



Brooklyn Center Community Schools, ISD 286 **Total Special Education System (TSES)**

This document serves as the Total Special Education System Plan for Brooklyn Center Community Schools, ISD 286 in accordance with Minnesota Rule 3525.1100. This plan also includes an assurance for compliance with the federal requirements pertaining to districts' special education responsibilities found in United States Code, title 20, chapter 33, sections 1400 et seq., and Code of Federal Regulations, title 34, part 300. This document is a companion to the Application for Special Education Funds – Statement of Assurances (ED-01350-29).

Deirdra Yarbro, Brooklyn Center Community Schools, ISD 286's Director of Special Services, is responsible for program development, coordination, and evaluation; in-service training; and general special education supervision and administration. Deirdra Yarbro may be reached at 763-450-3386.

I. Child Study Procedures

The district's identification system is developed according to the requirement of nondiscrimination as Brooklyn Center Community Schools, ISD 286 does not discriminate in education on the basis of race, color, creed, religion, national origin, sex, age, marital status, status with regard to public assistance, sexual orientation, or disability.

A. Identification

Brooklyn Center Community Schools, ISD 286 has developed systems designed to identify pupils with disabilities beginning at birth, pupils with disabilities attending public and nonpublic schools, and pupils with disabilities who are of school age and are not attending any school.

Infant and toddler intervention services under United States Code, title 20, chapter 33, section 1431 et seq., and Code of Federal Regulations, title 34, part 303, are available in Brooklyn Center Community Schools, ISD 286 to children from birth through two years of age who meet the outlined criteria.

The team determines that a child from birth through the age of two years is eligible for infant and toddler intervention services if:

- A. the child meets the criteria of one of the disability categories in United States Code, title 20, chapter 33, sections 1400, et. seq., as defined in Minnesota Rules; or
- B. the child meets one of the criteria for developmental delay in subitem (1) or the criteria in subitem (2);
 - (1) the child has a diagnosed physical or mental condition or disorder that has a high probability of resulting in developmental delay regardless of whether the child has a demonstrated need or delay; or

- (2) the child is experiencing a developmental delay that is demonstrated by a score of 1.5 standard deviations or more below the mean, as measured by the appropriate diagnostic measures and procedures, in one or more of the following areas:
 - (a) cognitive development;
 - (b) physical development, including vision and hearing;
 - (c) communication development;
 - (d) social or emotional development; and
 - (e) adaptive development.

The team shall determine that a child from the age of three years through the age of six years is eligible for special education when:

- A. the child meets the criteria of one of the categorical disabilities in United States Code, title 20, chapter 33, sections 1400 et seq., as defined in Minnesota Rules; or
- B. the child meets one of the criteria for developmental delay in subitem (1) and the criteria in subitem (2). Brooklyn Center Community Schools, ISD 286 [has/has] not elected the option of implementing these criteria for developmental delay.

(1) The child:

- (a) has a diagnosed physical or mental condition or disorder that has a high probability or resulting in developmental delay; or
- (b) has a delay in each of two or more of the areas of cognitive development; physical development, including vision and hearing; communication development; social or emotional development; and adaptive development, that is verified by an evaluation using one or more technically adequate, norm-referenced instruments. The instruments must be individually administered by appropriately trained professionals and the scores must be at least 1.5 standard deviations below the mean in each area.

(2) The child's need for special education is supported by:

- (a) at least one documented, systematic observation in the child's routine setting by an appropriate professional or, if observation in the daily routine setting is not possible, the alternative setting must be justified;
- (b) a developmental history; and
- (c) at least one other evaluation procedure in each area of identified delay that is conducted on a different day than the medical or norm-referenced evaluation; which may include criterion references instruments, language samples, or curriculum-based measures.

Brooklyn Center Community Schools, ISD 286's plan for identifying a child with a specific learning disability is consistent with Minnesota Rule 3525.1341. Brooklyn Center Community Schools, ISD 286's plan for identifying a child with a specific learning disability is linked as Appendix D. For elementary aged students, teams use criteria A, B, and D from the MDE's Specific Learning Disability criteria to make determinations about SLD eligibility*. At the secondary level, teams use criteria A, B, and C to make determinations about SLD eligibility. There are currently more structures in place at the elementary level to allow teams to make eligibility decisions based on SRBI. At the secondary level, there are plans to

work on the infrastructure for teams to be able to use SRBI, but in the meantime, they will use the discrepancy model.

- *For evaluations in which Oral Language and/or Listening Comprehension are included as the primary area/s of concern, teams at all age levels will use criteria A, B and C to make decisions about SLP eligibility due to the lack of adequate progress monitoring tools to gauge intervention progress.

B. Evaluation

The evaluation used to determine whether a child is eligible for infant and toddler intervention services must be conducted within the timelines established in Code of Federal Regulations, title 34, part 303. It must be based on informed clinical opinion; and must be multidisciplinary in nature, involving two or more disciplines or professions; and must be conducted by personnel trained to utilize appropriate methods and procedures. The evaluation must include:

- A. A review of the child's current records related to health status and medical history;
- B. an evaluation of the child's levels of cognitive, physical, communication, social or emotional, and adaptive developmental functioning;
- C. an assessment of the unique needs of the child in terms of each of the developmental areas in item B; and
- D. at least one documented, systematic observation in the child's daily routine setting by an appropriate professional or, if observation in the child's daily setting is not possible, the alternative setting must be justified.

The team shall conduct an evaluation for special education purposes within a reasonable time not to exceed 30 school days from the date the district receives parent/guardian permission to conduct the evaluation or the expiration of the 14-calendar day parent/guardian response time in cases other than initial evaluation, unless a conciliation conference or hearing is requested.

Brooklyn Center Community Schools, ISD 286 conducts full and individual initial evaluation before the initial provision of special education and related services to a pupil. The initial evaluation shall consist of procedures to determine whether a child is a pupil with a disability that adversely affects the child's educational performance as defined in Minnesota Statutes, section 125A.02, who by reason thereof needs special education and related services, and to determine the educational needs of the pupil. The district proposing to conduct an initial evaluation to determine if the child qualifies as a pupil with a disability shall obtain an informed consent from the parent/guardian of the child before the evaluation is conducted. Parent/Guardian consent for evaluation shall not be construed as consent for placement for receipt of special education and related services. The District will not override the written refusal of a parent/guardian to consent to an initial evaluation or re-evaluation.

Evaluation Procedures

Evaluations and reevaluations shall be conducted according to the following procedures:

- A. Brooklyn Center Community Schools, ISD 286 shall provide notice to the parents/guardians of the pupil, according to Code of Federal Regulations, title 34, sections 300.500 to 300.505, that describes any evaluation procedures the district proposes to conduct.
- B. In conducting the evaluation, Brooklyn Center Community Schools, ISD 286 shall:

- (1) use a variety of evaluation tools and strategies to gather relevant functional and developmental information, including information provided by the parent/guardian, that are designed to assist in determining whether the child is a pupil with a disability and the content of the pupil's individualized education program, including information related to enabling the pupil to be involved in and profess in the general curriculum, or for preschool pupils, to participate in appropriate activities;
- (2) not use any single procedure as the sole criterion for determining whether a child is a pupil with a disability or determining an appropriate education program for the pupil; and
- (3) use technically sound instruments that are designed to assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

C. Brooklyn Center Community Schools, ISD 286 ensures that:

- (1) tests and other evaluation materials used to evaluate a child under this part are selected and administered so as not be discriminatory on a racial or cultural basis, and are provided and administered in the pupil's native language or other mode of communication, unless it is clearly not feasible to do so;
- (2) materials and procedures used to evaluate a child with limited English proficiency are selected and administered to ensure that they measure the extent to which the child has a disability and needs special education and related services, rather than measure the child's English language skills;
- (3) any standardized tests that are given to the child have been validated for the specific purpose for which they are used, are administered by trained and knowledgeable personnel, and are administered in accordance with any instructions provided by the producer of such tests;
- (4) the child is evaluated in all areas of suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities;
- (5) evaluation tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the pupil are provided;
- (6) if an evaluation is not conducted under standard conditions, a description of the extent to which it varied from standard conditions must be included in the evaluation report;
- (7) tests and other evaluation materials include those tailored to evaluate specific areas of educational need and not merely those that are designed to provide a single general intelligence quotient;
- (8) tests are selected and administered so as best to ensure that if a test is administered to a child with impaired sensory, manual, or speaking skills, the test results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills, unless those skills are the factors that the test purports to measure; and
- (9) in evaluating each pupil with a disability, the evaluation is sufficiently comprehensive to identify all of the pupil's special education and related service needs, whether or not commonly linked to the disability category in which the pupil has been classified.

D. Upon completion of administration of tests and other evaluation materials, the determination of whether the child is a pupil with a disability as defined in Minnesota Statutes, section 125A.02, shall be made by a team of qualified professionals and the parent/guardian of the pupil in accordance with

item E, and a copy of the evaluation report and the documentation of determination of eligibility will be given to the parent/guardian.

- E. In making a determination of eligibility under item D, a child shall not be determined to be a pupil with a disability if the determinant factor for such determination is lack of instruction in reading or math or limited English proficiency, and the child does not otherwise meet eligibility criteria under parts 3525.1325 to 3525.1351.

Additional requirements for evaluations and reevaluations

- A. As part of an initial evaluation, if appropriate, and as part of any reevaluation under this part, or a reinstatement under part 3525.3100, the IEP team and other qualified professionals, as appropriate, shall:
- (1) review existing evaluation data on the pupil, including evaluations and information provided by the parent/guardians of the pupil, current classroom-based assessments and observations, and teacher and related services providers observation; and
 - (2) on the basis of the review, and input from the pupil's parent/guardians, identify what additional data, if any, are needed to determine whether the pupil has a particular category of disability, as described in Minnesota Statutes, section 125A.02, or, in case of a reevaluation of a pupil, whether the pupil continues to have such a disability, the present levels of performance and educational needs of the pupil, whether the pupil needs special education and related services, or in the case of a reevaluation of a pupil, whether the pupil 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 pupil to meet the measurable annual goals set out in the individualized education program of the pupil and to participate, as appropriate, in the general curriculum.
- B. The district shall administer such tests and other evaluation materials as may be needed to produce the data identified by the IEP team under item A, subitem (2).
- C. Each district shall obtain informed parent/guardian consent, in accordance with subpart 1, prior to conducting any reevaluation of a pupil, except that such informed parent/guardian consent need not be obtained if the district can demonstrate that it had taken reasonable measures to obtain such consent and the pupil's parent/guardian has failed to respond.
- D. If the IEP team and other qualified professionals, as appropriate, determine that no additional data are needed to determine whether the pupil continues to be a pupil with a disability, the district shall notify the pupil's parent/guardians of that determination and the reasons for it, and the right of such parent/guardians to request an evaluation to determine whether the pupil continues to be a pupil with a disability, and shall not be required to conduct such an evaluation unless requested to by the pupil's parent/guardians.
- E. A district shall evaluate a pupil in accordance with this part before determining that the pupil is no longer a pupil with a disability.

When restrictive procedures are used twice in 30 days or when a pattern emerges and restrictive procedures are not included in a child's individualized education program or behavior intervention plan, the district must hold a meeting of the individualized education program team, conduct or review a functional behavioral analysis, review data, consider developing additional or revised positive behavioral interventions and supports, consider actions to reduce the use of restrictive procedures, and modify the individualized education program or behavior intervention plan as appropriate. At the meeting, the team must review any known medical or psychological limitations that contraindicate the use of a restrictive procedure, consider whether to prohibit that restrictive procedure, and document any prohibition in the

individualized education program or behavior intervention plan. A Functional Behavioral Assessment can be conducted as a stand-alone evaluation as determined by the IEP team.

Procedures for determining eligibility and placement

- A. In interpreting the evaluation data for the purpose of determining if a child is a pupil with a disability under parts 3525.1325 to 3525.1351 and the educational needs of the child, the school district shall:
 - (1) draw upon information from a variety of sources, including aptitude and achievement tests, parent/guardian input, teacher recommendations, physical condition, social or cultural background, and adaptive behavior; and
 - (2) ensure that the information obtained from all of the sources is documented and carefully considered.
- B. If a determination is made that a child is a pupil with a disability who needs special education and related services, an IEP must be developed for the pupil according to part 3525.2810.

Evaluation report

An evaluation report must be completed and delivered to the pupil's parents/guardians within the specified evaluation timeline. At a minimum, the evaluation report must include:

- A. a summary of all evaluation results;
- B. documentation of whether the pupil has a particular category of disability or, in the case of a reevaluation, whether the pupil continues to have such a disability;
- C. the pupil's present levels of performance and educational needs that derive from the disability;
- D. whether the child needs special education and related services or, in the case of a reevaluation, whether the pupil continues to need special education and related services; and
- E. whether any additions or modifications to the special education and related services are needed to enable the pupil to meet the measurable annual goals set out in the pupil's IEP and to participate, as appropriate, in the general curriculum.

C. Plan for Receiving Referrals

Brooklyn Center Community Schools, ISD 286's plan for the district's problem solving process and for receiving referrals from parent/guardians, physicians, private and public programs, and health and human services agencies is attached as Appendix F. This includes BCCS' MnMTSS Problem Solving Process, Part C referral process, and Part B referral process. Appendix A includes the district's process when a parent/guardian requests an evaluation to be conducted.

II. Method of Providing the Special Education Services for the Identified Pupils

Brooklyn Center Community Schools, ISD 286 provides a full range of educational service alternatives. All students with disabilities are provided the special instruction and services which are appropriate to their needs. The following is representative of Brooklyn Center Community Schools, ISD 286's method of providing the special education services for the identified pupils, sites available at which service may occur, and instruction and related services are available.

Appropriate program alternatives to meet the special education needs, goals, and objectives of a pupil are determined on an individual basis. Choice of specific program alternatives are based on the pupil's current levels of performance, pupil special education needs, goals, and objectives, and must be written

in the IEP. Program alternatives are comprised of the type of services provided, the setting in which services occur, and the amount of time and frequency in which special education services occur. A pupil may receive special education services in more than one alternative based on the IEP or IFSP.

A. Method of providing the special education services for the identified pupils:

- (1) One on one services
- (2) Small Group
- (3) Large Group
- (4) Direct
- (5) In-direct
- (6) Co-teaching
- (7) Homebound / Homebased
- (8) Push-In / Pull-Out
- (9) Virtual (for students enrolled in Insight Minnesota only)

B. Sites available at which services may occur:

- (1) Early College Academy, ALC, 5910 Shingle Creek Parkway, Brooklyn Center, MN 55430
- (2) Brooklyn Center Secondary, 6500 Humboldt Avenue North, Brooklyn Center, MN 55430
- (3) Brooklyn Center Elementary, 1500 59th Ave N, Brooklyn Center, MN 55430
- (4) Early Childhood Special Education, 1500 59th Ave N, Brooklyn Center, MN 55430
- (5) Intermediate School District 287, 1820 Xenium Lane North, Plymouth, MN 55441
- (6) Insight Minnesota, 5910 Shingle Creek Parkway, Brooklyn Center, MN 55430 (physical address, though staff and students are all remote and instruction is virtual)

C. Available instruction and related services:

- (1) Physical Therapy
- (2) Audiology
- (3) Psychological Services
- (4) Social Work Services
- (5) Occupational Therapy
- (6) Speech Language

- (7) Special Education Transportation
- (8) Interpreters
- (9) School health services and school nurse services
- (10) Medical Services (for educational evaluations)
- (11) Licensed Special Education Teachers
- (12) Paraprofessionals (Special Education Assistants) / Personal Care Assistants
- (13) Early identification and assessment of disabilities in children

III. Administration and Management Plan

Brooklyn Center Community Schools, ISD 286 utilizes the following administration and management plan to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils:

- A. [The Special Services Department](#) leadership is organized to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils. Department names, titles, contact information and general responsibilities are attached as Appendix G.
- B. Due Process assurances are available to parent/guardians: Brooklyn Center Community Schools, ISD 286 has appropriate and proper due process procedures in place to assure effective and efficient results of child study procedures and methods of providing special education services for the identified pupils, including alternative dispute resolution and due process hearings. A description of these processes are as follows:
 - (1) Prior written notice to a) inform the parent/guardian that except for the initial placement of a child in special education, the school district will proceed with its proposal for the child's placement or for providing special education services unless the child's parent/guardian notifies the district of an objection within 14 days of when the district sends the prior written notice to the parent/guardian; and b) state that a parent/guardian who objects to a proposal or refusal in the prior written notice may request a conciliation conference or another alternative dispute resolution procedure.
 - (2) Brooklyn Center Community Schools, ISD 286 will not proceed with the initial evaluation of a child, the initial placement of a child in a special education program, or the initial provision of special education services for a child without the prior written consent of the child's parent/guardian. A district may not override the written refusal of a parent/guardian to consent to an initial evaluation or reevaluation.
 - (3) A parent/guardian, after consulting with health care, education, or other professional providers, may agree or disagree to provide the parent/guardian's child with sympathomimetic medications unless medical, dental, mental and other health services are necessary, in the professional's judgment, that the risk to the minor's life or health is of such a nature that treatment should be given without delay and the requirement of consent would result in delay or denial of treatment.
 - (4) Parties are encouraged to resolve disputes over the identification, evaluation, educational placement, manifestation determination, interim alternative educational placement, or the provision of a free appropriate public education to a child with a disability through conciliation, mediation, facilitated team meetings, or other alternative process. All dispute resolution options

are voluntary on the part of the parent/guardian and must not be used to deny or delay the right to a due process hearing. All dispute resolution processes are provided at no cost to the parent/guardian.

- (5) Conciliation Conference: a parent/guardian has the opportunity to meet with appropriate district staff in at least one conciliation conference if the parent/guardian objects to any proposal of which the parent/guardian receives prior written notice. Brooklyn Center Community Schools, ISD 286 holds a conciliation conference within ten calendar days from the date the district receives a parent/guardian's objection to a proposal or refusal in the prior written notice. All discussions held during a conciliation conference are confidential and are not admissible in a due process hearing. Within five school days after the final conciliation conference, the district must prepare and provide to the parent/guardian a conciliation conference memorandum that describes the district's final proposed offer of service. This memorandum is admissible in evidence in any subsequent proceeding.
- (6) In addition to offering at least one conciliation conference, Brooklyn Center Community Schools, ISD 286 informs parents/guardians of other dispute resolution processes, including at least medication and facilitated team meetings. The fact that an alternative dispute resolution process was used is admissible in evidence at any subsequent proceeding. State-provided mediators and team meeting facilitators shall not be subpoenaed to testify at a due process hearing or civil action under special education law nor are any records of mediators or state-provided team meeting facilitators accessible to the parties.
- (7) Descriptions of the mediation process, facilitated team meetings, state complaint, and impartial due process hearings may be found in Brooklyn Center Community Schools, ISD 286's Procedure Safeguard Notice, linked as Appendix B.

IV. Interagency Commitments

Brooklyn Center Community Schools, ISD 286 has entered in the following interagency agreements or joint powers board agreements for eligible children, ages 3 to 21, to establish agency responsibility that assures that coordinated interagency services are coordinated, provided, and paid for, and that payment is facilitated from public and private sources:

A. Community Transition Interagency Committee:

Brooklyn Center Community Schools, ISD 286's Community Transition Interagency Committee (CTIC) is established in cooperation with other districts/special education cooperatives, in cooperation with Hennepin County for youth with disabilities, beginning at grade 9 or age equivalent, and their families. Its primary purpose is to facilitate the development of programs and services in its represented area that assist youth, ages 14-21 in their transition to adulthood. A secondary purpose is the development and implementation of systems and events which distribute timely transition resource information to youth and their families.

The CTIC to which Brooklyn Center Community Schools belongs consists of representatives from five school districts (Brooklyn Center, Robbinsdale, Osseo, Wayzata and ISD 287), Vocational Rehab staff, Hennepin county reps, and community partners and businesses who offer resources for our students with disabilities and their families we serve. The Community Transition Interagency Committee meets the third Monday of every month virtually from 2:00-3:30.

The Community Transition Interagency Committee's activities and procedures include the following:

- 1) Identification of annual services, programs, and funding sources provided within the community for secondary and postsecondary aged youth with disabilities and their families; CTIC has held several transition fairs with vendors from various community resources and a Career Skills Day for students to explore job skills and talk with community partners who can help with post secondary planning. They seek funding from each representative district.
- 2) Facilitation of the development of multiagency teams to address present and future transition needs of individual students on their individualized education programs. CTIC has representatives from each school district, VRS, Hennepin county representatives, charter schools and community partners on the committee.
- 3) CTIC has developed a community plan to include mission, goals, and objectives, and meets monthly to plan activities to assure that transition needs of individuals with disabilities are met.
- 4) CTIC ensures MDE and Deed are involved and they are connected with the E1MN initiative in order to stay abreast of changes or improvements in the community system of transition services and in order to exchange agency information and ideas such as appropriate data, effectiveness for students, special projects, exemplary programs, and creative funding of programs.
- 5) As a community resource, a summary of success and feedback is gathered from events and shared at committee meetings in order to plan and prepare for the next event. The committee includes district representatives that have internal and state evaluations and monitoring of their transition programming, including services within the community for transition-aged students with disabilities to guide post-school outcomes.

CTIC's bylaws are linked as Appendix C.

B. Interagency Early Intervention Committee

Brooklyn Center Community Schools, ISD 286's Interagency Early Intervention Committee is established in cooperation with other districts and in cooperation with the health and human service agencies located in Hennepin County for children with disabilities under age five and their families.

The Minnesota Department of Education, Minnesota Department of Health and Minnesota Department of Human Services' interagency initiative of the State of Minnesota has established Help Me Grow for early intervention programming. Help Me Grow is a statewide initiative that conducts outreach and public awareness activities to connect young children who have developmental delays or disabilities and their families to free early intervention services. [Help Me Grow](http://helpmegrowmn.org/) (<http://helpmegrowmn.org/>) offers information on child development and a way to refer an infant, toddler, or preschooler for free help when there are developmental concerns.

Help Me Grow partnerships include:

- Education
- Public health
- Human services
- Health care such as primary care clinics, birthing hospitals, specialty care clinics
- Early education including preschools, child care, Early Childhood Family Education (ECFE), Head Start and School Readiness Programs
- Agencies for homeless families
- Agencies for immigrant families
- Advocacy organizations for children with disabilities
- Child welfare agencies

The Region 11 Interagency Early Intervention Committee (IEIC) is responsible for the implementation of Help Me Grow child find and public awareness in the 7-county metro area, including the boundaries of Brooklyn Center Community Schools.

BrightWorks is the fiscal host for an interagency agreement with the Minnesota Department of Education for the seven county Region 11 IEIC using federal funding under CFDA number 84.181 Special Education Grants for Infants and Families with Disabilities.

IEIC Contact Information

Anna Paulson, Region 11 IEIC Grant Project Coordinator, 612-209-4450,
Anna.Paulson@BrightWorksMN.org

Kathy McKay, Region 11 Help Me Grow Child Find and Public Awareness Coordinator
651-728-0400, Kathy.McKay@BrightWorksMN.org

C. District 287

Brooklyn Center Community Schools, ISD 286, has a partnership and contract with Intermediate District 287 for transition services and programming for students ages 18-22 and for itinerant services in the following areas based on student need:

- Blind/Visual Impairment Teacher
- Deaf/Hard of Hearing Teacher
- Physical Impairment/Other Health Disabilities Teacher
- Educational Audiologist
- Physical Therapist

V. Special Education Advisory Council

In order to increase the involvement of parents/guardians of children with disabilities in district policy making and decision making, Brooklyn Center Community Schools, ISD 286 has a special education advisory council.

- A. Brooklyn Center Community Schools, ISD 286's Special Education Advisory Council is individually established.
- B. Brooklyn Center Community Schools, ISD 286's Special Education Advisory Council is not a subgroup of the district's District Parent Advisory Council (DPAC) or the Full Service Community Schools District/Community Leadership team.
- C. All parents/guardians of children with disabilities are invited to each Special Education Advisory Council meeting. The district does not have a nonpublic school located in its boundaries.
- D. Brooklyn Center Community Schools, ISD 286's Special Education Advisory Council meets twice per year, fall and spring.
- E. The operational procedures of Brooklyn Center Community Schools, ISD 286's Special Education Advisory Council are outlined in Appendix E.

VI. Assurances

Yes: Assurance given

Citation and Authority:

Code of Federal Regulations, section 300.201: Consistency with State policies. Brooklyn Center Community Schools, ISD 286, in providing for the education of children with disabilities within its jurisdiction, has in effect policies, procedures, and programs that are consistent with the State policies and procedures established under sections 300.101 through 300.163, and sections 300.165 through 300.174. (Authority: 20 U.S.C. § 1413(a)(1)).

Appendices

Appendix A: Request for Evaluation

Appendix B: Part C Procedural Safeguards and Part B Procedural Safeguards

Appendix C: CTIC bylaws

Appendix D: Identification of a Student with a Specific Learning Disability (MDE Criteria)

Appendix E: SEAC operating procedures

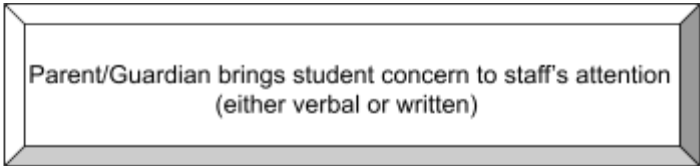
Appendix F: Problem Solving Process, Part C referral, Part B referral

Appendix G: Department Contacts

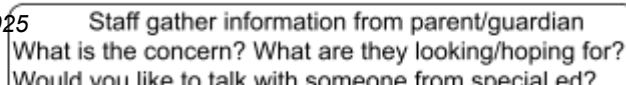
Appendix A: Request for an Evaluation

BCCS K-12 Request for Evaluation Process

REQUEST FOR EVALUATION



Parent/Guardian brings student concern to staff's attention
(either verbal or written)



Staff gather information from parent/guardian
What is the concern? What are they looking/hoping for?
Would you like to talk with someone from special ed?

*Building PROBLEM SOLVING PROCESS within BCCS is led by CST Facilitator

NARRATIVE PROCESS

A parent/guardian request for an evaluation does not necessarily mean an evaluation will occur. The special education team considers the request and is obligated to respond - either the request is refused or accepted and the special education team must give notice to the parent on the decision made.

If a notice only contains a refusal (the request is refused), it must be served on the parent/guardian within 14 calendar days of the date the request was made, therefore in order to stay within this timeline:

1. When staff receive a parent/guardian request for an evaluation, they must first ask clarifying questions. If the request is for a special education eval, they then pass the request onto the CST Facilitator within 2-3 school days. Sometimes parents/guardians ask for extra help or more testing, but that does not necessarily mean they are asking for a special education eval tied to a disability. It is important for the staff member receiving the request to seek clarification on what is being requested.
2. CST Facilitator puts the student on the next CST agenda and invites necessary general education staff immediately upon receiving a request. If the next CST is NOT within 10 days of the date the initial request was made, CST Facilitator will write PWN indicating CST review will occur.
3. CST Facilitator must contact the parent/guardian within 3 school days of the request being made, acknowledge the request, clarify the reason for the request if needed, complete an informal interview, and explain the next steps to the parent/guardian.
4. If an evaluation plan is written, existing pre-referral interventions/supports will continue during the evaluation and progress will be reviewed in the evaluation.

From: Child Find In Minnesota A Fact Sheet from the Minnesota Disability Law Center , 2008
https://mn.gov/mnddc/partnersinpolicymaking/class32_materials/Child_Find_Article_2014.pdf

Parent/Guardian Requests

Child Find responsibilities are triggered by parent/guardian requests for special education evaluation. As there is no legally required form for parent/guardian requests, districts may be responsible for responding to either verbal or written requests. Districts must either agree to the request and start the evaluation process or provide written notice of refusal. Where a district fails to provide notice of refusal, even if there is no violation of the underlying child find obligation, it has been found in violation. Neither federal nor state law states by when a district must respond to a parent/guardian's request for an evaluation. The Office of Special Education Programs has noted that the determination of what constitutes a reasonable amount of time for the District to respond may be made on a "case-by-case basis." In Minnesota complaint decisions, delays of three months, with some compelling intervening circumstances, were determined to be reasonable. This 3-month delay is likely an outside limit and is only excused for compelling reasons; a shorter timeframe for responding (closer to 2-4 weeks) will probably be determined "reasonable." If a district does not think a special education evaluation is warranted and wants to give pre-referral interventions a try first, this is fine, but the district still must provide notice of refusal to the parent's/guardian's request for evaluation. In other words, a parent/guardian's request for evaluation does not disappear if they agree to pre-referral interventions. The notice of refusal certainly can include a statement about the provision of pre-referral interventions. The provision of formal notice of the district's refusal to conduct an evaluation allows the parent/guardian to be adequately informed of the district's decision and of their rights to challenge the refusal in a due process hearing.

Appendix B:

 6.2019 Procedural Safeguards Part C 004393.docx

 Part B Notice of Procedural Safeguards 10.22.docx

Appendix C:

 CTIC Bylaws

Appendix D:

 Specific Learning Disability (SLD) criteria checklist.pdf

Appendix E:

BCCS SEAC Operating Procedures

BCCS SEAC Operating Procedures

ISD 286 SPECIAL EDUCATION ADVISORY COUNCIL (SEAC) GUIDELINES

The purpose of the Special Education Advisory Council (SEAC) is to assure:

1. Parent/Guardian input into the decision-making process of the Brooklyn Center Schools.
2. To provide a communication link with the district's parents/guardians and special education staff.
3. To advocate for high quality regular and special education programs.

MEMBERSHIP:

The committee shall be limited to 8 members and shall include representatives from parents and district staff. The following are suggested areas of representation:

1. Three parents representing children from the following age groups

- A. Secondary
- B. Elementary
- C. Early Childhood Special Education

2. Staff and Student Representation

- A. Two special services leaders or staff representing their school or ECSE program
- B. Two special education students
- C. Director of Special Services, Brooklyn Center Community Schools

3. Membership Term
 - A. Two years
 - B. Adhoc unlimited

TERMS OF MEMBERSHIP:

Committee members will serve a two-year term. The term in office shall start with the first meeting in November. Those appointed during the year shall start their two-year term on the following November or shall finish the term according to above rotation schedule. The membership committee shall confirm continuation on a yearly basis for all members. Persons interested in membership should call the Brooklyn Center Special Education Office (763)450-3386 #4010 for more information.

Meetings:

The Special Education Advisory Council shall meet two times per year in November and March, with special meetings called at the discretion of the Director of Special Special. One-third of the council membership shall constitute a quorum. Meetings shall be limited to 90 minutes in length and will be open to the public. Agendas will be set by the director in consultation with the superintendent, principals, teachers, staff and parent/guardian membership.

Operational Procedures:

The committee shall advise the Director of Special Services regarding current issues, program development, parental concerns and involvement, district-wide guidelines and procedures.

The committee shall have access to the Superintendent of Schools through the Director of Special Services.

Reports of committee activities and recommendations shall be presented to the School Board.

Staff:

The Director of Special Services shall serve as an ex-officio member of the Special Education Council and shall assure that a special education staff person shall be available to record and distribute minutes of meetings of the Council, arrange for appropriate meeting space and mail out meeting notices and agendas.

Recruiting:

Special services leaders and staff will encourage parents/guardians to become involved in SEAC by discussing it at parent/teacher conferences and/or IEP meetings. SEAC information fliers are available at fall open house events and the spring family connection event.

Appendix F:

Problem Solving, Part C referrals, Part B referrals

BCCS ECSE Initial Referral Process

The steps below are what BCCS does in response to an initial referral and in support of implementation of the MDE pathways (documents linked to the right).	Part B Post-Referral Pathways	Part C Post-Referral Pathways
Step (Note: This is not a chronological list. Steps may be occurring at the same time and order may vary.)	Who?	Notes
RECEIVING A REFERRAL		
Community Referrals through HMG: Check address on Poll Finder website to confirm student is in district. If yes, continue and accept referral within 48 hours of receipt of email notification. (click link in email and log in) and enter the child's age at the time of referral (years, months and days). If no, "reject" in the Help Me Grow system, with a note about what district they reside in. Community Referral (not through HMG): School Psychologist will contact referring source to check PollFinder, discuss concerns, and will encourage referring source to use HMG system if able. Parent/guardian request for evaluation: School Psychologist will contact parent/guardian to check PollFinder, discuss concerns, and discuss the evaluation process. Early Learning Services (through screening results or from staff) Referral:: Upon receipt of the internal referral form, the address/pollfinder is checked if the child is in the preschool 3's class (resident district is responsible to evaluate). If BC is responsible for eval, parent/guardian is contacted for intake. Upload the Early Childhood Screening into Synergy.	School Psychologist if M-F, teacher calendar, etc. Team Coordinator in off hours, breaks, etc. and back-up as needed	
Add student to either the Part B or Part C Referral tab	School Psychologist (Team Coordinator will add if they accept it.)	
GATHERING REFERRAL INFORMATION		
Determine if we need to contact referral source and gather additional information (this is most likely a need if the referral comes from CPS or if it is unclear if the family needs an interpreter)	School Psychologist	
Explore legal parent when applicable for unique situations (MDE information , Contact Director for info. from County Foster list)	School Psychologist	

Contact the family to discuss referral received, if the child has already been screened (ages 3-5 only) and if there are any medical/health diagnoses. If no screening has been completed (age 3-5 only), help get screening set up. If there are medical/health conditions, discuss obtaining a ROI and gauge willingness to evaluate. If screening has been completed, gauge willingness to evaluate. If family is interested in the eval, explain the evaluation process including an evaluation may include testing with other providers (OT, SW, Speech, etc), gather information (gather developmental and background information not already obtained from referral source). PART C: set up eval planning meeting with family (ensure enough information is received to determine areas of concern for testing; set up meeting and create google calendar invite with all necessary team members). PART B: explain the team will discuss and an ECSE teacher will be calling to set up an evaluation planning meeting that includes providers from areas of concern (indicate specific areas of concern on CST Referral spreadsheet obtained during family interview - this may/may not match the initial Referral area of need) If family is not interested in the eval, offer the option of screening (even if child has already been screened). If family does not want an eval and does not want a screening, send stand ready PWN. If family agrees to screening, help get screening set up. Document all contact and contact attempts in ECSE CST Referral spreadsheet in the "Contact attempts" column. Be sure to try various methods, times, etc. This column will include any contact attempt made AND the date of the formal contact.	School Psychologist	Part C only: Label calendar appointments so it is known where they are (ie: Home visit, @Kindercare, etc.) Block off times you are holding because they have been offered to someone else. Be mindful of transition time as much as possible Age 3-5 Screening: if child has never been screened and a screening is desired as a way to determine next steps: set up screening with ECSE Teacher on a Friday, otherwise complete CSCF, which will be sent to ELS Manager; if a family does not want an eval but is interested in screening, complete CSCF. For either scenario, School Psychologist is the main contact and will follow up to get screening results for any next steps.
Submit student information to have student added to Synergy & SpEd Forms. *Requires additional information obtained from parent or referral source.	School Psychologist	
Child is "enrolled" as an ECSE Referral	Team Coordinator	
Referrals and workloads are regularly reviewed to guide who referrals will be assigned to	Team Coordinator, School Psychologist, Special Services	

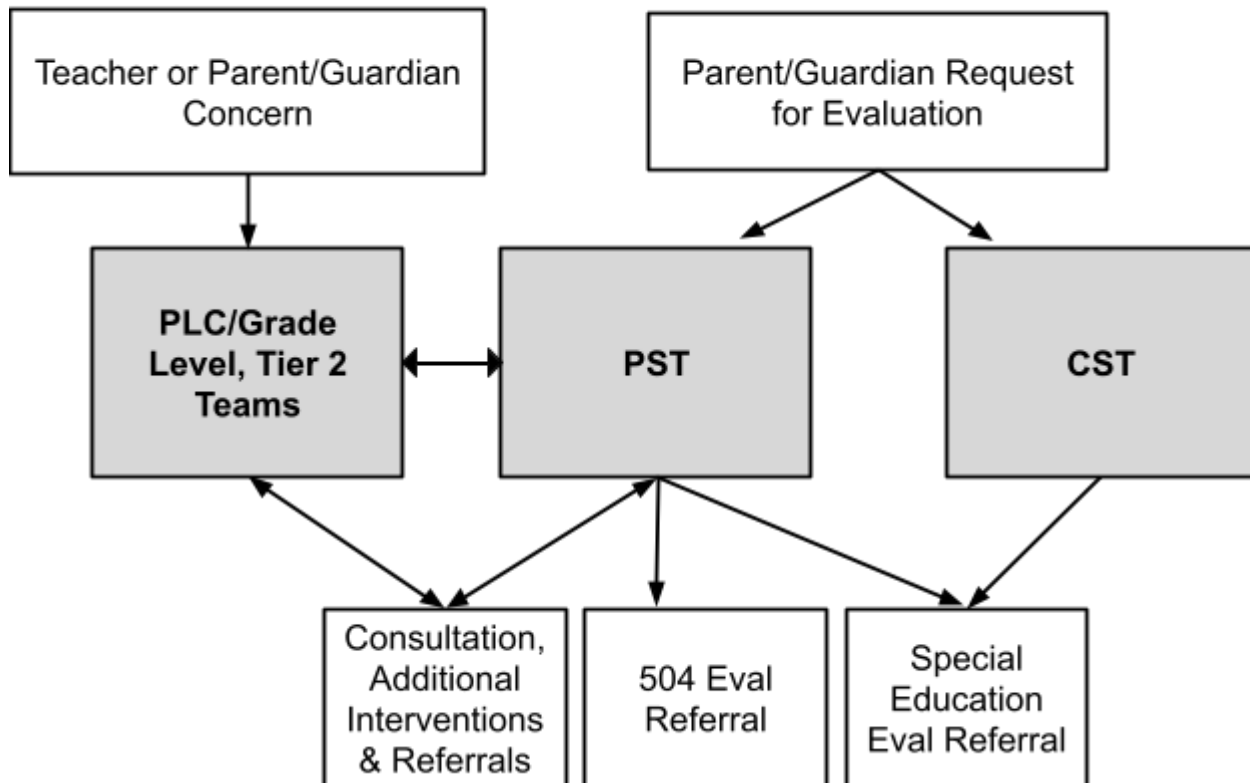
	Supervisor/Manager	
TEAM COLLABORATION		
Bring information to CST. During meetings, we will discuss the information and determine next steps. If during CST there is information missing that will impact decision making in a specific developmental area, the individual provider will call the family, and determine if they need to attend the eval planning meeting. Any adjustments made will be based on the expertise of the individual that works in that area. (ie: We all ask questions and share thoughts, but the OT/PT/SLP/Social Worker/etc decide on their involvement, testing, etc.). Part C: School Psychologist will have determined if we are moving into eval prior to CST and will already have set up the eval planning meeting if so. If the family was not interested, there were no significant concerns, or family was not able to be reached, stand ready PWN was already sent by School Psychologist. CST conversation is to ensure necessary info is in place, meeting is set, and to share any other pertinent info. Part B: If the team is moving to evaluate, CM will call family to set up eval planning meeting and will invite appropriate team members based on information/areas of concern School Psychologist received during initial family contact.	School Psychologist and Team Coordinator will co-facilitate. Team Coordinator will attend as much as possible as a resource.	As part of the ongoing monitoring of workloads, referrals will be assigned prior to CST. School Psychologist will assign CM in SpEd Forms when this is determined. ECSE Teacher case manages evals for students in their classes - initials and re-evals. If testing assistance is needed, Team Coordinator will work with them to determine support.
WRAPPING UP THE REFERRAL PROCESS		
Upload HMG referral to SpEd Forms History of child. Close feedback loop with referral source	School Psychologist	
Enter all communication attempts and conversations/emails (all contact attempts, the initial intake conversation, any follow up contact prior to eval starting) related to the referral into SpEd Forms Communication Log.	School Psychologist	
Reminder 3-5 only: Schedule initial meeting with family and applicable team members - this is an evaluation planning meeting; also consider if any additional ROIs are needed for the eval process (ex: medical, daycare, etc)	Assigned eval CM	
Attend eval planning meeting (as scheduled by School Psychologist for Part C or as scheduled by ECSE eval CM for Part B)	Staff as assigned	
Evaluation plan is written (all providers are responsible for determining which specific tests are being proposed and are responsible to write their own information into the eval PWN)	Staff as assigned	

Eval can begin with parent/guardian signature		
---	--	--

BCCS K-12 PROBLEM SOLVING PROCESS

BCCS has an established [Problem Solving Process](#) within the MnMTSS framework if a parent/guardian and/or teacher/staff have academic, social/emotional, or behavioral concerns. Teams follow this process when a concern is present such as when a parent/guardian expresses a concern about their child's education but is not asking for a special education evaluation. See flow chart below.

BCCS Problem Solving Process



Steps of the Problem-Solving Process

- **Step 1. Best practices have been implemented in the Classroom with Core Instruction**
 - When a teacher has a concern about a student and wishes to seek collegial assistance, a teacher will bring the concern to their PLC/Grade Level Team for discussion about possible classroom-based interventions for that student. Teacher should notify parent/guardian regarding concern(s) and gather input. Classroom-based interventions and supports are documented.
 - When a teacher has a concern about a student receiving special education services, the case manager should be contacted and informed about those concerns. If the concerns about the student's performance are already addressed in the student's IEP the case manager will follow up on the concerns. If the concerns are not addressed in the current IEP, classroom interventions should be discussed and designed at PLC/Grade Level Team meetings.

- When a parent/guardian has a concern, see BCCS Request for Evaluation and progress to Step 4. The referral goes to PST and the team determines the next step for this concern based on information the team collects about the student.

➤ **Step 2. Develop a Classroom-based Intervention Plan**

- At PLC/Grade Level Team meetings, teachers discuss and develop the appropriate plan based on the student's needs and document that intervention in Panorama.
- The classroom teacher(s) implements and monitors the effectiveness of the intervention for 4-6 weeks and determines if the plan is successful or not.
- If the intervention was successful the teacher continues to implement and monitor. If the plan is unsuccessful, at PLC/Grade Level Team, teachers discuss and develop a second intervention on the same skill. Teacher documents, implements and monitors the plan for 4-6 weeks then PLC/Grade Level/teacher reviews the plan's success.
- If the second intervention was successful the teacher continues to implement and monitor. If the plan is unsuccessful, progress to Step 3 Tier 2.

➤ **Step 3. Develop a Tier 2 Academic or Non-academic Intervention Plan**

- Classroom teacher may refer student to Tier 2 Team when classroom-based interventions have not been successful. Tier 2 Interventionists are non-classroom teachers. General education teacher continues to inform family and seek input and partnership. The Tier 2 teams may also plan for a Tier 2 intervention based off universal screening data for reading, math and SEL
- At MnMTSS Tier 2 Team meeting, staff discuss and develop the appropriate plan based on the student's needs and prior interventions and document that intervention.
- The Tier 2 Interventionist implements and monitors the effectiveness of the intervention for 4-6 weeks and determines if the plan is successful or not.
- If the intervention was successful the Tier 2 Interventionist continues to implement and monitor. If the plan is unsuccessful, at the MnMTSS Tier 2 Team meeting, staff discuss and develop a second intervention on the same skill. Interventionist documents in Panorama, implements and monitors the plan for 4-6 weeks then the Tier 2 Team reviews the plan's success.
- If the second intervention was successful the Interventionist continues to implement and monitor. If the plan is unsuccessful, progress to Step 4 Tier 3.

Formal PST Process Begins

➤ **Step 4. Referral to PST**

- Classroom Teacher completes the CSCF and requests a referral to PST. PST meeting is scheduled to discuss the student being referred. Teacher updates parent/guardian and continues to seek input and partnership. Classroom Teacher shares any pertinent parent/guardian information obtained with PST.
- PST reviews student educational information, current Tier 2 intervention plan and any prior interventions. PST considers a student's culture, language and any medical information and vision and hearing screening results that may be impacting learning. This is done through a comprehensive file review and/or parent/guardian and staff interviews. PST discusses possible individualized student interventions and if other resources are needed to assist a student, such as specialists, community partners or other outside resources.
- PST completes RIOT, ICEL and/or a brief FBA as needed based on student need.

- PST develops intervention plan, including picking an intervention to target the skill of concern, assigning the interventionist, progress monitoring timeline and intervention fidelity checks. Plan is documented. Progress to Step 5

➤ **Step 5. PST implements, monitors and adjust plan**

- PST interventionist implements the intervention for 4-6 weeks
 - If plan is not being implemented with fidelity, timeframe for implementation and monitoring will be adjusted
- PST reviews data. If the student is making adequate progress, the interventionist continues to implement and monitor. If the plan is unsuccessful, at the PST review meeting, PST discusses and develops a second intervention on the same skill. PST interventionist documents in Panorama, implements and monitors the plan for 4-6 weeks then PST reviews the plan's success.
 - PST will continue to review progress until student no longer needs monitoring, after this time, PLC will monitor student growth and progress.
 - If student's progress is not on target, progress to Step 6.

➤ **Step 6. PST Review after second intervention**

- If student progress is still not on target, PST can alter the plan again or progress to Step 7.

➤ **Step 7. Special Education Referral**

- If, despite all classroom, Tier 2 and Tier 3 PST interventions the student continues to show limited progress, student may be referred to CST during the PST final decision-making process by referring the student to CST. Prior to the referral being made, PST needs to confirm the following have been in place and/or addressed
 - Classroom teacher has kept the parent/guardian informed of concerns and interventions throughout the problem solving process.
 - Classroom teacher must inform the parent/guardian PST is recommending a special education evaluation be considered through CST.
 - If parent/guardian does not agree with the referral to CST, student remains in PST and new interventions are determined (back to Step 5 OR PST may consider re-doing Step 4 to determine if additional information can be obtained). This is documented in the Synergy Student Contact Log.
 - Student has passed vision and hearing screening within the last year
 - Language, cultural and medical factors have been considered
 - Through PST there have been at least two Tier 3 interventions implemented with fidelity that are individualized to the student and targeted to a specific skill/need, with regular progress monitoring data, and with trendlines showing inadequate progress was made. This information must be in Panorama.
- After the above have been considered or addressed, PST may refer the student to CST and complete the [Referral for Special Education Evaluation Consideration](#). The completed referral consideration form is then given to the CST facilitator, who will add the student to the CST agenda.
 - A referral for a special education evaluation consideration to CST does not automatically mean an evaluation will occur. CST reviews all information and makes determination as a multidisciplinary team.

Appendix G:

Special Education Contact Information

Special Services Department Structure

Leadership Reference Resource

District Staff	Position	Primary Contact for	Office location
Deirdra Yarbro dyarbro@bccs286.org 763-450-3386	Director of Special Services	Staff hiring and performance management, PD, programming, budget, state and community partnerships, district alignment, overall oversight	District office
Krystal Jenson kjenson@bccs286.org 763-450-3386	Reporting and Compliance Administrative Assistant	Interpreters, Records requests, State and federal reporting, third party billing, MARSS, Sped Forms support, purchasing	District office
Suzanne Schlichte sschlichte@bccs286.org 763-450-3386	Special Services Manager	Districtwide Instruction and Curricular Resources, Processes/Procedures, ESY, Inter-department collab, Insight, ECA	District office/float
Debbie Erickson derickson1@bccs286.org 763-561-2120	Health Services Manager	Health services, HRC, HRC medical partnerships	BCS/float
Caiti Knudson cknudson@bccs286.org 763-561-4480	Special Services Supervisor	BCE	BCE
Josh Harrison jharrison@bccs286.org 763-561-2120	Special Services Supervisor	BCS	BCS
Anthony Turner aturner@bccs286.org 763-450-3386	Behavioral and Mental Health Special Services Supervisor	287 district representative, Section 504 process, HHM and foster care process, mental health services, SEL implementation and intervention	District office/float
Jill Fox jfox@bccs286.org 763-561-4480	ECSE and AT Coordinator	ECSE, districtwide AT	ECSE