

Trenton Public Schools Special Education Reference Guide

DISTRICT MISSION

"All Students will graduate with a vision for their future, motivated to learn continually and prepared to succeed in their choice of college or career."

Office of Special Education

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Developed by Child Study Team Committee, 2016

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TABLE OF CONTENTS

TOPIC	PAGE NUMBER
I. Introduction	3
II. Initial Intervention	5
III. Referral to the Child Study Team	7
IV. Evaluation	11
V. Eligibility	13
VI. The Individualized Education Plan (IEP)	17
VII. Additional Topics Regarding Students	20
with IEPs	
VIII. Frequently Asked Questions (FAQs)	27
IX. Glossary of Terms/Acronyms	31
X. References/Acknowledgements	39

Introduction

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. To meet the needs of students, ages 3 through 21 in the Trenton community, as required by New Jersey state law and federal statutes, the Board of Education provides programs for students with special needs. Special classes and support programs are located throughout the district. It is the goal of the Trenton Public School District Office of Special Education to encourage the appropriate extent of student participation in the general education program of each school.

Each building is assigned the services of a Child Study Team (CST) consisting of the school psychologist, learning disabilities teacher consultant (LDT/C), and school social worker. The Child Study Team evaluates and determines eligibility of students for special education and related services; coordinates the development of various aspects of the individualized educational programs; delivers related services to educationally disabled students; provides preventive and support services to nondisabled students; and provides services to the general education programs regarding techniques, materials, and programs for students experiencing learning difficulties.

This document is provided as a guide for the provision of special education and related services for students in the Trenton Public School District. While this document is meant as a general basis of information, it was not intended, nor should it be construed, as defining the legal basis of special education identification, evaluation, and/or placement. If any portion of this document conflicts with law or regulation, the law or regulation takes precedence.

The Trenton Public Schools Office of Special Education is responsible for the evaluation of students. The **Child Study Team (CST)** 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 Trenton 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. In order to become eligible to receive special education services, a student must be evaluated and determined eligible by an IEP team (CST, parent and teacher).

Members of the Child Study Team

School Psychologist

School psychologists are uniquely qualified members of school teams that support students' ability to learn and teachers' ability to teach. They apply expertise in mental health, learning, and behavior, to help children and youth succeed academically, socially, behaviorally, and emotionally. School psychologists partner with families, teachers, school administrators, and other professionals to create safe, healthy, and supportive learning environments that strengthen connections between home, school, and the community. School psychologists must be credentialed by the state in which they work. They also may be nationally certified by the National School Psychology Certification Board (NSPCB).

As a member of the CST, 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 may provide counseling, crisis intervention or consultative services.

Learning Disabilities Teacher/Consultant (LDT/C)

The Learning Disabilities Teacher-Consultant (LDT/C) is a teacher who functions in the school environment as an educational diagnostician, instructional programmer, Child Study Team member, educational consultant and instructional leader. LDTCs work in collaboration with other members of a child study team to determine eligibility for special services. LDTCs also consult with parents, teachers, and other school personnel to provide research-based instructional strategies to assist pupils struggling academically. An educational assessment is 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 Social Worker

The school social worker, evaluates students' affective and social skills, counsels students and parents, communicates with community agencies, consults with school staff, and conducts training activities. As a member of the Child Study Team, 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 may also provide counseling, crisis intervention and consultation services, as well as helping families' access community 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.

Initial Intervention

Intervention and Referral Services (I&RS) for general education students is intended as a primary way in which general education teachers or specialists can assist a student who is at risk for school problems within the general education environment. I&RS programs are not intended to replace traditional methods or resources for helping students to function effectively in school. Rather, they exist primarily to focus on particular student problems using available resources within the general education environment.

The primary purposes of the I&RS team are to:

- Identify students in need and then plan and provide appropriate intervention for those students within the general education community;
- Identify the responsibilities of building staff who participate in the planning and provision of intervention and referral services;
- Actively involve parents/guardians in the development and implementation of the I&RS plans;
- Review and assess the effectiveness of the services provided in achieving the outcomes identified in the intervention and referral plan;
- Provide professional development to general education staff members who either refer students to the I&RS or who assist in providing the intervention and referral services; and, finally,
- Coordinate the services of community based social and health agencies.

An I&RS team is one of the many resources used by schools to intervene with student problems, prior to Child Study Team (CST) evaluation.

INTERVENTION AND REFERRAL SERVICES TEAM PROCESS (I&RS)

The Intervention and Referral Services Team process is a collaborative school effort between district personnel and parent(s)/guardian(s) to intervene when a student has been identified as making minimal academic and/or emotional progress in the general education setting. The team or committee collects and evaluates relevant data in order to determine or identify specific barriers to student performance. Once these barriers have been identified, individualized interventions are determined and implemented through an action plan in order to alleviate the concerns. In some instances this may include the use of the Response to Intervention Model. Although several variations of the model have been proposed, in general, RTI is based upon three components: the use of multiple tiers of increasingly intense interventions; a problem-solving approach to identify and evaluate instructional strategies; and an integrated data collection and assessment system to monitor student progress and guide decisions at every level. Student monitoring continues throughout this process by the identified individuals in the action plan. This process is ongoing and it continues to identify and evaluate problems, solutions and progress within the student's academic setting.

I&RS PHASES

- 1. Request for assistance
- 2. Information collection
- 3. Parent(s)/Guardian(s) notification and participation
 - 4. Problem solve
 - 5. Develop I&RS action plan
 - 6. Support, monitor and continue the process
 - 7. Problem resolved or referral to CST

If the I&RS process exhausts all of the available school based general education interventions with minimal success, often the student is then referred to the CST for a comprehensive evaluation in order to gather additional information as well as to determine if the student is eligible for special education and related services. The recommendation for a CST evaluation could come directly from the I&RS team or from the parent(s)/guardian(s) at any time during the process.

WHAT INTERVENTION IS AND IS NOT

The term intervention is used when teachers and other school personnel study and creatively problem solve educational issues that place a student at risk for school failure. Using a team approach that also significantly involves parent(s)/guardian(s), each school carefully considers the needs of students who are identified "at risk" for learning, behavior, and health problems. After careful consideration, strategies are put in place to work with the student and effectively address the issues at hand. By its nature, intervention is a process. It is often the case that plans are revisited and modified. In most cases, however, a successful intervention plan which is created and shaped over a period of time proves to be a powerful method tool for the at-risk student. If successful, it is preferable to special education referral which requires a student to have an identified disability and undergo an evaluation. In some cases, intervention is not successful and a referral for special education is deemed necessary. Even in these cases, the prior period of intervention is valuable. Prior intervention will illustrate that a referral is appropriate and will help inform the IEP team about strategies that have or have not produced success when it is time to develop the written IEP. It is important that parent(s)/guardian(s) not see intervention as merely a waiting process or a "barrier" step for special education.

Referral to the Child Study Team (CST)

What is a Referral?

A referral is the first step in the special education process. It is a formal written request that a student be evaluated by the CST to determine whether a student is eligible for special education and related services or by the speech/language specialist to determine whether a student is eligible for speech services.

Who Can Refer?

Students may be referred to the CST or for a speech evaluation by instructional staff, school administration, parent(s)/guardian(s) and/or community agencies. Parent(s)/guardian(s) should submit their written request to the teacher, principal, or director of special services. School staff should submit the written request to the (Assistant Superintendent of Special Education or his or her designee).

When Should a Student Be Referred?

Generally, students who present with academic and/or behavioral difficulties are first brought to the attention of the Intervention and Referral Services (I &RS) Committee. This committee will create interventions to address educational difficulties in the general education classroom. Interventions in the general education classroom should be attempted prior to a CST or speech referral. When interventions in the general education classroom are not appropriate for the student or when interventions are not effective, the student will be referred to the CST or speech/language specialist for evaluation.

Once a Student is Referred, What Happens Next?

Once a referral is received, the parent(s)/guardian(s) will be invited to a meeting that will be scheduled within 20 days of receipt of the referral (excluding school vacations other than summer vacation). Based on a review of available information about the student's educational progress, a decision will be made at this meeting whether a CST or speech evaluation is warranted. If an evaluation is warranted, the nature and scope of the CST or speech evaluation will be discussed. If it appears that the problem can be alleviated with interventions in the general education program and the student has not participated in the I&RS process, there may be a decision not to conduct an evaluation, but to refer the student to the I&RS Committee for development of interventions, suggestions for other interventions for the parent(s)/guardian(s) to pursue, or to refer the student to the 504 Committee. If the student is already in the I&RS process and an evaluation is not warranted, the I&RS plan can continue or be adjusted.

Referral Timelines

The classroom teacher and the (I&RS) Committee may recommend other strategies and building level support that can be utilized in the general education setting. If the student's difficulties persist after the strategies and/or services have been implemented, a referral to the CST may be made. A referral is a written document that has been dated by the staff member or administrator who receives the referral. This provides a start date for the first timeline.

The CST will convene a meeting to consider the evaluation within 20 days from the dated receipt of this request. The parent(s)/guardian(s) and referring teacher will meet with the entire CST at this time to review the student's needs and jointly determine if an evaluation should occur. Meeting attendees will be asked to sign an attendance sheet.

If there is an agreement to perform an evaluation, a written plan for the evaluation is developed at the meeting, describing the nature and scope of the evaluation. Written consent for an evaluation is required by the parent(s)/guardian(s). This consent for evaluation can be provided at the conclusion of the meeting or the parent(s)/guardian(s) may wish to take additional time before providing written consent. Evaluations can only begin after the parent(s)/guardian(s) has provided written consent. The district has **ninety (90) days** from the time written consent is provided to complete the entire evaluation, eligibility, and placement process. Preschool aged students should complete the evaluation and eligibility process in time to receive services upon attaining the age of three.

Parent(s)/Guardian(s) will receive written notice of the results of the evaluation planning meeting. A decision may be made that an evaluation may not be warranted. Students may be referred back to the I&RS Committee or for other community or school based services.

See Referral Process for CST Evaluation Flow Chart

(next two pages)

REFERRAL PROCESS FOR CST EVALUATION

TOPIC	INTERNAL REFERRAL	EXTERNAL REFERRAL
I. Who May Submit A Written Referral For A CST Evaluation	Certificated District Staff Member Legal Committee 3.Chief Medical Officer	Parent/Guardian Adult Student Agency Concerned With Welfare of the Student, e.g. DCP&P
II. What does not constitute an External Referral	Non certificated Staff	Family/Private Medical Doctor Interested Family Friend Family Member Who Is Not Legal Guardian
III. Who Receives Referral	 District Administrator/Supervisor/Designee Child Study Team School Counselor 	 District Administrator/Supervisor/Designee Child Study Team School Counselor
IV. Documentation of Regular Education Interventions	"Referral for CST Evaluation" form must be completed and attached to written request for CST evaluation to process referral. Only exception is when internal referral is submitted from Legal Committee.	No documentation of regular education interventions is required to process referral meeting, but will be reviewed at meeting
V. Components of "Referral for CST Evaluation" Form I&RS documentation does not need to be forwarded for direct referral when the nature of the student's problem is such that an evaluation is warranted without delay.	MUST BE COMPLETED PRIOR TO REFERRAL BEING ASSIGNED TO CST I. Student/School/Teacher data 2. Specific reasons for referral 3. Statement of interventions in regular education 4. I&RS documentation 5. Audiometric screening 6. Vision screening 7. Signature of School Nurse 8. Signature of Teacher(s) 9. Signature of School Counselor 10. Signature of Principal or Designee	IS REQUESTED TO BE COMPLETED PRIOR TO IDENTIFICATION MEETING 1. Student/School/Teacher data 2. Specific reasons for referral 3. Statement of interventions in regular education 4. I&RS documentation 5. Audiometric screening 6. Vision screening 7. Signature of School Nurse 8. Signature of Teacher(s) 9. Signature of School Counselor 10. Signature of School Principal or Designee
VI. Who Is Responsible to Coordinate Completion of "Referral for CST Evaluation" Form VII. Where Referrals Are Sent (Starts Identification Meeting Timelines) MUST be sent electronically	School Counselor or Principal's Designee Assistant Superintendent's Designee of Child Study TeamsReferrals must include completed "Referral for CST Evaluation" form or request will be returned,	School Counselor or Principal's Designee Assistant Superintendent's Designee of Child Study Teams — School Counselor of student's school is notified to coordinate completion of "Referral for CST Evaluation" form.
VIII. Where is Referral Assigned Referral packets should be assigned to CST IMMEDIATELY	Original written request for evaluation and "Referral for CST Evaluation" form are forwarded to CST assigned to school in which student is enrolled.	Original written request for evaluation is forwarded to CST assigned to school in which student is enrolled.
IX. CST Action	1. Sets up Identification Meeting 2. "Notice of Meeting" form to parents with PRISE 3. All participants of meeting get copy of "Notice of Meeting" form 4. Native Language determined	Sets up Identification Meeting "Notice of Meeting" form to parents with PRISE All participants of meeting get copy of "Notice of Meeting" form. School Counselor to forward completed "Referral for CST Evaluation" form to school based CST. Native Language determined

T0010	INTERNAL DECEDRAL	EVTERNAL DEFERRAL
TOPIC	I INTERNAL REFERRAL	EXTERNAL REFERRAL
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X. Who Must Attend	1. Entire CST (i.e., school psychologist,	1. Entire CST
Identification Meeting	learning consultant, social worker) if student is classified ESLs the speech therapist should be included. 2. Parent/Guardian 3. Regular education teacher having knowledge about the Student's educational performance or the District's programs	 Parent/Guardian Regular education teacher having knowledge about the Student's educational performance or the District's programs.
XI. Who May Attend Identification Meeting	 District Administrator/Supervisor School Counselor School Nurse Related Services Provider (e.g. Speech Therapist) Other District staff having knowledge of student Parent Advocate with parent/guardian present Student Interpreter/Translator if needed 	 District Administrator/Supervisor School Counselor School Nurse Related Services Provider (e.g. Speech Therapist) Other District staff having knowledge of student Parent Advocate with parent/guardian present Student Interpreter/Translator if needed
XII. Who May Not Attend Identification Meeting	Bargaining Unit Representative acting in that capacity	Bargaining Unit Representative acting in that capacity
XIII. Purpose of Identification Meeting	To decide if an evaluation is warranted to determine eligibility for Special education and Related Services	To decide if an evaluation is warranted to determine eligibility for Special education and Related Services
XIV. Results of Identification Meeting	1. Evaluation NOT warranted a Decision Not To Evaluate form completed (With Recommendations) b Copies of Decision Not To Evaluate form sent to the parent and a copy placed in student CST file 2. Evaluation IS Warranted a Evaluation Plan Form completed. b Parent Consent Is Obtained to Implement Evaluation Plan.	1 Evaluation NOT warranted a Decision Not To Evaluate form completed (With Recommendations) b Copies of Decision Not To Evaluate form sent to parent and a copy placed in student CST file 2. Evaluation IS Warranted a. Evaluation Plan Form completed. b. Parent Consent Is Obtained to Implement Evaluation Plan.
XV. Timelines	Identification Meeting must be held within 20 calendar days (excluding school holidays, but not summer recess) of receipt of written request	Identification Meeting must be held within 20 calendar days (excluding school holidays, but not summer recess) of receipt of written request

Evaluation

IDENTIFICATION/EVALUATION PLANNING MEETING

The identification/evaluation planning meeting concludes the referral process to the CST. If the decision is made at the identification/evaluation planning meeting that an evaluation is warranted and signed parental consent is obtained, the individual evaluations of the child will commence. The comprehensive diagnostic evaluations are provided at no cost to the parent and completed in the child's native language. They are completed by certified professionals who will explain the results of their testing.

Evaluation Components to Determine Eligibility for Special Education

The evaluation shall include assessments by at least two members of the CST. For a preschool age child who requires a speech-language assessment, it may be utilized as one of the two required assessments. If autism or communication is the area of suspected disability, a speech-language assessment is required in addition to at least two other assessments by the CST. A hearing and vision screening by the school nurse is required. Other areas from which information may be gathered include a specialized medical evaluation(s), speech/language evaluation, occupational/physical therapy evaluations, and/or an audiological evaluation. The tests may be conducted by the members of the CST or by practitioners contracted by the school district.

See Evaluation Process Flow Chart

(next page)

Other Concerns

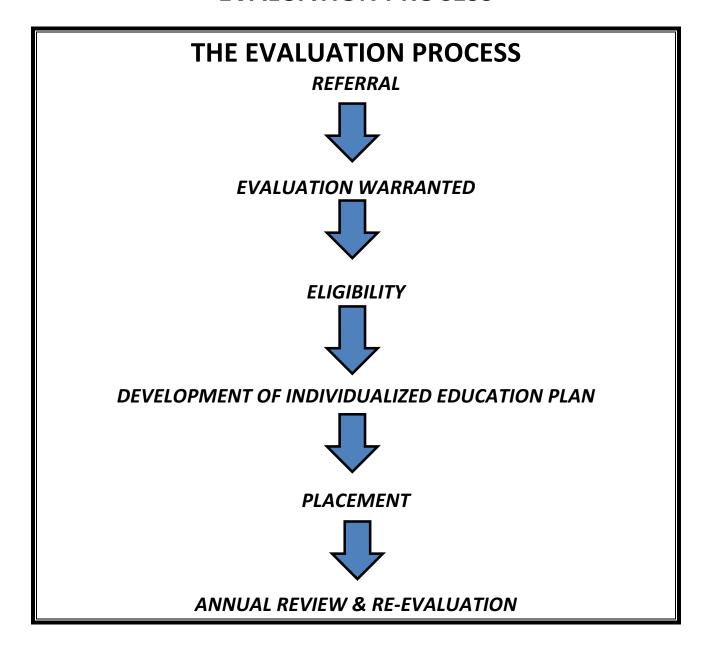
The evaluations recommended by the school district are deemed to be in the child's best interest; however, the parent has the right to refuse consent or withdraw consent at any time. If the school district disagrees with this action, it may invoke a due process hearing.

Upon completion of the evaluations, the professional staff will provide the parent with a written report of the details of the testing results. Parents will be provided with copies of the district's evaluation reports 10 calendar days prior to the eligibility meeting. These evaluations will help determine if the child has an educational disability and whether special education services are required.

The discussion of the evaluations and the determination regarding special education and related services will take place at the eligibility meeting.

Parent(s) may have obtained private evaluations at their own expense before or during the evaluation timeframe. If the parent(s) wish to share this information with the school personnel, it will be taken into consideration in identifying the child as being eligible for special education and related services or speech language services and, if appropriate, in planning the program.

EVALUATION PROCESS



Eligibility

Upon completion of the evaluations, an eligibility meeting will be scheduled to determine whether the child is eligible for special education and related services or speech language services. Meeting attendees will be asked to sign an attendance sheet. The case manager or evaluator will review evaluation results and answer all questions. The case manager will discuss the rationale for determination of eligibility or non-eligibility. Parents will receive written notice of the results of this meeting. Should there be disagreement, parents should contact (Assistant Superintendent of Special Education or his/her designee).

Eligibility for special education required meeting participants: parent, general education teacher, student (where appropriate), and case manager. CST member(s) and other school district personnel, when appropriate, can also be invited to attend.

Eligibility for speech/language services meeting participants: parent, student (where appropriate), general education teacher, and speech/language specialist.

Disability Categories

There are 14 categories for special education eligibility. The following defines each area of disability included in New Jersey Special Education Administrative Code, Chapter 14, Title 6A (6A:14-3.5):

- 1. **Auditorily 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.
- 2. **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. An assessment by a certified speech-language specialist and an assessment by a physician trained in neurodevelopmental assessment are required.
- 3. **Intellectually Disabled** means a disability that is characterized by significantly below average general cognitive functioning existing concurrently with deficits in adaptive behavior; manifested during the developmental period that adversely affects a student's educational performance and is characterized by one of the following:

"Mild intellectual disability" means a level of cognitive development and adaptive behavior in home, school, and community settings that are mildly below age expectations with respect to all of the following:

- (1) The quality and rate of learning;
- (3) The use of symbols for the interpretation of information and the solution of problems; and
- (4) Performance on an individually administered test of intelligence that falls within a range of two to three standard deviations below the mean.
 - i. "Moderate intellectual disability" means a level of cognitive development and adaptive behavior that is moderately below age expectations with respect to the following:
- (5) The ability to use symbols in the solution of problems of low complexity;
- (6) The ability to function socially without direct and close supervision in home, school and

- community settings; and
- (7) Performance on an individually administered test of intelligence that falls three standard deviations or more below the mean.
- (8) iii. "Severe intellectual disability" means a level of functioning severely below age expectations whereby in a consistent basis the student is incapable of giving evidence of understanding and responding in a positive manner to simple directions expressed in the child's primary mode of communication and cannot in some manner express basic wants and needs.
- (9) **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.
- (10) **Emotionally Disturbed (ED)** 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:
 - i. An inability to learn that cannot be explained by intellectual, sensory or health factors;
 - ii. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
 - iii. Inappropriate types of behaviors or feelings under normal circumstances;
 - iv. A general pervasive mood of unhappiness or depression; or
 - v. A tendency to develop physical symptoms or fears associated with personal or school problems.
- (11) Multiply Disabled (MD) 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.
- (12)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.
- (13)**Orthopedically Impaired** means a disability characterized by a severe orthopedic impairment that adversely affects a student's educational performance.
- (14)Other Health Impaired (OHI) 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.
- (15)**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:
 - ii. Physical, including gross motor, fine motor and sensory (vision and hearing)
 - iii. Cognitive
 - iv. Communication
 - v. Social and emotional
 - vi. Adaptive
- 11. **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.
- 12. **Specific Learning Disability (SLD)** 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:

- (1) Basic reading skills;
- (2) Reading comprehension;
- (3) Oral expression;
- (4) Listening comprehension;
- (5) Mathematical calculation;
- (6) Mathematical problem solving;
- (7) Written expression; and
- (8) Reading fluency.
- 13. **Traumatic Brain Injury (TBI)** 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.
- 14. **Visually Impaired** means an impairment in vision that, even with correction, adversely affects a student's educational performance

RECOMMENDATIONS

Eligibility for Special Education

In developing recommendations, the CST, parent, and any others present will discuss the evaluations and any other pertinent information on the student. The first decision is whether the student possesses an educational disability that adversely affects educational performance and requires special education and related services. If the CST determines that the student exhibits an educational disability, a determination must be made regarding the least restrictive educational setting in which the child can receive educational benefit from special education services. In order to accomplish this task, there are a variety of placements to consider. These placements range in levels of restriction, including class size, student-teacher ratio, and degree of inclusion.

The progression of services is as follows:

Replacement instruction takes the place of instruction in the classroom. Alternative teaching strategies are used to meet the learning needs of each student.

Support instruction provides students with instruction in study skills and assistance in organizing and/or understanding material that is being taught in the regular education classroom.

CONSENT

Consent means that the parent(s)/guardian(s) have been given all the information necessary to make an informed decision about the proposed activity. Consent also means that the parent(s)/guardian(s) understand and agree in writing to the proposed activity.

Consent is immediate. This means, after the parent(s)/guardian(s) have given written consent, the school district must start the activity as soon as possible.

Giving consent is voluntary. Parent(s)/Guardian(s) can revoke (withdraw) their consent at any time by writing to the school district. Revoking consent does not stop an action that has occurred after the consent was given and before the consent was revoked. The school district must accept a parent's/guardian's written revocation of consent and cannot utilize mediation or a due process hearing to seek to overturn that written revocation of consent. Within **20 days** of receiving the parent's/guardian's written revocation of consent, the school district must provide them notice that they have revoked consent and that their child is now a general education student.

The Individualized Education Plan (IEP)

Once a student has been found eligible for special education and related services or speech/language services, an IEP meeting must be held. This meeting is required before any special education services can commence. The purpose of the meeting is to determine the child's current educational status and develop a program designed to meet the child's unique needs. This meeting may be held immediately after the eligibility meeting with parent consent or within **15 days** of the eligibility meeting.

At the beginning of the meeting, all participants will be asked to sign and date an attendance sheet. This signature does not indicate consent or approval of the IEP. The IEP team works from a blank or draft version of the IEP to allow parents and other stakeholders to provide input at the meeting.

IEP Components

Present Levels of Academic Achievement and Functional Performance (PLAAFP)

The child's <u>Present Levels of Academic Achievement and Functional Performance (PLAAFP)</u> will be discussed, including how the child's disability affects involvement and progress in the general education curriculum.

Why the PLAAFP is Important

*Provides the critical information needed to design the specialized instruction for the student

*Identifies critical areas of need

*Identifies facilitators and inhibitors of learning

*Determines appropriate measure of growth

The PLAAFP MUST be

*Current

*Relevant

*Objective

*Measurable

*Understandable

The PLAAFP Should

*Describe how the disability impacts the student's involvement in the general education curriculum

*Convey the unique challenges or barriers that exist for the student as a result of the disability

*Describe the current levels of independence and any need for assistance

*Guide student's IEP goals

The PLAAFP Answers

*Where the student stands in terms of academic and functional performance

*How the student's disability affect their involvement and progress in the general education curriculum

*Where the student should begin with regards to priority annual goals

For preschool children, there will be a description of how the disability affects the child's participation in appropriate activities. This discussion will include the results of the initial or most recent evaluation and, as appropriate, consider the child's performance on any general statewide or district assessment. The sources of information including evaluation data, teacher reports, classroom observations, and other relevant information will be listed. The strengths of the child and the concerns of the parent will also be stated as well as the interests and preferences of the child, if age 14 and older.

If the IEP team determines that the child needs a particular assistive device or service, the IEP must include a statement to that effect in the appropriate section. These needs may include behavioral, communication, language, hearing, and vision and may additionally require assistive technology.

Transition and Transfer of Rights

A statement regarding your child's transition from an elementary to secondary program will be included based upon factors such as age, social, academic, and vocational development.

Beginning at age 14, a transition plan for the child's future will begin to be developed. A statement will be written about the child's interests and preferences and post-secondary plans. At age 16, the IEP will list the multi-year plan for promoting movement from school to the student's desired post-school outcomes.

At least three years before the student's 18th birthday, a statement advising both parent and student of the transfer of rights at age 18 will be included in the IEP.

Goals and Objectives

Annual measurable academic and functional goals may be developed that are related to the core curriculum content standards through the general education curriculum unless otherwise required according to the student's educational needs. Annual benchmarks or short term objectives will be included as will methods of progress reporting will be addressed.

Goals should be short-term goals

Throughout the year, teachers track progress toward goals and make adjustments to goals based on data and evidence collected.

Goals should be SMART

The **SMART** framework is used to help guide successful goal setting. When creating a goal, it is helpful to think through these criteria:

S-SPECIFIC
M-MEASURABLE
A-ATTAINABLE
R-RELEVANT
T-TIME-BOUND

Participation in General Education

The IEP will explain the extent, if any, to which the student will not participate with nondisabled peers in the general education class and in extracurricular and nonacademic activities and determine whether the student requires an extended school year (ESY) program.

In-district and State Assessments

Participation in district and state assessment will be addressed and, if necessary, modifications and or accommodations will be developed. Beginning at age 14, the IEP will identify the State and local graduation requirements that the student will be expected to meet for graduation. If the student is exempt from meeting any of the graduation requirements that all students are expected to meet or if any of the requirements are modified, this is addressed with the rationale.

Special Education Services

Special education services are listed by instructional area. For in-class programs, the amount of time the resource teacher is present in an in-class support class is noted. Related services are listed with the frequency, location (in class or pull out) and duration (length of session).

The least restrictive environment (LRE) is typically the child's neighborhood school. This is always considered first for placement, however, the IEP may be delivered in another school in the district, another public school district or a state approved school for special education students if that is considered the LRE for the particular student.

An IEP may be amended without a meeting if the parent or district makes a written request for such change and both parties are in agreement.

Parental consent **is** required to implement the **initial IEP**. The program and services will not begin prior to signed consent. All IEPs will be reviewed annually or more often if required.

Additional Topics Regarding Students with IEPs

Re-evaluation

A reevaluation will be conducted within three years of the child's prior eligibility meeting at which time the IEP team will discuss whether formal testing is warranted or if there is sufficient available information to continue the eligibility without formal testing.

A reevaluation may be waived with parental consent except for the reevaluation of preschool children to determine school age eligibility and when a change in eligibility is being considered, such as declassification.

If testing is not warranted, with written parental consent, the IEP team may proceed to the eligibility meeting. If testing is warranted, an evaluation plan is developed, written parental consent is obtained and the evaluations performed. Upon completion of the evaluations, the CST will provide the parent with copies of the district's evaluation reports 10 days prior to the eligibility meeting. These evaluations will help determine if the student continues to be eligible for special education services.

Transition Services

Transition services are those activities that are designed to assist the student from school to post-school activities. This may include preparation for postsecondary education, vocational training, employment skills, continuing and adult education, independent living, or community participation. Transition services include the instruction, related services, community experiences, and development of employment or other adult learning objectives sufficient to assist the student with becoming an independent and lifelong learner and adult. Transition services commence at age 14, or younger, if deemed appropriate by the IEP team.

Graduation Requirements

Specific graduation requirements are listed in the IEP of a student with disabilities commencing at age 14. The graduation requirements are reviewed annually at the IEP meeting, and if the student with disabilities is exempted from any local and/or state high school graduation requirements, the rationale for that as well as the alternate proficiencies which are required will be delineated.

A summary of performance (SOP) is required when a student graduates. The summary of performance includes a written summary of academic achievement and functional performance prior to the date of the student's graduation. This summary also includes recommendations to assist the student in meeting post-secondary goals

Assistive Technology

There is much information currently available related to assistive technology for special needs students. This information has raised many questions regarding how assistive technology can help your child with specific challenges related to his/her educational disability.

When looking for a solution regarding what is the most appropriate assistive technology for your child, a team approach is optimal. The focus of the team's work is to assess your child's strengths and challenges, consider his or her functional and educational needs and then identify specific tasks to be accomplished through goals and objectives in the IEP related to assistive technology. The final process in the team's work is matching an appropriate technology tool (high tech/mid tech/ low tech) that will support your child's identified need, keeping in mind that the least complex intervention needed to remove the barriers to performance should be the first consideration. A qualified assistive technology professional can assist in this process when needed. Parents and districts to work together to measure effectiveness of assistive technology and provide assessment and intervention as a dynamic and continuous process of problem solving toward each new step in achieving desired goals.

Related Services

When the IEP team, including the parents, meets to discuss the needs of the child, they will review evaluations and any other data, to determine the child's need for related services, in addition to the special education program. These services are provided when needed by the child in order to benefit from the individualized education program developed by the Team. The type, frequency and duration schedule or related service(s) must be included in the child's IEP. Some examples of types of related services, might include, but are not limited to:

- Speech and language therapy
- Physical therapy
- Occupational therapy
- Sensory Integration therapy
- Social skills training
- Peer buddy/peer mentoring
- Counseling
- School health services
- Adapted physical education
- Sign language interpreter for hearing impaired
- FM system in classroom for auditory impairment
- Reader services for visually impaired
- Orientation and mobility instruction
- Special transportation
- Assistive technology devices and services
- Transition services (starting in grade 6, as appropriate), must begin by 14
- Life skills training

Discipline for Students with Disabilities

Students with disabilities have three major sources of protection in disciplinary proceedings:

- The U.S. Supreme Court's decision in Goss v. Lopez
- The Individuals with Disabilities Education Improvement Act of 2004 (IDEA)
- The NJ Special Education Code

In <u>Goss v. Lopez</u>, the U.S. Supreme Court held that all public school students have a sufficient "interest" in their education to be entitled to at least minimal due process protections for a removal from school of up to ten school days, and more formal due process protections for longer removals.

Removal for Up to Ten Days

The minimal due process protections for a removal for up to ten school days include:

- The right to an informal meeting with the principal before suspension, except in an emergency
- The right to notice of the charges and the evidence against the student
- The right to explain his/her side of the story.

If the student with a disability is determined to be "guilty" of the disciplinary infraction through this informal procedure, IDEA allows the student to be suspended in-school or out-of-school for a comparable period of time as a student without a disability would be suspended. S/he has the right to be fair/equal treatment in determination of the consequences. In other words, the student with a disability should not be suspended longer than a student without a disability would be suspended for the same or similar behavior.

For removals of up to ten consecutive or cumulative days,

The student with a disability is not entitled to:

- A manifestation determination
- An IEP/positive behavior support plan review
- Educational services during the period of exclusion, UNLESS state law, district policy, or the student's IEP explicitly requires services during even short-term exclusions. The IEP may prohibit suspension as a response to student behavior. School personnel may consider "any unique circumstances on a case-by-case basis" to reduce the allowable term of suspension.

If the district plans to suspend a student who has already been suspended more than ten cumulative days within the school year, it must first consider whether or not the cumulative days of suspension have amounted to a "change of placement." In making this determination, the district must consider factors such as:

- The length of each removal
- The total amount of time the student is removed, and
- The proximity of the removals to one another.

If the district determines that an additional removal would result in a change of placement using the above criteria, it must follow the procedural requirements for an exclusion of greater than ten consecutive days.

Removal for More than Ten Days

For exclusions longer than ten days, students with and without disabilities have the right to a more formal due process hearing to determine their "guilt," including the right to:

- Notice of the charges and evidence against them
- Question and present witnesses
- Review and present evidence
- Bring an attorney or advocate (at their own expense).

Manifestation Determination

If the student with a disability has been determined to have committed an offense that violates a school rule or the school code of conduct that could result in an exclusion for longer than ten days, the IEP team must conduct a manifestation determination within the first ten days of removal. The manifestation determination meeting is held with the parent and relevant members of the IEP team. The team reviews all relevant information in the student's file, the IEP, teacher observations, and any relevant information from the parent(s) and student.

The IEP team must determine that the behavior was a manifestation of the disability if:

- The conduct was caused by, or had a direct and substantial relationship to, the child's disability, or
- The behavior was a direct result of the district/school's failure to implement the IEP.

To conduct a manifestation determination, the parent and the IEP team should:

- Collect and examine the records of behavior of the student over the period of the current IEP, explicitly looking to see if similar behaviors have been occurring;
- Examine the components of the existing positive behavior support plan for their impact in increasing or decreasing behaviors of concern;
- Collect information on the student's general school performance from school staff;
- Collect information on home behavior concerns from parents;
- Review historical academic and behavior data regarding the student, with a particular eye to whether this type of behavior was one of the original reasons for referral;
- Interview the student, with an emphasis on the student's current mental health and the student's understanding of the school policy violation;
- Interview teachers, seeking to identify the extent to which the problem behaviors are "normal" for the student;
- Interview administrators regarding this violation and what their investigation found;
- Review the student's current program and placement for appropriateness;
- Consider the usual characteristics of individuals with this student's disability;
- Consider the cognitive, emotional, and behavior status of the student in regard to school policy violations and self-control; and
- Review options for available and appropriate programming.

** Once a student has been removed from school for 10 days either consecutively or cumulatively, they have a right to receive a free, appropriate public education during the period of any additional removal.

**No manifestation determination is required if the student carried or possessed a gun or dangerous weapon, knowingly possessed or used illegal drugs, sold or solicited a controlled substance, or inflicted serious bodily injury on another at school, on school grounds, or at a school function.

Functional Behavior Assessment & Positive Behavior Support Plan

The IEP team must:

- Conduct a functional behavior assessment and implement a positive behavior support plan, unless that has already been done;
- If a positive behavior support plan has been developed, review and modify it as necessary.

If the behavior is a manifestation of the student's disability, the student must be returned to their current placement no later than the 11th day following their removal, unless the parent and IEP team agree otherwise. (A parent and the team can always agree to a change of placement.) If the behavior is not a manifestation, the student may be disciplined, suspended, or expelled to the same extent as a student without a disability. However, s/he must continue to receive a free, appropriate public education during any period of removal of more than ten days.

Pendency Placement

If the parent appeals the decision that the student's behavior was not a manifestation of their disability, or if the student committed an offense that can lead to placement in an Interim Alternative Educational Setting, the pendency placement during appeal is the IAES. The hearing must be held within 20 school days of the request, with a decision within 10 school days of the hearing.

Removal to an Interim Alternative Educational Setting

A student may be removed unilaterally (without parental consent or permission of an impartial hearing officer) by the school to an Interim Alternative Educational Setting for up to 45 days*** if it is determined that the student, at school, on school premises, or at a school function:

- Carried or possessed a gun or dangerous weapon (as defined by U.S. Criminal Code)
- Knowingly possessed or sold illegal drugs, or sold or solicited a controlled substance
- Inflicted serious bodily injury (bodily injury that involves substantial risk of death, extreme physical pain, protracted or obvious disfigurement, or protracted loss or impairment of the function of a bodily member, organ, or mental faculty) on another.

*** Federal law and regulations allow removal for up to 45 school days, but the NJ Special Education Code has limited the removal to 45 calendar days, a much shorter time-frame but still a significant amount of time.

Out-Of-District Placement

In extreme cases, the IEP team, which includes the parent, may determine that a child's needs cannot be met with the programs or resources available in the district. In these cases, the child may be sent to a program outside of the district. The program selected must be considered the least restrictive environment for that child.

The following are examples of out-of-district programs listed from least to most restrictive:

- Program in another public school district
- Regional day school/jointure commission
- Program in a private school
- Public residential placement
- Private residential placement

Statewide Assessments

The majority of students classified as eligible for special education and related services will be expected to participate in statewide assessments. Students who need to remediate their skills to achieve test proficiency are encouraged to participate in the various tutoring and intervention programs offered by the district.

Some students qualify to be "Exempt", "Not Accountable to Pass", or will be considered "Accountable to Pass" the required Statewide Assessments or if students will be taking Alternate Proficiency Assessments.

Alternate Proficiency Assessment (APA) is designed to measure progress toward achieving New Jersey's state educational standards for those students with severe cognitive disabilities or other severe disability that renders them unable to participate in the statewide assessments.

Students classified as eligible for special education and related services as well as those students eligible under Section 504 of the Rehabilitation Act 2008 may have accommodations and/or modifications during the administration of statewide assessments.

Extended School Year Program (ESY)

Some children may require the provision of services beyond the traditional school year. Such services are known as **E**xtended **S**chool **Y**ear **(ESY)** services. Extended School Year (ESY) programs are special education programs provided to children during the summer vacation months, during other school vacations, on weekends or after the regular school day. {NJAC 6A:14-1.3}

The IEP team, including the parent or guardian, is responsible for making an individualized determination as to whether a child needs ESY services in order to receive a FAPE, and the IEP team must consider all relevant factors such as:

- the degree of the child's impairment
- the degree of regression suffered by the child during interruptions in educational programming and the recovery time from this regression
- the child's rate of progress
- the child's behavioral and physical problems
- the availability of alternative resources
- the ability of the child to interact with non-disabled children
- the areas of the child's curriculum which require continuous attention
- the child's vocational needs
- whether the requested service is extraordinary to the child's condition, as opposed to a
 necessary part of a program for those with the child's condition. {34 C.F.R. 300.106(b);
 N.J.A.C. 6A:14-4.3(c)}

DISMISSAL FROM SPECIAL EDUCATION

If the IEP team, including the parents or guardians, determines that a student no longer requires special education and related services, s/he must be considered for declassification from special education. A re-evaluation meeting must be held, and the IEP team, including the parents or guardians, will discuss and decide whether additional testing is required to determine whether the child remains eligible for special education.

Following review of additional evaluations and data a determination may be made, during a determination meeting with IEP team, including the parents or guardians, and with the agreement of the entire team, the child may be dismissed from special education.

If the parents or guardians disagree with the recommendation to dismiss the child from special education, they must provide written disagreement to the case manager and a copy to the director of special services within **15** calendar days, excluding holidays but not summer vacation. The district must respond to any written disagreement within **20** calendar days, excluding holidays but not summer vacation, of receipt of the written parental disagreement or request for action, to let the parent know whether or not they will do what the parent has asked them to do or whether a meeting is required to make a determination.

If a meeting is necessary to make a determination, it must be held and a determination made within **20** calendar days, excluding holidays but not summer vacation, of the parent's written request or expression of disagreement, with written notice of determination provided within **15** calendar days of the meeting.{NJAC 6A-14: 2.3(h)(5) & (5)(I)}

Frequently Asked Questions (FAQs)

1. Can you explain the different types of meetings that occur before and after classification?

Answer:

I&RS Meeting: The I&RS Team process is a collaborative school effort between district personnel and parents to intervene when a child has been identified as making minimal academic and/or emotional progress in the general education setting. The team or committee collects and evaluates relevant data in order to determine or identify specific barriers to student performance.

Identification Meeting: This meeting provides the opportunity for the school and/or parents to convey concerns related to the child's educational progress. The full CST is in attendance and will determine if an evaluation is warranted. If an evaluation is warranted, the CST will develop an evaluation plan and present it to the parents for their consent. If the parents consent to the plan, the CST has **90 days** to complete the assessments, determine the child's eligibility, and have the child placed in a program.

Eligibility Meeting: At this meeting, the case manager presents the findings from the completed assessments, reviews the child's eligibility status, and if eligible, develops appropriate programming for the student in collaboration with the IEP team.

IEP Meeting: In this meeting, the IEP team reviews the child's progress in the current program and then plans for future programming based on the information presented.

2. At what point is my child considered classified?

Answer:

After the eligibility meeting is held that deems the child eligible for special education and related services.

3. Does my child have to be classified to receive speech/language services?

Answer

Yes, either as eligible for special education and related services or as eligible for speech/language services.

4. I would like my child evaluated for special education eligibility by an outside agency. Can this be done?

Answer:

Parents are entitled to an independent evaluation of their child at no cost if they are in disagreement with the evaluation provided by the district's CST. The independent evaluation would occur, however, after the district's CST has conducted its own evaluation. Districts often maintain a list of agencies that provide independent evaluations. It is important that the district's CST evaluate your child since it is in the best position to observe classes, speak to teachers and be knowledgeable of curriculum delivery in the child's school. The evaluation process also helps the CST become more knowledgeable of your child's needs and puts the CST in a better position to assist teachers and therapists who may be working with your child in the future.

5. I have had a private evaluator assess my child and several recommendations are made in the evaluator's report. Will these be accepted by the district?

Answer:

The district's CST must consider the findings of any evaluation provided by the parents of a student receiving special education or undergoing consideration for services. In some cases, the entire report may be accepted, in other cases a portion of the report, and in some instances the CST may not accept the findings of a report. The CST should provide you with its determination in this regard and the reasons for its determination.

6. My child is receiving private services outside the school day and is responding well to the methodology that is used in this program. Will the school district adopt this methodology if I request it?

Answer:

The fact that your child is responding to a particular strategy or method is important information of which the IEP team should be aware. To the degree possible, the district staff may wish to implement strategies that the parent identifies as productive for the child. The ability to adopt a particular method may be limited in many instances by factors such as environmental conditions (some methods that are successful in a non-school setting do not transfer to a classroom setting), specific training requirements, or a lack of supportive scientific research. For these reasons, districts are given the responsibility of choosing the method which they view to be most appropriate. However, particular methodologies are not a required component of an IEP.

7. Are parents part of the team who decides eligibility for special education and related services?

Answer:

No. Although parental input is utilized in making eligibility determinations, the CST is responsible for determining eligibility for special education and related services and consent is not required.

8. What do I do if I just want occupational therapy?

Answer:

Occupational therapy is a related service and is only required to be provided if a student is determined as eligible for special education and related services and then found to be in need of occupational therapy, as determined by the IEP team based upon an occupational therapy evaluation.

9. When is a child eligible for Extended School Year (ESY) services?

Answer:

The IEP team determines eligibility for ESY services by reviewing several factors. One factor to be considered includes the regression/recoupment analysis which considers the amount of regression a child experiences as a result of an interruption in educational services over the course of the summer with the amount of time required to regain the prior level of skill upon the child's return to school in the fall. The IEP team may also consider other factors such as the nature and severity of the child's disability.

10. As a parent, am I a member of the CST and IEP team?

Answer:

The CST consists of a school psychologist, a learning disabilities teacher/consultant, school social worker, and when needed, a speech-language specialist, responsible for conducting evaluations to determine eligibility for special education and related services for students with disabilities. Parents are members of the IEP team. (See glossary for definition of IEP team.)

11. What are related services?

Answer:

Related services are services that are provided to help classified students benefit from special education. The services are specified in the student's IEP and are provided in conjunction with the special education program. Many times the related services to a special education program are provided in the classroom setting. Some examples of related services include:

- 1. counseling services
- 2. occupational therapy
- 3. physical therapy
- 4. speech/language services
- 5. transportation
- 6. nursing services (medication administration/monitoring)
- 7. parent training

12. Once my child is classified, can my child receive transportation if I live too close for the regular bus?

Answer:

While transportation is a possible related service, some classified students are not eligible for transportation as part of their IEP. If the IEP is placing a student at a school other than his home school, transportation may be provided.

13. Who has access to student records?

Answer:

The parent, adult student or their designated representative has access to inspect and review the contents of the student's records kept by the school district. The school district's certified staff who has educational responsibility for the student has access to the student's records. Certified educational staff employed by approved private schools, outside clinics and agencies that the district employs and who has educational responsibility for the student also have access to the student records. Secretaries and

clerical staff have limited access, under the supervision of certified staff, to access the student records so that they can enter or record data and conduct routine clerical tasks.

Additionally, the district must obtain consent from the parent or adult student before releasing the student's records to a person or organization that is not otherwise authorized to see them.

14. Can I change my mind about my child receiving special education services?

Answer:

A parent may remove their child from special education at any time through a process known as "Revocation of Consent". In such a case, the parent should put their decision in writing to the Assistant Superintendent of Special Education or his or her designee. The school district is then required to respond in writing indicating they are aware of the parent's decision and will act accordingly. The decision of the parent in this regard is final.

Glossary of Terms/Acronyms

Applied Behavior Analysis (ABA): A set of scientific principles and guidelines which uses direct observation, measurement, and analysis of the relationship between the environment and behavior. In programming for students with autism, ABA employs intensive, highly structured teaching approaches where skills are broken down into their simplest most manageable form.

Accommodations: Techniques and materials that allow individuals with disabilities to complete school or work with greater ease and effectiveness. Examples include spell checkers, tape recorders, and expanded time for completing assignments.

Adaptive Physical Education: A diversified program of physical education having the same goals and objectives as general physical education, but modified when necessary to meet the unique needs of each student.

Alternative Assessment: An alternative to conventional means of assessing achievement; usually using something other than a paper and pencil test, such as oral testing or work sample review.

Alternate Proficiency Assessment (APA): An assessment designed to measure progress toward achieving New Jersey's state educational standards for those students with severe disabilities who are unable to participate in the state's standardized testing regimen.

Assistive Technology (AT): Any item, piece of equipment, or product system that is used to increase, maintain, or improve functional capabilities of individuals with disabilities.

Auditory Discrimination: The ability to recognize, compare, and differentiate the discrete sounds in words.

Auditory Memory: The ability to remember something heard some time in the past (long-term auditory memory); the ability to recall something heard very recently (short-term auditory memory).

Behavior Modification: A technique intended to alter behavior by positive reinforcement (rewarding desirable actions) and extinguishing undesirable actions.

Behavioral Intervention Plan (BIP): The term can be generally defined as a component of a child's IEP that describes positive behavioral interventions and other strategies that the district must implement to prevent and control unacceptable behaviors.

Care Management Organizations (CMO's): Agencies that provide a full range of treatment and support services to children with the most complex needs.

Central Auditory Processing Disorders (CAPD): The inability to attend to, discriminate, recognize or comprehend what is heard, even though hearing and intelligence are normal.

Child Study Team: Consists of a school psychologist, a learning disabilities teacher/consultant, school social worker, and when needed, a speech-language specialist, responsible for conducting evaluations to determine eligibility for special education and related services for students with disabilities.

Cognitive Ability: Cognitive, intellectual or innate ability tests measure identifiable skills related to learning or potential. Cognitive ability is often broken down into components such as verbal skills, non-verbal skills, processing speed and/or working memory.

Compensatory Strategies: Ways in which a student is taught to manage his or her learning problems, by manipulating and emphasizing strengths as a way to work around skills and/or abilities which may be limited.

Decoding: The process of acquiring meaning from spoken, written, or printed symbols used in receptive language.

Developmental Delay: Failure to meet expected developmental milestones in one or more of the following areas: physical, social, emotional, intellectual, speech and language and/or adaptive development. Developmental delay is usually a diagnosis made by a doctor based on strict guidelines.

Direct Instruction: A method for teaching that provides consistent interaction between students and the teacher.

Discrimination: The process of differentiating between and/or among separate stimuli, either visually or auditorally.

Due Process: A defined procedure to settle a dispute between the parent and the school.

Dynamic Learning Maps (DLM): An alternate assessment project that offers an innovative way for all students with significant cognitive disabilities to demonstrate their learning throughout the school year via the DLM Alternate Assessment System.

The DLM system is accessible by students with significant cognitive disabilities, including those who also have hearing or visual disabilities, and/or neuromuscular, orthopedic, or other motor disabilities. Assessments produced by the DLM consortium are flexible. They allow for the use of common assistive technologies in addition to keyboard and mouse and touch-screen technology. *The DLM replaced the APA portfolio for language arts and mathematics in New Jersey.*

Dyslexia: A language processing disorder characterized by a difficulty in reading experienced by students who otherwise possess the intelligence and motivation considered necessary for accurate and fluent reading.

Educational Evaluation: An assessment of a student based on multiple tests, analysis of class work, classroom observation, and teacher input intended to determine levels of achievement in certain academic areas, as well as the student's learning style and perceptual abilities.

Encoding: spelling

Expressive Language: Communication through speech, writing, and/or gestures.

Extended School Year: Extended school year services during the summer months is considered and discussed at the annual IEP review meeting. Special education and related services that are provided to a student with disabilities beyond the typical school year in accordance with the student's IEP.

Executive Functioning: Executive Functioning comprises those skills that allow an individual to interact with the environment effectively and efficiently. They include assessing the overall situation, setting goals, devising a plan to reach those goals, staying on track, and monitoring one's own performance. They also include regulating one's actions and responses.

Fine Motor Skills: The use of small muscles to complete precise tasks such as writing, drawing, buttoning, opening jars, and assembling puzzles.

Free and Appropriate Public Education (FAPE): An educational right of children with disabilities in the United States that is guaranteed by the Rehabilitation Act of 1973 and the Individuals with Disabilities Education Act (IDEA).

Functional Behavior Assessment (FBA): A process to determine which behaviors are limiting educational progress; to design interventions that decrease target behaviors; and to promote appropriate behavior(s) through positive behavioral supports.

General Education: An educational program which follows the regular education programs which follow the core curriculum content standards.

Gross Motor Skills: The use of large muscles for activities involving strength and balance, such as walking, running and climbing.

IEP Team: The group of individuals who are responsible for the development, review and revision of the student's individualized education program.

In Class Support: Programs taught with the general education classroom teacher and the special education teacher; the student has to meet the general education curriculum requirements for the grade or subject being taught; there will be modification to the instructional strategies or testing procedures which should be listed in the student's IEP.

Inclusion/Mainstreaming: The practice of placing a student who has special education needs into general education classrooms for a least part of the student's educational program.

Individualized Education Plan (IEP): The written educational program designed for each classified student, incorporating certain information such as educational goals (long-term and short-term), the duration of the program, and provisions for evaluating the program's effectiveness and the student's performance.

Individual Service Plan (ISP): A written educational plan developed to support classified students in non-public schools.

Interim Alternative Educational Setting (IAES): A term for an educational setting and program other than the student's current placement that enables the student to continue to receive educational services according to his or her Individualized Education Program.

Learning Styles: The ways in which a student best understands and retains learning, (e.g., vision, hearing, movement, kinesthetic, or a combination). Learning style specific approaches to assessment or instruction emphasize the variations in temperament, attitude, and preferred reflective/impulsive or verbal/spatial dimensions.

Least Restrictive Environment (LRE): To the maximum extent appropriate, students with disabilities are educated with students who are not disabled and special classes, separate schooling, or other removal of students with disabilities from the regular educational environment occurs only when the nature and severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Mainstreaming/Inclusion: The practice of placing a student who has special education needs into general education classrooms for at least part of the student's educational program.

Manifestation Determination: In connection with the discipline of students with disabilities, a determination whether the misconduct at issue was either a manifestation of the disability or the result of an inappropriate placement.

Neurological Evaluation: An examination that specifically focuses on mental status, cranial nerves, motor functions, deep tendon reflexes, sensation and gait abilities; when used more in a psychiatric context, also refers to an examination of an individual's thinking ability.

Partnership for Assessment of Readiness for College and Careers (PARCC): K–12 assessments in Mathematics and English Language Arts/Literacy that provide teachers, schools, students, and parents information on whether students are on track in their learning and for success after high school, and provide tools to help teachers customize learning to meet student needs. *PARCC replaced the NJASK and HSPA testing in New Jersey*.

Pre-Referral Process: A procedure in which staff members and parents develop intervention strategies to assist a student who is having difficulty in learning, behavior or socialization to function in the general education classroom. In New Jersey this is often referred to as Intervention and Referral Services (I&RS).

Present Levels of Academic Achievement and Functional Performance (PLAAFP): The present level of academic achievement and functional performance (PLAAFP) is the first written statement in the IEP plan documentation of the child's ability and current achievement at the time the IEP is written.

Psychiatric Evaluation: An evaluation designed to diagnose any number of emotional, behavioral, or developmental disorders. An evaluation of a child or adolescent is made based on behaviors present and in relation to physical, genetic, environmental, social, cognitive (thinking), emotional, and educational components that may be affected as a result of the behaviors presented.

Psychological Evaluation: The evaluation of a student's intellectual, behavioral, social, and emotional characteristics by a certified school psychologist.

Related Services: Services that are provided to help classified students benefit from special education. The services are specified in the student's IEP and are provided in conjunction with the special education program. Some examples of related services include: counseling services, occupational therapy, physical therapy, nursing services, parent training, social work, speech/language services, and transportation.

Resource Center Replacement Programs: The subject is taught by the special education teacher. The resource center instruction includes individual and small group instruction.

Response to Intervention (RTI): The Response to Intervention (RTI) model for school-age children who are at-risk for learning disabilities emphasizes pre-referral prevention and intervention. RTI can be distinguished from traditional methods of identifying learning disabilities in that it allows early and intensive interventions based on learning characteristics and does not wait for children to fail before providing necessary services and supports. The major premise of RTI is that early intervening services can both prevent academic problems for many students who experience learning difficulties and determine which students actually have learning disabilities, as distinct from those whose underachievement can be attributed to other factors such as inadequate instruction.

Although several variations of the model have been proposed, in general RTI is based upon three components:

- a. the use of multiple tiers of increasingly intense interventions;
- b. a problem-solving approach to identify and evaluate instructional strategies; and
- c. an integrated data collection and assessment system to monitor student progress and guide decisions at every level.

Section 504: A federal law designed to protect the rights of individuals with disabilities in programs and activities that receive federal funds from the U.S. Department of Education (ED). Section 504 provides: "No otherwise qualified individual with a disability in the United States . . . shall solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance . . . "

Self-Contained Programs: Taught by the special education teacher, this is considered a special class program that serves students with similar educational needs, instruction is usually provided with an alternative curriculum based upon the nature or severity of the student's disability and in accordance with the student's IEP goals and objectives.

Standardized Test (Norm Referenced Test): Are designed to give a common measure of the student's performance. Since the same test is given to large numbers of students throughout the country, a common yardstick or "standard" of measure can be derived to give evaluators a picture of the skills and abilities of students.

Supported Instruction: The support of a student's education in the general education class by a paraprofessional.

Transition: A coordinated set of activities for a student, designed within an outcome-oriented process, that promotes movement from school to post-school activities, including post-secondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation. Transition services for students with disabilities may be special education, if provided as specially designed instruction, or related services, if required to assist a student with a disability to benefit from special education.

Traumatic Brain Injury (TBI): The physical damage to brain tissue or structure that occurs before, during, or after birth that is verified by EEG, MRI, CAT, or a similar examination rather than by observation or performance.

Vocational Assessment: Assessment to determine the eligibility and appropriate programming for students receiving vocational education, including assessment of skills, aptitudes, interests, work ethic and social skills.

ACRONYMS

ADA Americans with Disabilities Act

ADD Attention Deficit Disorder

ADHD Attention Deficit Hyperactivity Disorder

Al Auditory Impairment

AT Assistive Technology

AU Autism

BD Behavioral Disabilities

BIP Behavior Intervention Plan

CASA Court Appointed Special Advocates

CI Communication Impaired

CMOs Care Management Organizations

COTA Certified Occupational Therapist Assistant

CST Child Study Team

DB Deaf-Blindness

DCP&P Division of Child Protection and Permanency formerly known as DYFS Division of Youth and

Family Services

DDD Division of Developmental Disabilities

DOE Department of Education

DSM Diagnostic and Statistical Manual of Mental Disorders

ED Emotionally Disturbed

ESERS Eligible for Special Education and Related Services

ESY Extended School Year

FAPE Free Appropriate Public Education

FBA Functional Behavior Assessment

FSO Family Support Organization

HI Hearing Impaired

ICR In-Class Resource (w/Special Education Teacher)

IDML Mildly Cognitively Impaired

ID Moderately Cognitively Impaired

ID Severely Cognitively Impaired

IDEA Individual with disabilities Education Act

IEP Individualized Education Program

INTPS Integrated Preschool

LD Learning and/or Language Disabilities

LDT/C Learning Disabilities Teacher / Consultant

LEA Local Education Agency (School District)

LEP Limited English Proficiency

LLD Learning or Language Disabilities

LCSW Licensed Clinical Social Worker

LPT Licensed Physical Therapist

LRE Least Restrictive Environment

MCI Moderately Cognitively Impaired

MD Multiple Disabilities

NJAC New Jersey Administrative Code

NJAC 6A:14 New Jersey Administrative Code Special Education Code

OCD Obsessive Compulsive Disorder

ODD Oppositional Defiant Disorder

OHI Other Health Impaired

OI Orthopedically Impaired

OT Occupational Therapist

OTR Occupational Therapist Registered

PLAAFP Present Levels of Academic Achievement and Functional Performance

PSD Pre-school Disabled

PT Physical Therapist

PT Physical Therapy

PTSD Post-traumatic Stress Disorder

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

SPANNJ Statewide Parent Advocacy Network of New Jersey

TBI Traumatic Brain Injured

TTM Team Teaching Model

VI Visual Impairment

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