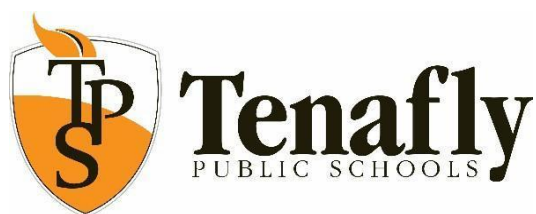


Parent Special Education Reference Manual



Tenaflly Special Education Services PreK-12
Department of Special Services
500 Tenaflly Road, Tenaflly New Jersey 07670

TENAFLY PUBLIC SCHOOLS

TENAFLY, NEW JERSEY

Vision Statement

The Department of Special Services at Tenaflly Public Schools envisions a school community where every learner is valued, supported, and empowered to reach their full potential. We strive to foster a culture of inclusion, equity, and respect. A school community where diverse learning needs are embraced as opportunities for innovation, empathy, and growth. Our vision is a district where all students, regardless of ability, thrive academically, socially, and emotionally, and where collaboration between educators, families, and specialists forms the foundation for lifelong learning and success.

Mission Statement

Our mission is to create inclusive learning environments where every student can thrive. We are committed to recognizing and nurturing the unique strengths and needs of each learner, and to ensuring access to high-quality instruction, specialized supports, and services that promote meaningful participation in all aspects of school life. We believe that empowering educators is essential to student success. Through ongoing professional development, collaborative problem-solving, and the use of evidence-based practices, we equip teachers and staff with the tools, strategies, and confidence needed to support students of all backgrounds and abilities. Together, with families and community partners, we work to build a district where diversity is celebrated, potential is unlocked, and every student is prepared for a bright, fulfilling future.

This reference manual is intended to provide the reader with information regarding special education services in the Tenaflly Public Schools, along with additional information to support students with disabilities.

All of the information contained within this document is accurate as of August 2026. The manual will be updated as changes occur in staffing, program offerings, and state requirements

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Introduction

As the parent of a special education student, you are a key part of the process that provides an appropriate and caring educational experience for your child. You are the advocate who remains a constant in your child's life as he or she progresses through the school system. This handbook is an effort to provide you with clear and accurate information that will help you work effectively with district personnel. It does not replace state laws and guidelines, which are detailed in separate handbooks that you will receive throughout your child's education. This book is a resource in tandem with your personal communication with district professionals.

Tenaflly's Mission Statement applies to every child in our district. We welcome you in sharing the responsibility, and privilege, of educating your child.

About Special Education Services

Evaluation and intervention services are provided to students by the Child Study Team, special education instructional staff, and related services specialists. A referral to the Child Study Team may be initiated by a parent/guardian, teacher, school nurse, school administrator, special services staff, medical specialist and other professionals or agencies concerned with the welfare of students when an educational disability may be suspected.

Public schools are required by law to develop a process for identifying potentially educationally disabled students. An educationally disabled student is one who may be experiencing difficulties of a physical, emotional, academic, intellectual, or social nature to the extent that the student is not able to function effectively in a regular education program. A Child Study Team evaluation is necessary to determine the basis of the difficulties and whether the student is eligible for special services. If the student is determined eligible for special education and related services an individualized educational program (IEP) is developed.

With federal passage of the Individuals with Disabilities Education Act (IDEA), parents/guardians are an integral part of the IEP Team that plans an appropriate school program and an IEP for the educationally disabled child. Parents and school personnel work together throughout this process in developing an appropriate program to meet the unique student needs. The district provides the full continuum of program options as outlined in the New Jersey Administrative code (NJAC 6A: 14). The complete rules and regulations pertaining to Child Study Team procedures and students with disabilities are contained in the New Jersey Administrative Code, Title 6A, Chapter 14, Special Education. Parents/Guardians may obtain this document by contacting the Department of Special Services at 201-816-4534 or by accessing the website at <http://www.state.nj.us/education/specialed/>

About Child Study Team

The Child Study Team is a multi-disciplinary educational team that is responsible to locate, identify, evaluate, determine eligibility, and develop an Individualized Education Program (IEP) for students suspected of having educational disabilities. This group of specialists is employed by the Tenaflly Public School district to provide consultative, evaluative, and prescriptive services to teachers and parents. The team provides diagnostic services to children from age 3 to 21 that have been identified as having a potential disabling condition.

Counseling and consultative services are available for any school-aged student experiencing difficulty in learning or behavior. The Child Study Team (CST) together with district's teachers, administrators, and I&RS committees make recommendations for programs and placements which will best address the needs of students who are experiencing school-related programs. The team consists of a school psychologist, learning disabilities teacher/consultant, and school social worker, and in some cases, a speech-language specialist.

Who is on the Child Study Team?

School Social Worker

The social worker's primary responsibility is as a member of the Child Study Team. As such, the social worker contributes to the CST evaluation process by conducting a "social history evaluation." The social history evaluation is an assessment of bio-psychosocial factors (social, emotional, physical, behavioral, and cultural) that may impact a child's adjustment to and performance in school. The school social worker also provides counseling, crisis intervention and consultation services, as well as helping families' access community services.

Learning Disabilities Teacher/Consultant (LDT/C)

The Learning Disabilities Teacher-Consultant is a master teacher who functions in the school environment as an educational diagnostician, instructional programmer, Child Study Team member, educational consultant, and instructional leader. The LDT/C must have the professional preparation to make assessments, analyses, and classifications of students' learning differences; understand and implement special education law; plan and facilitate delivery of programs for children with learning differences; transfer specific and successful instructional techniques to classroom teachers through consultation, collaboration, and in-service education; and effectively communicate and consult with parents, counselors, teachers, and administrators. An educational assessment shall be the responsibility of a learning disabilities teacher/consultant employed by the district board of education. It shall include review of the student's educational history, conferences with the student's teacher(s), and an evaluation and analysis of the student's academic performance and learning characteristics.

School Psychologist

The school psychologist consults with the student's teachers and assesses the student's current cognitive (thinking and learning), social, adaptive, and emotional status. The activities involved in the evaluation vary at times from student to student but, in general, most children are given an intelligence test to determine a child's likelihood for success within the academic arena. For certain students the school psychologist provides counseling, crisis intervention or consultation services.

Case Manager

In addition to their respective roles, the social worker, school psychologist, and learning consultant also serve as case managers for students receiving special education services. Students are assigned a case manager at the time of the referral, however, periodically there are changes in assignments. The case manager coordinates the evaluation process and IEP development, as well as the monitoring and evaluation of the effectiveness of the IEP. The case manager facilitates communication between home and school, and coordinates the annual review and reevaluation process. The case manager is knowledgeable about the student's educational needs and program, as well as special education procedures and procedural safeguards, and is responsible for transition planning. A speech/ language specialist may also serve as a case manager.

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The First Step in the Referral Process

The Intervention and Referral Service (I&RS) team serves as a resource for teachers and is an integral part of the pre-referral process. I&RS members typically include, but are not limited to, the school principal, nurse, counselor, CST members, and teachers. I&RS may also include parents, special education supervisors, speech therapists, or reading specialists. The purpose of the I&RS is to address any possible concerns teachers may have regarding their students' academic, social, or emotional functioning. Based on meetings with teachers, the I&RS team develops case-specific strategies for use in regular education class-rooms. Teachers then implement these strategies according to I&RS recommendations. Parents are informed about the progress of their child through contact with the teacher. **If the strategies are not effective, they may be revised or, if it is suspected that the student is potentially educationally disabled, a referral will be made to the Child Study Team.**

Parents can request their child be brought before the I&RS team. They would do this by contacting the child's teacher or principal.

****Parents are always notified if their child is referred to I&RS.*** Parents can always request a CST evaluation before, during, or after the I&RS process. Written requests for CST evaluations should be directed to the Assistant to the Superintendent for Special Services.

Procedural Safeguards

Handbook on Parents' Rights

IDEA requires school districts to provide parents of a child with a suspected disability, a notice containing a full explanation of the procedural safeguards (legal rights) available under IDEA and other state and federal regulations. This hand-book is called, "Parental Rights in Special Education" (PRISE). Parents can obtain a copy of PRISE in any of the district's schools or in the Child Study Team office or by visiting:

https://www.nj.gov/education/specialed/parents/ParentalRightsinSpecialEducation_June26.pdf

When You Will Receive the Procedural Safeguards

The procedural safeguards must be given to you one time each school year and at the following times:

- a. When your child is first referred for evaluation or when you request an evaluation;
- b. When you request a copy of the procedural safeguards;
- c. When your child is removed for disciplinary reasons and the removal results in a change in placement;
- d. Upon receipt of the first State complaint and/or the first due process petition in a school year, if you should file a State complaint or request a due process hearing; and
- e. Upon revision to the procedural safeguards.

The Identification and Placement Process

Referral

A student is generally referred for evaluation by school personnel through the I&RS team or by the child's parent/guardian. The referral should be made in writing, addressing the specific presenting concerns and the child's current strengths and needs. The referral is presented to the Assistant to the Superintendent for Special Services who assigns the referral to a designated case manager. The assigned case manager has responsibility for managing the referral process. If parents make a referral for evaluation, it is important that they know who is designated to receive the referral, who will manage the referral process and who will be contacting the parent during the referral process. They can obtain this information by calling the child's school or the main number for the Department of Special Services at 201-816-4500.

Evaluation

Informed, signed, parental consent must be received in order for the school to proceed with the evaluation. It is important for the parent to understand the components of the evaluation and how the results of the evaluation will be used to determine eligibility for special education services. An initial evaluation shall consist of a multi-disciplinary assessment in all areas of suspected disability. Such evaluation shall include at least two assessments and shall be conducted by at least two members of the Child Study Team in those areas in which they have appropriate training or are qualified through their professional licensure or educational certification and other specialists in the area of disability as required or as determined necessary.

The specific kind of evaluations a child needs is decided on an individual basis and will include professionals trained to assess specific areas. Persons from varying disciplines including a school psychologist, school social worker, Learning Disabilities/Teacher Consultant, speech-language therapist, physical therapist, audiologist, and/or occupational therapist may conduct evaluations.

The common elements of a comprehensive assessment generally include:

- a. A psychological evaluation, which includes a standardized aptitude test that measures cognitive functioning, a clinical interview, observation, and as needed social-emotional and adaptive behavior rating scales;
- b. A social history, which includes developmental, medical, and educational histories, and parent, teacher, and student interviews;
- c. An educational evaluation, which includes achievement testing, learning style inventory, and a classroom observation; and
- d. A medical evaluation/health appraisal, which includes a physical examination and visual and auditory acuity testing.

Persons trained in the area of hearing or visual impairment may also provide assessment services, if needed. At this step of the process, parents should receive [*Parental Rights in Special Education \(PRISE\)*](#). After parent consent for initial evaluation of a preschool age or school age student has been received, the evaluation, determination of eligibility for services under this chapter, and, if eligible, development and implementation of the IEP for the student shall be completed within

90 calendar days.

You, as a parent, can provide the school with information about your child that you want them to use in deciding if your child has a disability that requires special education and related services. In the event that a parent does not give permission for the school to evaluate the child and the school personnel believe that the child is in need of special education, the school system may, but is not required to, pursue the initial evaluation of the child by utilizing due process procedures.

Independent Evaluations

As described above, before receiving special education services, your child must receive an evaluation if a disability exists. If you disagree with the school's evaluation results, you can request an independent evaluation. This service is provided at the school system's expense and the testing is done by a licensed professional not employed by TPS. The results of the independent evaluation must be considered by the IEP team.

Eligibility

After the required evaluations are completed and summary reports are written and shared with parents, the Individualized Education Program team (IEP Team) conference is held to determine if a child has a disability and needs special education and/or related services. The IEP Team includes the child's parents and professionals who are knowledgeable about the child's learning and behavior in the school environment. The team should discuss every area of physical, behavioral, and academic functioning that affects the child's educational performance. The team must decide if the student (a) meets the eligibility criteria for a disability area as outlined in the New Jersey Special Education Administrative Code, Chapter 14, and Title 6A; (b) if the disability adversely affects educational performance; and (c) is in need of specially-designed instruction and related services. All three criteria must be met in order for the student to be found eligible for special education.

According to IDEA 2006, students may not be deemed eligible for special education services if they do not meet the eligibility criteria of the law or if their eligibility is based on a lack of instruction in reading and math. A student may also be deemed not to be eligible if the disability does not adversely affect the child's educational performance.

Section 504 of the Rehabilitation Act

Section 504 is a civil rights law that protects against discrimination and grants equal access for all. It affects students who have a physical or mental impairment that substantially limits one or more life functions (e.g. learning). Under Section 504, if the student does not qualify for special education and related services, he or she may be eligible for reasonable accommodations in the general education classroom. Although there is no official list of reasonable accommodations, the following academic adjustments are noted specifically in the law: a) modifications to the method of instruction, b) extended exam time. c) alternate testing formats, and d) increased time to complete a course. Also auxiliary aids such as calculators, tape recorders, laptops, may be considered reasonable accommodations.

The Individualized Education Plan (IEP)

Upon completion of the evaluation, an eligibility conference will be held to discuss whether the student meets the code criteria making them eligible for special education and/or related services. A copy of the Child Study Team finding reports will be given to the parents. Subsequently, but usually immediately following this conference, an Individualized Education Plan (IEP) conference will be held.

At this meeting, the student's educational strengths and needs will be considered. Goals and objectives will be developed to address identified needs. The team will then determine the appropriate program for each individual student with consideration of the least restrictive environment as a priority. The evaluations, determination of eligibility for services, and (if eligible), the development and implementation of the IEP shall be completed within 90 calendar days of the district's receipt of parental permission to evaluate.

The implementation of a child's individual education program should occur 15 days after the IEP Team's completion of the plan, unless parents and school personnel mutually agree to an earlier implementation date. Times may vary, for example, if a child is assigned to another school for services and transportation must be arranged; if supplemental aids must be acquired and/or staff must receive specialized training in order to fully implement the IEP. The IEP document should identify the student's primary educational placement, the projected date for the beginning of the services and modifications described in the plan, and the frequency, location and duration for each service.

Required Elements of an IEP

For a comprehensive list of the required elements of an IEP, see Special Education NJ Administrative Code, Chapter 14:-3.7 (e) 1-17.

IEP Team Attendance

According to Individuals with Disabilities Education Act (IDEA), the Individualized Education Program team or IEP Team must include the following persons:

- a. The parents of the child;
- b. At least one regular education teacher of the child;
- c. At least one special education teacher or, where appropriate, at least one special education provider of the child;
- d. A representative of the local education agency (LEA) who
 - i. is qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of children with disabilities;
 - ii. is knowledgeable about general curriculum; and
 - iii. is knowledgeable about the availability of resources of the local educational agency;
- e. An individual who can interpret the instructional implications of evaluation results. This person may be the LEA representative described above;
- f. At the discretion of the parent or the school system, other individuals who have knowledge or special expertise regarding the child, including related services personnel, as appropriate; and
- g. The child, when appropriate.

Parents shall be given written notice of a meeting early enough to ensure that they will have an opportunity to attend.

Meetings shall be scheduled at a mutually agreed upon time and place. If a mutually agreeable time and place cannot be determined, the parent(s) shall be provided the opportunity to participate in the meeting through alternative means, such as videoconferencing and conference calls.

Resolving Disagreements

What happens if I disagree with the school district over the identification, evaluation, classification, educational placement, or the provision of a free, appropriate public education?

There may be a time when you and the school district disagree. Many disagreements can be resolved by communication with your child's teacher, case manager, the school principal, or other school district personnel. There are also procedures established under state and federal law to address your concerns, such as complaint resolution, medication, or a due process hearing.

Refer to the [PRISE booklet](#), page 16, for further details regarding dispute resolution.

Disabilities Covered Under the Act

The following defines each area of disability included in New Jersey Special Education Administrative Code, Chapter 14, Title 6A:

- **Auditory Impaired** means an inability to hear within normal limits due to physical impairment or dysfunction of auditory mechanisms. An audiological evaluation by a specialist qualified in the field of audiology and a speech and language evaluation by a certified speech- language specialist are required.
- **Autistic** means a pervasive developmental disability, which significantly impacts verbal and nonverbal communication and social interaction that adversely affects a student's educational performance. Onset is generally evident before age three.
- **Intellectually Disabled** means a disability that is characterized by significantly below average general cognitive functioning existing concurrently with deficits in adaptive behavior.
- **Communication Impaired** means a language disorder in the areas of morphology, syntax, semantics, and/or pragmatics/discourse, which adversely affects a student's educational performance and is not due primarily to an auditory impairment.
- **Emotionally Disturbed** means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a student's educational performance due to:
 - a. An inability to learn that cannot be explained by intellectual, sensory or health factors
 - b. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers
 - c. Inappropriate types of behaviors or feelings under normal circumstances
 - d. A general pervasive mood of unhappiness or depression
 - e. A tendency to develop physical symptoms or fears associated with personal or school problems.
- **Multiply Disabled** means the presence of two or more disabling conditions, the combination of which causes such severe educational needs that they cannot be accommodated in a program designed solely to address one of the impairments.
- **Deaf/blindness** means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational problems that they cannot be accommodated in special education programs solely for students with deafness or students with blindness.
- **Orthopedically Impaired** means a disability characterized by a severe orthopedic impairment that adversely affects a student's educational performance.
- **Other Health Impaired** means a disability characterized by having limited strength, vitality, or alertness, including a heightened alertness with respect to the educational environment, due to chronic or acute health problems.

- **Preschool Child With a Disability** means a child between the ages of three and five experiencing developmental delay, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas:
 - a. Physical, including gross motor, fine motor and sensory (vision and hearing)
 - b. Cognitive
 - c. Communication
 - d. Social and emotional
 - e. Adaptive
- **Social Maladjustment** means a consistent inability to conform to the standards for behavior established by the school. Such behavior is seriously disruptive to the education of the student or other students and is not due to emotional disturbance as defined above.
- **Specific Learning Disability** means a disorder in one or more of the basic psychological processes involved in understanding or using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. A specific learning disability is determined when a severe discrepancy is found between the student's current achievement and intellectual ability in one or more of the following areas, and that discrepancy is not primarily the result of visual, hearing, or motor disabilities, general cognitive deficits, emotional disturbance or environmental, cultural or economic disadvantage:
 - a. Basic reading skills;
 - b. Reading comprehension;
 - c. Oral expression;
 - d. Listening comprehension;
 - e. Mathematical calculation;
 - f. Mathematical problem solving;
 - g. Written expression; and
 - h. Reading fluency.
- **Traumatic Brain Injury** means an acquired injury to the brain caused by an external physical force or insult to the brain, resulting in total or partial functional disability or psychosocial impairment, or both.
- **Visually Impaired** means an impairment in vision that, even with correction, adversely affects a student's educational performance.

Other Definitions Included in IDEA

- **Adapted Physical Education** is a diversified program of activities specially designed for an individual who meets eligibility criteria for special education and/or related services and is not able to participate safely and/or successfully in the regular physical education program.
- **Assistive Technology** is any service that directly assists a child with a disability in the selections, acquisition, or use of an assistive technology device.

Accommodations and Modifications in the Classroom and for Testing

The IEP team determines whether accommodations, modifications of curriculum or testing, or alternative testing are needed. When the decision is made it must be documented in the student's IEP. The decision regarding the need for special consideration is based on the student's evaluation results, current level of functioning and unique learning characteristics.

Placement

The New Jersey Administrative Code for special education and the federal Individuals with Disabilities Education Act (IDEA) ensure that children with disabilities receive a free, appropriate, public education in the least restrictive environment.

As noted above, in accordance with the least restrictive environment, the first placement option considered is the regular education classroom with the necessary supplemental aids and supports to enable the student to meet his/her educational goals.

Supplementary Aids and Services

Supplementary aids and services are provided by paraprofessional aides, teachers, related service providers, or CST members in the general education classroom to enable students with disabilities to be educated as much as possible with nondisabled peers. Supplementary aids and services may include, but are not limited to the following:

- a. Prompting, cueing and redirecting student participation;
- b. Reinforcing of personal, social, behavioral and academic learning goals;
- c. Organizing and managing materials and activities;
- d. Implementation of teacher-designed follow-up and practice activities;
- e. Consultation regarding
 - i. the development and demonstration of techniques and strategies;
 - ii. data collection on the effectiveness of the techniques and strategies;
 - iii. development of positive behavioral supports.
- f. Adapted instructional materials;
- g. Supports to address environmental needs (e.g. preferential seating, altered physical room arrangement);
- h. Specialized equipment (e.g. wheelchair, computer, software, etc.);
- i. Assignment modification;
- j. Testing modifications

Supplementary Instruction

Supplementary instruction is provided to students with disabilities in addition to the primary instruction for the subject being taught. This instruction may be provided individually or in groups, and in either a general education class or a pull-out resource setting.

Resource Programs

Resource Programs provide specialized instruction by a special education teacher to students with disabilities, in the general education classroom (in-class resource program) or in a separate Resource Center (pull-out resource program). An individual student may receive either in-class or pull-out resource services, or both, depending on his or her individual needs.

- **In-class Resource programs (ICR)** may be provided up to the student's entire instructional day, and may provide support to enable the student to participate in the general education curriculum, or replacement instruction that modifies the general education curriculum and instructional strategies to meet the student's individual needs.
- **Pull-out Replacement resource classes (POR)** may be provided for up to three subject areas per day, at the elementary level. In grades one through eight, replacement instruction can be provided in reading, writing, and/or math. At the secondary level, replacement pull-out resource classes may be provided for the entire instructional day. As needed, Tenaflly High School provides replacement instruction in core academic subjects required for high school graduation, including English, mathematics, science, and history.
- **Pull-out Support resource classes (POS)** provide students with instruction in study skills and assistance in organizing and/or understanding material that is being taught in the regular education classroom.

Special Education Classes

For students in need of more intensive and specialized instruction, placement in a special class program may be the least restrictive appropriate educational placement. Special class programs offer instruction in the core curriculum content standards, but the regular education curriculum and the instructional strategies may be modified based on the student's IEP. For some students, the IEP may specify a modified curriculum emphasizing functional life skills and/or prevocational/vocational skills. Students placed in a special education class typically remain in this class for a major portion of the day, but may also participate in general education classes and programs appropriate to their needs.

Extended School Year (ESY)

An ESY program provides for the extension of special education and related services beyond the regular school year. An extended school year program is provided in accordance with the student's IEP when an interruption in educational programming causes the student's performance to revert to a lower level of functioning and recoupment cannot be expected in a reasonable length of time.

Out of District Placements

Out of district placements include Special Services School District, State Approved Schools for the Disabled, State Operated Programs, and Home Instruction. Home Instruction is considered the most restrictive and should only be utilized on a temporary basis.

Annual Review and Reevaluation

The IEP Team will meet once a year, or more if necessary, to review and revise the IEP. The Team will discuss strengths, weaknesses, and progress of the student and plan for the following year accordingly.

In addition to annual reviews, the Child Study Team must complete a reevaluation of the student once every three years. The IEP Team determines the scope of the reevaluation by reviewing existing data. Further assessments are not conducted if the IEP Team finds that continued eligibility could be determined from existing data. However, if a reevaluation is warranted, the IEP Team will determine the assessments needed and obtain parental consent. Once testing is complete (within 60 calendar days) the IEP Team meets to discuss findings and plan programming. As with initial evaluations, copies of the re-evaluation reports are provided to parents at least ten days in advance of that IEP Team meeting.

About Related Services

Related Services may be provided to students ages 3 through twelfth grade who are eligible for special education and related services. Related services in grades K-12 include speech/language, occupational and physical therapies, counseling, and special transportation, etc.

Occupational Therapy

Occupational therapy services within a school setting are designed to adapt the classroom environment, assist in the development of performance components that are prerequisites for academic learning, and facilitate functional daily living skills within a child's current educational setting.

- **How are services provided?**

- Current models of best practice suggest intervention be integrated into the naturally occurring events of the student's day, rather than in isolated settings or artificial situations. However, there may be situations when certain skills may warrant more direct therapeutic interventions. Collaborative efforts may be pursued with a combination of teachers, other related service providers, parents and others pertinent to the student's program to support classroom functioning.

- **Who receives occupational therapy services?**

- Those students identified to require occupational therapy services in an IEP or 504 plan ***in order to access their education***. Determining the need for occupational therapy intervention must include observing the student within the educational environment and assessing his or her ability to meet the demands of the current educational program. If environmental adaptations and modifications are in place and teaching staff are trained to meet the goals of the IEP, then services may not be required.

- **What skills do occupational therapists typically address?**

- Fine motor skills: managing classroom tools and other manipulatives
- Visual perceptual skills: provide strategies for interpreting visual information
- Sensory processing skills; help to effectively process and organize information from all sense so that the student can effectively interact with the environment
- Self-care skills: dressing, grooming, hygiene, and feeding
- Pre-vocational skills: address prerequisite skills such as organization, sequencing, and time management

Occupational Therapy Staff		
<u>Mackay School</u> Linda Wicker	201-816-7700	lwicker@tenafly.k12.nj.us
<u>Stillman School</u> Jill Davis Yaffa Markovich	201-816-7710	jdavis@tenafly.k12.nj.us ymarkovich@tenafly.k12.nj.us
<u>Smith School</u> Yaffa Markovich	201-816-7715	ymarkovich@tenafly.k12.nj.us
<u>Maugham School</u> Linda Wicker	201-816-7705	lwicker@tenafly.k12.nj.us
<u>TMS</u> Jill Davis	201-816-4902	jdavis@tenafly.k12.nj.us
<u>THS</u> Jill Davis	201-816-6614	jdavis@tenafly.k12.nj.us

Speech-Language Therapy

The development of age-appropriate speech and language skills is essential to the learning process and to a student's social and emotional growth. Children must be able to comprehend the language, express their thoughts, request explanations from the teacher and produce speech that others can easily understand.

Speech disorders include the following problems:

- Articulation disorders include difficulties producing sounds in syllables or saying words incorrectly to the point that other people cannot understand what is being said.
- Fluency disorders include problems such as stuttering, the condition in which the flow of speech is interrupted by abnormal stoppages, repetitions, or prolonging sounds and syllables.
- Resonance or voice disorders include problems with the pitch, volume, or quality of a child's voice that distracts listeners from what is being said. These types of disorders may also cause pain or discomfort for the child when speaking.
- Language disorders can be either receptive or expressive. Receptive disorders refer to difficulties understanding or processing language. Expressive disorders include difficulty putting words together, limited vocabulary, or inability to use language in a socially appropriate way.

• How are services provided?

- Speech-language therapy involves having a speech-language specialist work with a child on a one-to-one basis, in a small group or directly in a classroom, to overcome difficulties involved with a specific disorder. Speech-language therapy uses a variety of therapeutic strategies, including:
 - Language intervention activities – involve having a speech-language specialist interact with a child by playing and talking. The therapist may use pictures, books, objectives, or ongoing events to stimulate language development. The therapist may also model correct pronunciation and use repetition exercises to build speech and language skills.
 - Articulation therapy – articulation, or sound production, exercises involve having the

therapist model correct sounds and syllables for a child, often during play activities. The level of play is age-appropriate and related to the child's specific needs. Articulation therapy involves physically showing a child how to make certain sounds, such as the "r" sound. A speech-language therapist may demonstrate how a child should move his tongue to produce specific sounds.

Referral for Speech Services

Among the many services available to students within our district, including students not eligible for special education, are those services provided by our speech therapists. Therapists are trained in techniques to identify, support and remediate a student's speech and language needs. There are two ways in which our district identifies which children may be eligible for speech and language services.

- a. A child can be referred for evaluation by the child's teacher.
- b. A child can also be referred by the child's parent who may send a letter to the Child Study Team.

Within 20 days of receipt of a referral a meeting will be convened to discuss with parents, teachers and a speech therapist if evaluation for speech services is warranted. If an evaluation is agreed upon, once it is completed, parents, teachers, and the speech therapist will reconvene another meeting within 90 days to discuss assessment results and, if necessary, subsequent therapy.

Speech-Language Therapy Staff		
<u>Mackay School</u> Elaine Livingston	201-816-7142	elivingston@tenafly.k12.nj.us
<u>Maugham School</u> Tiffany Temes Alyssa Padavano	201-816-7248 201-816-7413	ttemes@tenafly.k12.nj.us apadovano@tenafly.k12.nj.us
<u>Smith School</u> Julie Saperstein	201-816-7332	jsaperstein@tenafly.k12.nj.us
<u>Stillman School</u> Nicole Abbatarco Alyssa Padavano	201-816-7417 201-816-7413	nabbatamarco@tenafly.k12.nj.us apadovano@tenafly.k12.nj.us
<u>TMS</u> Olivia Urgo Grace Lee	201-816-4965 201-816-4902	ourgo@tenafly.k12.nj.us glee@tenafly.k12.nj.us
<u>THS</u> Grace Lee	201-816-6614	glee@tenafly.k12.nj.us

Physical Therapy

Physical therapy services within a school setting are designed to support the development of gross motor skills, improve mobility, and promote safe and efficient access to the educational environment. These services aim to help students participate in school activities to the greatest extent possible, fostering independence and functional movement in their current educational setting.

- **How are services provided?**

- While some physical therapy strategies can be embedded in classroom routines, most services are provided in a pull-out setting to address targeted gross motor and mobility skills in a focused, structured environment. Sessions are individualized to meet each student's specific needs and may include therapeutic exercises, activities, or practice using adaptive equipment. Collaboration with teachers, aides, and other service providers ensures that skills addressed in pull-out sessions are reinforced during the student's daily school activities.

- **Who receives physical therapy services?**

- Students who require physical therapy services as identified in their IEP or 504 plan to access their education. The need for services is determined by observing the student in the school environment, evaluating their ability to navigate and participate in daily school activities, and assessing how their physical abilities align with the demands of the educational program. If environmental modifications, adaptive equipment, or staff training adequately meet the student's needs, ongoing therapy services may not be necessary.

- **What skills do physical therapists typically address?**

- Gross motor skills: running, jumping, balancing, and navigating varied surfaces
- Mobility skills: walking, wheelchair mobility, transfers, and use of assistive devices
- Postural control: improving strength, endurance, and alignment for sitting and standing
- Coordination skills: integrating body movements for purposeful, efficient motion
- Safety and access: strategies to move through school spaces (classrooms, hallways, playgrounds, stairs) safely and independently

Physical Therapy Staff		
Carol Keegan	TBD	ckeegan@tenafly.k12.nj.us

Counseling

Counseling services within a school setting are designed to support students' social, emotional, and behavioral well-being so they can successfully access their education. These services help students develop the skills needed to manage emotions, build positive relationships, make responsible decisions, and cope with challenges in their current educational setting.

- **How are services provided?**

- While some counseling support can be delivered through classroom guidance lessons or informal check-ins, most services are provided in a pull-out setting to offer students a safe and confidential space to address specific concerns. Sessions may be conducted individually or in small groups, depending on student needs. Collaboration with teachers, administrators, related service providers, and families ensures strategies learned in counseling are reinforced in the classroom and other school environments.

- **Who receives counseling services?**

- Students who require counseling services as outlined in their IEP, 504 plan, or other support plan in order to access their education. The need for services is determined through observation, teacher input, student self-report, and formal assessments of social-emotional

functioning. If school staff and environmental support are sufficient to address the student's needs, ongoing counseling services may not be required.

- **What skills do school counselors typically address?**

- Social skills: building and maintaining positive peer and adult relationships
- Emotional regulation: recognizing, understanding, and managing feelings
- Coping strategies: handling stress, anxiety, and other emotional challenges
- Conflict resolution: navigating disagreements and problem-solving effectively
- Self-advocacy: expressing needs and seeking help appropriately
- Decision-making: making safe, responsible, and ethical choices

**NEW JERSEY DEPARTMENT OF
EDUCATION**

COMMISSIONER OF EDUCATION

100 River View Plaza
Trenton, NJ 08625

GENERAL INFORMATION

609-292-4450

**BERGEN COUNTY EXECUTIVE
SUPERINTENDENT OF SCHOOLS**

Bergen County Office of Education
One Bergen County Plaza
3rd Floor Hackensack, NJ 07601
201-336-6875

OFFICE OF SPECIAL EDUCATION PROGRAMS

P.O. Box 500
Trenton, NJ 08625
609-292-0147

COMMUNITY RESOURCES

ADVOCACY

NJ Protection and Advocacy, Inc.	800-922-7233
Parent Education Network	800-522-5827
Statewide Parent Advocacy Network, Inc. (SPAN)	800-654-SPAN (7726)
Autism Community, Inc. (COSAC)	
NJ Coalition for Inclusive Education	732-613-0400
National Center for Learning Disabilities	212-545-7510
National Federation of the Blind	410-659-9314
NJ Education Law Center	973-624-1815
Autism Speaks	856-858-5400
NJ Center for Outreach and Services	800-4-AUTISM (800-428-8476)

EDUCATION

Education Law Center, Inc	201-624-1815
Education Resource Information Center (ERIC)	800-328-0272
Learning Resource Center – North	973-414-4491
Department of Education, Office of Special Education	609-633-6833

ASSISTIVE TECHNOLOGY

NJ Technology Assistive Resource Program (TARP)	800-DIAL-TEC (800-342-5832)
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GOVERNMENT AGENCIES AND COMMITTEES

Bergen County Office of Education	201-336-6875
Library for the Blind and Handicapped	800-792-8322
NJ Commission for the Blind and Visually Impaired	732-255-0720 856-482-3700
NJ Developmental Disabilities Council	609-292-3745
Department of Children and Families	855-463-6323

ORGANIZATIONS AND SUPPORT GROUPS

Children and Adults with Attention Deficit Disorder (CHADD)	800-233-4050
National Association for Gifted Children	202-785-4268
National Information Center for Children and Youth with Disabilities (NICHCY)	800-695-0285
Parents of Blind Children – NJ POBC-NJ	
United Cerebral Palsy Association of NJ (UCP)	
Variety Club, The Children's Charity	

DIVISION OF BEHAVIORAL HEALTH SERVICES

Perform Care Mobile Response	877-652-7624
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EXPLANATION OF COMMON ACRONYMS

ABA	Applied Behavior Analysis
ADA	Americans with Disabilities Act
ADD	Attention Deficit Disorder
ADHD	Attention Deficit Hyperactivity Disorder
AI	Auditory Impairment
AT	Assistive Technology
AU	Autism
BD	Behavioral Disabilities
BIP	Behavior Intervention Plan
CI	Communication Impaired
COTA	Certified Occupational Therapist Assistant
CST	Child Study Team
DB	Deaf-Blindness
DDD	Division of Developmental Disabilities
DOE	Department of Education
DYFS	Division of Youth and Family Services
ED	Emotionally Disturbed
ESERS	Eligible for Special Education and Related Services
ESY	Extended School Year
FAPE	Free Appropriate Public Education
FBA	Functional Behavior Assessment
HI	Hearing Impaired
ICR	In-Class Resource (w/Special Education Teacher)
ID	Mildly Cognitively Impaired
ID	Moderately Cognitively Impaired
ID	Severely Cognitively Impaired
IDEA	Individual with disabilities Education Act
IEP	Individual Education Program
INTPS	Integrated Preschool
LD	Learning and/or Language Disabilities
LDTC	Learning Disabilities Teacher / Consultant
LEA	Local Education Agency (School District)

LPT	Licensed Physical Therapist
LRE	Least Restrictive Environment
MCI	Moderately Cognitively Impaired
MD	Multiple Disabilities
OCD	Obsessive Compulsive Disorder
OCR	Office of Civil Rights
ODD	Oppositional Defiant Disorder
OHI	Other Health Impaired
OI	Orthopedically Impaired
OT	Occupational Therapist
OTR	Occupational Therapist Registered
POR	Pull-Out Replacement (Special Education Teacher)
POS	Pull-Out Support (Special Ed. Teacher)
PSD	Pre-school Disabled
PT	Physical Therapist
PT	Physical Therapy
RTI	Response to Intervention
SC	Self-contained
SCI	Severely Cognitively Impaired
SI	Supplemental Instruction (taught by Regular Ed. Teacher)
SLD	Specific Learning Disabilities
SM	Socially Maladjusted
TBI	Traumatic Brain Injured
TTM	Team Teaching Model
VI	Visual Impairment

EXPLANATION OF TERMS IN SPECIAL EDUCATION

ABA Program: *Applied Behavior Analysis (ABA)* is a therapy based on the science of learning and behavior. ABA programs use principles of behavior to teach social, communication, and learning skills, often for students with Autism Spectrum Disorder (ASD).

AAC Device: *Augmentative and Alternative Communication (AAC) devices* are tools that help individuals with speech or language impairments communicate. These can be simple picture boards or high-tech electronic devices that generate speech.

LLD Program: *Language Learning Disabilities (LLD) program* supports students who have difficulties with language-based skills, such as reading, writing, speaking, and listening, which affect their learning.

MD Program: *Multiple Disabilities (MD) program* is designed for students who have more than one significant disability, which may include intellectual disabilities combined with physical, sensory, or health impairments, requiring specialized instruction and support.

PSD Program: *Preschool Disabled (PSD) program* serves children ages 3-5 who have disabilities that impact their development and require early intervention before entering kindergarten.

In Class Support: This service places a special education teacher or paraprofessional directly in the general education classroom to support the student with disabilities, providing assistance as needed while the student participates with peers.

In Class Resource: Students receive instruction within the general education classroom with a general education teacher but get targeted support or specialized instruction from a special education teacher in a co-teaching model, focusing on specific skills or subjects.

Pull Out Resource: Students are taken out of the general education classroom for short periods to receive specialized instruction in a separate setting, focusing on specific academic or functional skills.

Consultative Services: A special education professional (such as a therapist or specialist) provides guidance and recommendations to general education teachers and families but does not work directly with the student regularly. They consult on strategies, accommodations, or interventions.

Out of District Setting: This refers to educational placements outside of the student's home school district, often specialized programs or schools designed to meet significant needs that cannot be addressed within the local district.

PROGRAM PROFILES

Integrated Preschool: The Integrated Preschool Program provides an inclusive early childhood environment where children with and without disabilities learn and grow together. This program promotes social, emotional, cognitive, and physical development through play-based, developmentally appropriate practices, while ensuring individualized supports for children with special needs. The goal is to foster positive peer interactions, language development, and foundational skills to prepare all students for kindergarten.

In-Class Resource (ICR) Program: The In-Class Resource (ICR) Program provides special education services within the general education classroom. Students in this program benefit from access to grade-level curriculum alongside their peers, while receiving the specialized instruction, accommodations, and supports necessary to make progress toward their IEP goals. A general education teacher and a special education teacher work together in a co-teaching partnership to deliver instruction, modify assignments, and provide individualized assistance. This collaborative model promotes inclusion, supports diverse learning styles, and fosters independence.

Language and Learning Disabilities (LLD) Program: The Learning and/or Language Disabilities (LLD) Program is a specialized instructional program designed for students whose primary disability significantly impacts their ability to acquire and use spoken and written language. These students require intensive, language-based instruction embedded throughout the school day to access the curriculum and make meaningful educational progress.

The program provides systematic, direct special education services alongside integrated related services. Instruction focuses on developing academic, communication, executive functioning, and social skills, with opportunities for participation in general education settings as appropriate.

Multiple Disabilities Program: The Multiple Disabilities (MD) Program provides intensive, individualized instruction to students with complex learning needs, including significant social, emotional, behavioral, communication, and/or functional challenges, that adversely affect educational performance. The program utilizes a combination of evidence-based practices—including Applied Behavior Analysis (ABA), structured teaching, functional communication training, and sensory integration strategies—to promote meaningful progress in academic, functional, and social domains.

The MD Program supports each student at their **individual pace and learning style**, while also targeting future skills that promote independence, social participation, and overall quality of life. Instruction emphasizes functional academics, communication, daily living skills, and positive behavioral supports, while fostering inclusion with non-disabled peers when appropriate.