services.

5. Describe the district restraint procedure.

RISC report / report by misuse / Childline
- Child must be physically evaluated by
school nurse
- School nurse should be notified during event



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Transparent communication w/ parents.



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Positive Behavior Support Questions

1. How does the district support the emotional, social needs of students with disabilities?

✓ provide incentives for all students
- proactive approach instead of reactive approach
- sensory breaks / sensory rooms in some schools
- counselors providing education to students

CoSCAR
educ providing
education

2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.

✓ CPI to support staff
in house trainers
provide more training to staff
- interventions
goal is to train all staff

3. Describe the district positive school wide support programs.



4. Describe the district school based behavior health services.

psychologists for all schools
counselors every school post COVID

5. Describe the district restraint procedure.

add Nurse - Notify parent
RBC report



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- transparent communication



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✓ GBCBAs
Incentives: individual
Sensory Room: gym
Counselors: Class education; individual meeting

2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.

✓ - Only Crisis Prevention Institute used for both verbal:
nonverbal
- In house trainers
- Percentage of staff trained
- Training and refresher every other year

3. Describe the district positive school wide support programs.

✓ Reward system



4. Describe the district school based behavior health services.

- Psychologist every school
- Counselors for every school

5. Describe the district restraint procedure.

- Nurse exam ~~after~~ during ideally
- Risk Report



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1. How do we improve participation of special education students in state assessment?

Improved communication with parents
transparent



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1. How does the district support the emotional, social needs of students with disabilities?

- * look at the dispensant of behavior support
- * evaluate whether district needs additional behavior supports
- * improve communication/consultation series w/ team including special education teacher

2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.

to ensure that all staff are trained in CPI

behavior analysis unleg w/ teaching behavior in the class
proactive models

3. Describe the district positive school wide support programs.

* Do we look at data, change how the plan changes

Holland - first year

Nutten - second year

* enhance support for general ed



4. Describe the district school based behavior health services.

5. Describe the district restraint procedure.

* Inclusive education for students in MS

* less support for students w/ not significant behaviors
when students go to MS/HS

* don't know what to think w/ students w/ more severe disabilities - less exposure
- jump from elementary to middle



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1. How does the district support the emotional, social needs of students with disabilities?

✓ Proactive, inclusive, positive incentives, school wide to individual positive reinforcements

2. Describe training provided to staff in the use of positive behavior support, de-escalation techniques and responses to behavior that may require immediate intervention.

✓ BCBA - crisis prevention institute (CPI) - offered more trainings
8hr. training - teachers, staff & support staff w/ the BCBA's
more in house trainings

all paraprofessionals on PD day - monthly
providing data/percentages

3. Describe the district positive school wide support programs.

MTSS data w/ PBIS



4. Describe the district school based behavior health services.

changes/continuity { Every school school psychologist
every elem. school - school counselor (min.)
CARES middle/high
K&S Consultants thru PCCD grants (2yrs.)

5. Describe the district restraint procedure.

add { RISC report
Physical evaluation by school nurse
CRISIS team
Notify Families



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Positive Behavior Support

Date of Approval

2017-06-15

Uploaded Files

Board Policy 113.2.pdf

1. How does the district support the emotional, social needs of students with disabilities?

School Board Policy 113.1 addresses Behavior Support of Students with Disabilities. It was revised in June 2017. The policy was written to reflect the requirements of the IDEA and Chapter 14. It emphasizes the need for positive rather than negative measures. It also discourages the use of physical restraints and stipulates the processes to be in place when such restraints become necessary. It stipulates what aversive techniques (i.e., corporal punishment, locked rooms) are prohibited. Finally, it addresses the requirements regarding a student's exclusion from his/her educational program. The district utilizes the services of 5 full time Behavior Analysts to develop behavior intervention plans in response to functional behavioral assessments, as well as to proactively consult with school based teams for students in need of social-emotional support. The also work in conjunction with building principals and teams to develop and revise building wide positive behavioral support programs.

2. Describe training provided to staff in the use of positive behavior supports, de-escalation techniques and responses to behavior that may require immediate intervention.

The district offers two types of behavior intervention trainings on an ongoing basis. First is training by a district certified trainer from the Crisis Prevention Institute. This is for staff working with students with better-developed verbal skills. Second is training by a district certified trainer in Safety-Cares. This is for staff working with students who are more non-verbal. Administrators, teachers, and support staff can receive this training on a voluntary basis. Additionally, when a student is identified as having the potential for aggressive behavior, all staff working with that student are required to attend training. Numerous training opportunities are available each year. It should be noted that both of these systems emphasize the use of preventative strategies to de-escalate potentially aggressive behavior. *DB*

3. Describe the district positive school wide support programs.

In Council Rock, each elementary school is required to have a school wide positive behavior support system. These are reviewed annually in conjunction with a review of discipline data. Revisions are made as needed based upon this review. Each plan is required to be positive in nature and progressive should there be a need for consequences. Not only do the plans expect positive behavior on the part of students, the plans have a component that focuses on ways to teach and model appropriate behavior. Our ten elementary schools have already gone through School-Wide-Positive-Behavioral Support training through the IU. This past year, this training was initiated at the middle school level. Moving forward this will done at the high school level as well.

4. Describe the district school-based behavior health services.

School based teams comprised of School Psychologists, Behavior Analysts, School Counselors, Inclusion Facilitators, CARES Coordinators, and Social Workers collaborate to assess and intervene in the area of student social-emotional/behavioral functioning. In addition, contractual mental health services are provided through K&S Consultants to assist in promoting consistent school attendance, as well as providing additional counseling services for our students.

ADDED/BAITD

Why? paper by?

in the emotional support program at the High School level. Contractual psychological counseling services are also provided by a doctoral level psychologist to students in the autistic support program at the high school level.

5. Describe the district restraint procedure.

Behavior support programs should be based on the use of positive, rather than negative, measures. The use of restraints is considered a measure of last resorts and only used after less restrictive measures, including de-escalation techniques. The use of restraints to control the aggressive behavior of an individual student or eligible young child shall cause the school entity to notify the parent of the use of restraint and shall cause a meeting of the IEP team within 10 school days of the inappropriate behavior causing the use of restraints, unless the parent, after written notification, agrees in writing to waive the meeting. At this meeting, the IEP team shall consider whether the student or eligible child needs a functional behavioral assessment (FBA), reevaluation, a new or revised positive behavior support plan or a change of placement to address the inappropriate behavior. A restraint is considered to be a physical hold of the student's body to prohibit movement, either in the form of a device or technique, that lasts longer than 30 seconds. If the use of restraints is in a student's IEP, EVERY time a restraint is used: 1. Complete the Nonviolent Physical Crisis Intervention Reporting Form 2. Notify parent that restraint was used. It is preferable that this is through live phone contact. Send a copy of the reporting form to them with the Restraint Notification/Agreement to Waive Meeting form 3. Send a copy of the reporting form to the special education supervisor's secretary 4. If any member of the team, including the parent, does not agree to waive the IEP meeting, schedule within 10 days. If the use of restraints is not in a student's IEP: 1. Complete steps 1-3 above. 2. Schedule an IEP meeting within 10 days, unless parents waive in writing by signing the Restraint Notification/Agreement to Waive Meeting form. However, if this is not an isolated incident, an IEP meeting must be held. 3. At the meeting discuss the need for an FBA or re-evaluation or up-dated behavior plan and revise IEP as needed.



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1. How do we improve participation of special education students in state assessment?

✓ - Don't improve it
- reconsider it

