Wayzata Public Schools Total Special Education System (TSES)

This document serves as the Total Special Education System Plan for Wayzata Public Schools 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).

Ginny Nyhus, Wayzata Public School's special education director, is responsible for program development, coordination, and evaluation; in-service training; and general special education supervision and administration. Ginny Nyhus may be reached at 763-745-5040 or Ginny.Nyhus@wayzataschools.org

I. Child Study Procedures

The district's identification system is developed according to the requirement of nondiscrimination as Wayzata Public Schools 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

Wayzata Public Schools 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 Wayzata Public Schools 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.

(3) The child's eligibility is established through the application of informed clinical opinion. Informed clinical opinion may be used as an independent basis to establish a child's eligibility under this part even when other instruments do not establish eligibility; however, in no event may informed clinical opinion be used to negate the results of evaluation instruments to establish eligibility.

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:

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

The child meets one of the criteria for developmental delay in subitem (1) and the criteria in subitem (2). Wayzata Public Schools has 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.

Wayzata Public School's plan for identifying a child with a specific learning disability is consistent with Minnesota Rule 3525.1341. Wayzata Public Schools implements its interventions consistent with that plan. The plan details the specific scientific, research-based intervention (SRBI) approach, including timelines for progression through the model; any SRBI that is used, by content area; the parent notification and consent policies for participation in SRBI; procedures for ensuing fidelity of implementation; and a district staff training plan. Wayzata Public School's plan for identifying a child with a specific learning disability is attached as Appendix A, Appendix A-1, and Appendix A-2.

B. Evaluation

Part C

Evaluation of the child and assessment of the child and family will be conducted in a manner consistent with Code of Federal Regulations, title 34, section 303.321.

A. General. (1) The lead agency must ensure that, subject to obtaining parental consent in accordance with §303.420(a)(2), each child under the age of three who is referred for evaluation or early intervention services under this part and suspected of having a disability, receives—

(i) A timely, comprehensive, multidisciplinary evaluation of the child in accordance with paragraph (b) of this section unless eligibility is established under paragraph (a)(3)(i) of this section; and

(ii) If the child is determined eligible as an infant or toddler with a disability as defined in §303.21--

(A) A multidisciplinary assessment of the unique strengths and needs of that infant or toddler and the identification of services appropriate to meet those needs;

(B) A family-directed assessment of the resources, priorities, and concerns of the family and the identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of that infant or toddler. The assessments of the child and family are described in paragraph (c) of this section and these assessments may occur simultaneously with the evaluation, provided that the requirements of paragraph (b) of this section are met.

(2) As used in this part—

(i) Evaluation means the procedures used by qualified personnel to determine a child's initial and continuing eligibility under this part, consistent with the definition of infant or toddler with a disability in §303.21. An initial evaluation refers to the child's evaluation to determine his or her initial eligibility under this part;

(ii) Assessment means the ongoing procedures used by qualified personnel to identify the child's unique strengths and needs and the early intervention services appropriate to meet those needs throughout the period of the child's eligibility under this part and includes the assessment of the child, consistent with paragraph (c)(1) of this section and the assessment of the child's family, consistent with paragraph (c)(2) of this section; and

(iii) Initial assessment refers to the assessment of the child and the family assessment conducted prior to the child's first IFSP meeting.

(3)(i) A child's medical and other records may be used to establish eligibility (without conducting an evaluation of the child) under this part if those records indicate that the child's level of functioning in one or more of the developmental areas identified in §303.21(a)(1) constitutes a developmental delay or that the child otherwise meets the criteria for an infant or toddler with a

disability under §303.21. If the child's part C eligibility is established under this paragraph, the lead agency or EIS provider must conduct assessments of the child and family in accordance with paragraph (c) of this section.

(ii) Qualified personnel must use informed clinical opinion when conducting an evaluation and assessment of the child. In addition, the lead agency must ensure that informed clinical opinion may be used as an independent basis to establish a child's eligibility under this part even when other instruments do not establish eligibility; however, in no event may informed clinical opinion be used to negate the results of evaluation instruments used to establish eligibility under paragraph (b) of this section.

(4) All evaluations and assessments of the child and family must be conducted by qualified personnel, in a nondiscriminatory manner, and selected and administered so as not to be racially or culturally discriminatory.

(5) Unless clearly not feasible to do so, all evaluations and assessments of a child must be conducted in the native language of the child, in accordance with the definition of native language in §303.25.

(6) Unless clearly not feasible to do so, family assessments must be conducted in the native language of the family members being assessed, in accordance with the definition of native language in §303.25

B. Procedures for evaluation of the child. In conducting an evaluation, no single procedure may be used as the sole criterion for determining a child's eligibility under this part. Procedures must include –

(1) Administering an evaluation instrument;

(2) Taking the child's history (including interviewing the parent);

(3) Identifying the child's level of functioning in each of the developmental areas in § 303.21(a)(1);

(4) Gathering information from other sources such as family members, other care-givers, medical providers, social workers, and educators, if necessary, to understand the full scope of the child's unique strengths and needs; and

(5) Reviewing medical, educational, or other records.

C. Procedures for assessment of the child and family.

(1) An assessment of each infant or toddler with a disability must be conducted by qualified personnel in order to identify the child's unique strengths and needs and the early intervention services appropriate to meet those needs. The assessment of the child must include the following –

(i) A review of the results of the evaluation conducted by paragraph (b) of this section;

(ii) Personal observations of the child; and

(iii) The identification of the child's needs in each of the developmental areas in § 303.21(a)(1).

(2) A family-directed assessment must be conducted by qualified personnel in order to identify the family's resources, priorities, and concerns and the supports and services necessary to enhance the family's capacity to meet the developmental needs of the family's infant or toddler with a disability. The family-directed assessment must –

(i) Be voluntary on the part of each family member participating in the assessment;

(ii) Be based on information obtained through an assessment tool and also through an interview with those family members who elect to participate in the assessment; and

(iii) Include the family's description of its resources, priorities, and concerns related to enhancing the child's development.

Part B

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 parental permission to conduct the evaluation or the expiration of the 14-calendar day parental response time in cases other than initial evaluation, unless a conciliation conference or hearing is requested.

Wayzata Public Schools 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 of the child before the evaluation is conducted. Parental 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 to consent to an initial evaluation or re-evaluation.

Evaluation Procedures

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

A. Wayzata Public Schools shall provide notice to the parents 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, Wayzata Public Schools shall:

(1) use a variety of evaluation tools and strategies to gather relevant functional and developmental information, including information provided by the parent, 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. Wayzata Public Schools 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 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.

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 parents 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 parents, 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 parental consent, in accordance with subpart 1, prior to conducting any reevaluation of a pupil, except that such informed parental 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 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 parents of that determination and the reasons for it, and the right of such parents 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 parents.

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.

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 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 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

Wayzata Public Schools plan for receiving referrals from parents, physicians, private and public programs, and health and human services agencies is attached as Appendix B.

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

Wayzata Public Schools 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 Wayzata Public School’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) Small group services in a special education setting

   (2) One on one in a special education setting

   (3) Small group services in a general education setting

   (4) One on one services in a general education setting

   (5) Indirect services

B. Sites available at which services may occur:

   (1) All 11 school buildings

Early Childhood Special Education – Wayzata Early Learning School

Birchview Elementary

Gleason Lake Elementary

Greenwood Elementary

Kimberly Lane Elementary

Oakwood Elementary

Meadow Ridge Elementary

North Woods Elementary

Plymouth Creek Elementary

Sunset Hill Elementary

Central Middle School

East Middle School

West Middle School

Wayzata High School

B. Intermediate District 287 Programs, including Care and Treatment

Homebound locations

C. Available Instruction and related services

Speech Language

Occupational Therapy

Physical Therapy

Deaf Hard of Hearing Services

Audiology Services

Blind Visually Impaired

Social Work Services

Physical Health Impairments

III. Administration and Management Plan.

Wayzata Public Schools 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 following table illustrates the organization of administration and management to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils:

Ginny Nyhus Director of Special Services		763-745-5040 Ginny.nyhus@wayzataschools.org	Responsible for program development, coordination, and evaluation; in-service training; and general special education	District-Wide

			supervision and administration.	
Amy Vandunk Supervisor of Special Education		763-745-5041 Amy.Vandunk@wayzataschools.org	Responsible for due process and supervision of special education staff.	Middle Schools
Michele Bedor Early Childhood Special Education Coordinator		763-745-5042 Michele.Bedor@wayzataschools.org	Responsible for due process and program implementation for ECSE.	Wayzata Early Learning School
Jeri Johnson Supervisor of Special Education		763-745-5062 Jeri.Johnson@wayzataschools.org	Responsible for due process and supervision of special education staff.	BV, GL, GW, PC, SH & OW
Allana Walsh Supervisor of Special Education		763-745-4403 Allana.Walsh@wayzataschools.org	Responsible for due process and supervision of special education staff.	Transition, KL, NW & MR
Sara Stack Supervisor of Special Education		763-745-6663 Sara.Stack@wayzataschools.org	Responsible for due process and supervision of special education staff.	Wayzata High School

B. Due Process assurances available to parents: Wayzata Public Schools has appropriate and proper due process procedures in place to assure effective and efficient results of child study procedures and method 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 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 notifies the district of an objection within 14 days of when the district sends the prior written notice to the parent; and b) state that a parent who objects to a proposal or refusal in the prior written notice may request a conciliation conference or another alternative dispute resolution procedure.

(2) Wayzata Public Schools 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. A district may not override the written refusal of a parent to consent to an initial evaluation or reevaluation.

(3) A parent, after consulting with health care, education, or other professional providers, may agree or disagree to provide the parent'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 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.

(5) Conciliation Conference: a parent has the opportunity to meet with appropriate district staff in at least one conciliation conference if the parent objects to any proposal of which the parent receives prior written notice. Wayzata Public Schools holds a conciliation conference within ten calendar days from the date the district receives a parent'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 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, Wayzata Public Schools informs parents 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 Wayzata Public School's Procedure Safeguard Notice, attached as Appendix C and Appendix C-1.

IV. Operating Procedures of Interagency Committees

A. Community Transition Interagency Committee:

A. Wayzata Public School's Community Transition Interagency Committee is established in cooperation with other districts/special education cooperatives in cooperation with the county or counties in which the district is located, for youth with disabilities, beginning at grade 9 or age equivalent, and their families.

B. Wayzata Public Schools Community Transition Interagency Committee is the Southwest Metro CTIC and includes individuals listed in Appendix D:

C. The chair of the Community Transition Intra-agency Committee (CTIC) is Barbara Hodne. CTIC provides for interagency collaboration that can support and help provide transition services within the community to individuals with disabilities. Their mission is to connect youth and young adults with disabilities and their families to community resources and to empower them to strengthen advocacy skills in order to navigate their life plan. The Southwest CTIC member districts are Bloomington, Eden Prairie, Hopkins, Minnetonka, Richfield, St. Louis Park, Orono, Wayzata, and Westonka. The following agencies are represented at CTIC:

(1) **Autism Works**
Contact information: Camille Loughlin camille.loughlin@autism-works.com

(2) **Community Involvement Program:** community job placement, day training program.
Contact information: Bobbi VanGrinsven bvangrinsven@cipmn.org

(3) **Fraser**: Career planning and employment, Vocational Rehabilitation Services partner, work on self-advocacy skills, many individuals with executive functioning challenges, main focus is on Traumatic Brain Injury, Autism Spectrum Disorders, Fetal Alcohol Syndrome, and Pervasive Developmental Disorders.

Contact information: Chris Bentley chris@fraser.org

(4) **Learning Exchange**: Community Education, partner with adaptive recreation, inclusion in community education classes, work with 18-21.
Contact Information: Janet Clarke jclarke@bloomington.k12.mn.us, Gina Carpenter gcarpenter@bloomington.k12.mn.us

(5) **Opportunity Partners**: Youth transition program, job retention, contract with local schools, 67 area businesses for employment, no time restraints, paid positions.
Contact information: Jennie Meuwissen jmeuwissen@opportunities.org

(6) Vocational Rehabilitation: Brooklyn Park office works with Wayzata and Orono.
Contact information: Angela Davis Revak angela.davis@state.mn.us

The district contacts for CTIC are as follows:

- **Bloomington Transition:** Deborah Dukelow ddukelow@bloomington.k12.mn.us, Sarah Levinski slevinski@bloomington.k12.mn.us
- **Eden Prairie:** Donna Smestad dsmestad@edenpr.k12.mn.us, Kathy Palmer kathypalmer@edenpr.k12.mn.us
- **Eden Prairie Tassel Plus:** Nicole Higgins nhiggins@edenpr.org
- **Edina:** Barbara Hodne barbara.hodne@edinaschools.org (CTIC co-chair), Kimberly K Busse kimberly.busse@edinaschools.org (CTIC co-chair)
- **Minnetonka:** Ramona Anderson ramona.anderson@minnetonka.k12.mn.us
- **Richfield:** Luann Tauer luann.tauer@richfield.k12.mn.us
- **Transition Plus (Saint Louis Park, Hopkins, Minnetonka):** Deni Hooker deni.hooker@minnetonka.k12.mn.us, Lisa Loeding lloeding@minnetonka.k12.mn.us
- **Wayzata:** Jen Gallagher jennifer.gallagher@wayzataschools.org
- **Westonka:** Caitlyn Moody moodiec@westonka.k12.mn.us

The parent representative for CTIC is Dawn Brasch (dbrasch@ausm.org).

D. The Community Transition Interagency Committee meets the 2nd Thursday of each month, October through May.

E. The Community Transition Interagency Committee's operating procedures are attached as Appendix E, and include the following:

(1) identification of current services, programs, and funding sources provided within the community for secondary and postsecondary aged youth with disabilities and their families;

(2) facilitation of the development of multiagency teams to address present and future transition needs of individual students on their individualized education programs;

(3) development of a community plan to include mission, goals, and objectives, and an implementation plan to assure that transition needs of individuals with disabilities are met;

(4) recommendations of changes or improvements in the community system of transition services;

(5) exchange of agency information such as appropriate data, effectiveness students, special projects, exemplary programs, and creative funding of programs; and

(6) preparation of a yearly summary assessing the progress of transition services in the community including follow-up of individuals with disabilities who were provided transition services to determine post-school outcomes.

F. Wayzata Public Schools disseminates the summary to all adult services agencies involved in the planning and the MDE by October 1 of each year. The most current summary is attached as Appendix E-1.

B. Interagency Early Intervention Committee

A. Wayzata Public School's Interagency Early Intervention Committee is the Region 11.

B. Wayzata Public School*'s* Interagency Early Intervention Committee consists of the individuals listed in Appendix F:

C. The chair of the Early Intervention Committee is Cathy Lombard.

D. The Early Intervention Committee meets at least quarterly.

E. The Early Intervention Committee's operating procedures are attached as Appendix G, and include the following:

(1) development of public awareness systems designed to inform potential recipient families, especially parents with premature infants, or infants with other physical risk factors associated with learning or development complications, of available programs and services;

(2) reduction of families' need for future services, and especially parents with premature infants, or infants with other physical risk factors associated with learning or development complications, implement interagency child find systems designed to actively seek out, identify, and refer infants and young children with, or at risk of, disabilities, including a child under the age of three who: (i) is involved in a substantiated case of abuse or neglect or (ii) is identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure;

(3) establishment and evaluation of the identification, referral, child and family assessment systems, procedural safeguard process, and community learning systems to recommend, where necessary, alterations and improvements;

(4) assurances of the development of individualized family service plans for all eligible infants and toddlers with disabilities from birth through age two, and their families, and individualized education programs and individual service plans when necessary to appropriately serve children with disabilities, age three and older, and their families and recommend assignment of financial responsibilities to the appropriate agencies;

(5) implementation of a process for assuring that services involve cooperating agencies at all steps leading to individualized programs;

(6) facilitation of the development of a transitional plan if a service provider is not recommended to continue to provide services;

(7) identification of the current services and funding being provided within the community for children with disabilities under age give and their families;

(8) development of a plan for the allocation and expenditure of additional state and federal early intervention funds under United States Code, title 20, section 1471 et seq. (Part C, Public Law 108-446) and United States Code, title 20, section 631, et seq. (Chapter I, Public Law 89-313) (this plan in attached as Appendix G*);* and

(9) development of a policy that is consistent with section 13.05, subdivision 9, and federal law to enable a member of an interagency early intervention committee to allow another member access to data classified as not public *(this policy is attached at* Appendix G*).*

(10) identification and assistance in removing state and federal barriers to local coordination of services provided to children with disabilities;

(11) identification of adequate, equitable, and flexible use of funding by local agencies for these services;

(12) implementation of polices that ensure a comprehensive and coordinated system of all state and local agency services, including multidisciplinary assessment practices, for children with disabilities ages three to 21;

(13) use of a standardized written plan for providing services to a child with disabilities developed under section 125A.023;

(14) access the coordinated dispute resolution system and incorporate the guidelines for coordinating services at the local level, consistent with section 125A.023;

(15) use the evaluation process to measure the success of the local interagency effort in improving the quality and coordination of services to children with disabilities ages three to 21 consistent with section 125A.023;

(16) development of a transitional plan for children moving from the interagency early childhood intervention system under sections 125A.259 to 125A.48 into the interagency intervention service system under this section;

(17) coordination of services and facilitation of payment for services from public and private institutions, agencies, and health plan companies; and

(18) share needed information consistent with state and federal data practices requirements.

F. The Early Intervention Committee participates in needs assessment and program planning activities conducted by local social service, health and education agencies for young children with disabilities and their families.

G. The Early Intervention Committee reviews and comments on the early intervention service of this Total Special Education System Plan for Wayzata Public Schools , the county social service plan, the section(s) of the community health services plan that addresses needs of and service activities targeted to children with special health care needs, the section on children with special needs in the county child care fund plan, sections in Head Start plans on coordinated planning and services for children with special needs, any relevant portions of early childhood education plans, such as early childhood family education or school readiness, or other applicable coordinated school and community plans for early childhood programs and services, and the section of the maternal and child health special project grants that address needs of and service activities targeted to children with chronic illness and disabilities.

V. Interagency Agreements the District has Entered

Wayzata Public Schools 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:

Name of Agency	Terms of Agreement	Agreement Termination/ Renewal Date	Comments
Intermediate District 287	See Appendix H	July 1 of each fiscal year	Planning and withdrawal notices due each February

VI. Special Education Advisory Council

In order to increase the involvement of parents of children with disabilities in district policy making and decision making, Wayzata Public Schools has a special education advisory council.

A. Wayzata Public School's Special Education Advisory Council is individually established.

B. Wayzata Public School's Special Education Advisory Council is not a subgroup of an existing board, council, or committee.

C. Wayzata Public Schools Special Education Advisory Council consists of the individuals listed in Appendix I:

D. Wayzata Public Schools Special Education Advisory Council meets four times each year.

E. The operational procedures of Wayzata Public Schools Special Education Advisory Council are attached as Appendix J.

VII. Assurances

Code of Federal Regulations, section 300.201: Consistency with State policies. Wayzata Public Schools, 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)).

Yes, Wayzata Public Schools provides this assurance.